

In Australia heroin addicts trying to avoid relapse by taking the opiate-blocking drug **naltrexone** run at least a **1 in a 100 chance of dying** within about three months, usually from opiate overdose in the fortnight following treatment termination. The true figure may be 8 in a 100, many times higher than in methadone or buprenorphine substitute prescribing programmes. Naltrexone blocks the effects of opiates, reducing tolerance levels to practically zero and leaving patients vulnerable to overdose if they stop taking the medication. Together with very poor retention in treatment and the high rate of post-treatment relapse, it means the attempt to promote abstinence by prescribing opiate blockers is potentially extremely risky.

The study behind these figures found that in the years 2000 to 2003, per 1000 episodes of treatment with the respective medications, there were 10 deaths related to oral naltrexone, virtually none to buprenorphine, and just under three to methadone. **1** All but five of the naltrexone deaths occurred in the two weeks following the end of treatment, which typically lasts two months. In the same period there was just one death after methadone treatment. Instead, the high risk period was the first week of treatment. Nevertheless, over an equivalent time, the death rate in the high risk period for naltrexone (post-treatment) was over seven times higher than during the high risk period for methadone (induction).

Nuggets 14.3 11.2
11.1 3.1 2.1
Nuggette 3, Issue 14

For several reasons, the disparity between deaths associated with oral naltrexone treatment compared to substitute prescribing is likely to have been even greater. Most important is that since deaths typically occur after naltrexone has been cleared from the system, a possible relationship with prior treatment is often omitted from official records. In one Australian state, another investigation uncovered over seven times more naltrexone-related deaths than the featured study was able to identify. If this was the case nationally, 8% of patients starting naltrexone treatment would die within about three months. Naltrexone implants were not included in the calculations and have not yet (studies are few) been associated with an elevated death rate.

1 Gibson A. *et al.* *Mortality related to naltrexone in the treatment of opioid dependence: a comparative analysis*. NDARC Technical Report 229. [Australian] National Drug and Alcohol Research Centre, 2005. Summary at <http://ndarc.med.unsw.edu.au>, full report from NDARC, University of New South Wales, Sydney, NSW 2052, Australia.