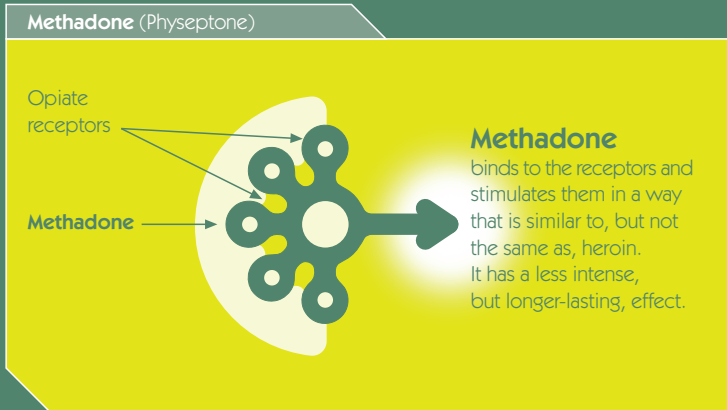
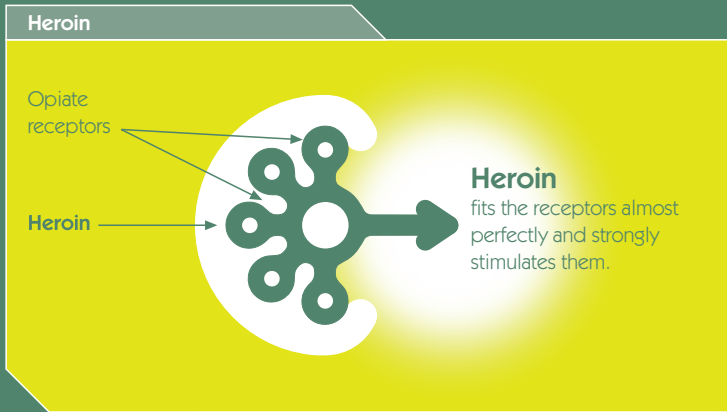


Drugs work by stimulating receptors in the brain. These pictures show how methadone stimulates the opiate receptors enough to take away, or reduce, the desire to take heroin.



TREATMENT CHOICES

METHADONE [PHYSEPTONE]

BUPRENORPHINE [SUBUTEX]

LOFEXIDINE [BRITLOFEX]

NALTREXONE [OPIZONE | NALOREX]

SUBOXONE [SUBUTEX + NALOXONE]

There are a number of drugs that can be prescribed to help you if you are dependent on opiates like heroin.

There is not, and never will be, a 'magic cure' that can stop everyone taking opiates. And there is no perfect long-term replacement for everyone using heroin.

However, the drug treatments, and help from the services that offer them, might be able to help you make any changes you want to make.

This leaflet is one of a series designed to help you understand what you can expect from the different drug treatments that may be on offer.

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EXCHANGE
SUPPLIES

TREATMENT CHOICES

methadone
[PHYSEPTONE]

DETOX

MAINTENANCE



Long-lasting

Methadone is a much longer-acting drug than heroin. For most people, this means that they can take it once a day and be free of withdrawals for 24 hours.

Methadone takes about four days from the start of treatment to build up in your system and to give full effect. The risk of death from an overdose during this period are high, especially if you use heroin, alcohol, tranquillisers (such as valium) or sleeping pills on top.

The fact that methadone takes time to build up in the system also means that when you miss a dose it can take two or three days for things to get back to normal.

Methadone maintenance is much more effective when you get a big enough dose (for most people this is 60mg to 120mg a day), and take it every day.

Different feeling

Methadone doesn't give the same rush or hit as heroin – the effects are less intense, and come on more slowly. But if you have been dependent on heroin, switching to methadone can give you freedom from withdrawals, and freedom from the feeling that you need to score every day.

What methadone can do

Methadone is the drug most commonly prescribed to people who are dependent on heroin because it can help you to:

- stop using heroin or greatly reduce the amount you take;
- greatly reduce your risk of dying from overdose;
- stop injecting (or inject less often and with less risk);
- improve your physical health and housing situation;
- reduce criminal activity; and
- have more stable relationships.

So, although you will still be taking an opiate, your drug use is likely to be much less dangerous and less of a problem because it is free, legal and you can take it once a day.

Methadone can be prescribed safely for many years without causing any damage to your bones, liver, brain, heart, reproductive or immune system. If you relapse when you try and get off, methadone maintenance may be the best option.

More addictive?

Physically, the withdrawals from methadone may last longer than those from heroin, but they aren't usually quite as severe. Whichever way you look at it, there isn't much in it – methadone and heroin are both powerful drugs that are very hard to get off.

If you have become dependent on heroin **and can't get off it**, a stable methadone prescription might give you the chance to get some sort of normality back into your life. You will then have the time and space to decide where to go next.

Overdose

Methadone can be very dangerous in overdose. It can easily kill people who aren't used to it.

Drinking alcohol or taking other opiates, sleeping pills or tranquillisers greatly increases the risk of overdose.

Further information

There is a thorough guide to methadone, called '**The Methadone Handbook**', which is also usually available free from drug services and covers everything you need to know about methadone and methadone treatment. You will find details of where to get a copy over the page.

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