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► **Outpatient versus inpatient opioid detoxification: a randomized controlled trial.**

Day E., Strang J. [Request reprint](#)

**Journal of Substance Abuse Treatment: 2011, 40, p. 56–66.**

Methadone maintained heroin-dependent patients in Birmingham (UK) randomised to inpatient v. outpatient lofexidine-based detoxification rarely sustained long-term opioid abstinence; return to maintenance was the typical outcome.

**Original abstract** Opioid detoxification is not an effective stand-alone treatment for heroin dependence but is nevertheless an essential step in the path to recovery. There has been relatively little previous controlled research on the impact of treatment setting on the likelihood of successful completion of detoxification. In this study, 68 opioid-dependent patients receiving community treatment (predominantly with methadone) and requesting detoxification were randomly assigned to an inpatient versus outpatient setting. Both groups received the same medication (lofexidine), and the primary outcome measure was being opioid-free at detoxification completion. More inpatients (8, 51.4%) than outpatients (2, 36.4%) completed detoxification, but this difference was not statistically significant. However, the outpatient group received a significantly longer period of medication, and when the length of detoxification was controlled for, the results significantly favoured the inpatient setting. Only 11 (16%) participants were opioid-free at the 1-month follow-up and 8 at the 6-month follow-up, with no between-group difference. Inpatient and outpatient opioid detoxification settings were not significantly different in completion or follow-up abstinence rates, but aspects of the study design may have favoured the outpatient setting. Future studies should test patient characteristics that predict better outcomes in each setting.

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