



Accurate Clinic

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When should methadone be used for pain instead of other opioids?

Because methadone is one of the most potent opioid pain medicines available, it is generally reserved for those chronic pain patients who have developed a high tolerance to opioids based on years of use. As a result of this tolerance, many of the more commonly available opioids such as hydrocodone or oxycodone are no longer effective or extremely high doses are required to achieve pain relief. The advantages of methadone are numerous. It is affordable, even for those without insurance. Its pain relieving benefits are rapid in onset and are longer lasting than most other opioids, lasting up to 12 hours without the need for a time-release formulation. Methadone appears to be one of the most effective opioids in managing neuropathic pain, the sharp, burning or stabbing pain thought to be related to irritated nerves. And there is evidence that the build up of tolerance with methadone is one of the slowest of all opioids.

What are the disadvantages of methadone as a pain reliever?

Methadone has a social stigma attached to it because of its history of being used to treat opioid addiction, especially heroin, which makes some people uncomfortable associating themselves with it. Apart from education, there is little way around this except perhaps using the original brand name for methadone: "Dolobid."

The main pharmacologic advantage AND disadvantage of methadone lies in its potency. While it offers the same risks and side effects common to all opioids, because it is strong, one must be careful to follow the physician's dosing instructions carefully. There are, however, some special precautions advised for those taking methadone.

What are the special precautions advised when taking methadone?

Methadone has certain characteristics that require added caution for its safe use. The metabolism of methadone is complex which makes it potentially susceptible to drug interactions with other prescription medications, herbal and nutritional supplements or even grapefruit juice, which can lead to higher methadone blood levels than otherwise expected and result in accidental overdose. Also, when a dose increase of methadone is initiated it may take a full week before the rising blood level equilibrates, so that any increase in dosing of methadone should be done slowly and under a physician's direction.

Another characteristic of methadone is that it may disrupt the conduction of electrical impulses in the heart, which allow the heart to beat rhythmically (measured by the QTc interval on an EKG). This disruption can lead to palpitations or blackout spells, even sudden death. However, while such disruptions are thought to be rare, the risk for this complication appears to be highest in the elderly, those with heart disease, those on high doses of methadone, those with electrolyte abnormalities and those taking other medications that also prolong the QTc interval. For this reason, your physician will want to monitor your EKGs for evidence of this effect while taking methadone.

For the reasons above, it is important that any physician prescribing medications to someone taking methadone be aware of these possible drug interactions. Since not all physicians are experienced with managing patients taking methadone, we strongly advise patients taking methadone to always call our clinic to notify us if any new medications are added to your regimen so that we can advise you of any special precautions that should be taken to avoid dangerous drug interactions.

How should this medicine be taken?

Methadone may be taken every 8-12 hours, or more frequently, depending on how your doctor advises. All the usual precautions associated with taking opioids apply to methadone: there is potential toxicity when taking other sedative drugs especially the benzodiazepines such as Xanax, Klonopin and Valium, antidepressants and alcohol.

When your doctor changes your dose of methadone, please follow his instructions carefully as the dosing of methadone has many variables that can affect safety. Ask your doctor if you have any questions about how much methadone you should take or how often you should take it.



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Do not stop taking methadone without talking to your doctor. Your doctor will probably want to decrease your dose gradually. If you suddenly stop taking methadone, you may experience withdrawal symptoms such as restlessness, teary eyes, runny nose, yawning, sweating, chills, muscle pain, nausea, diarrhea and widened pupils.

Methadone Conversion

When converting from another opioid to methadone, the process should be done slowly and tremendous care taken when determining equivalent dosages. Please discuss this process with your physician.

General Precautions:

The risk that you will experience serious or life-threatening side effects of methadone is unlikely but greatest when you first start taking methadone, when you switch from another narcotic medication to methadone and when your doctor increases your dose of methadone. Your doctor will likely start you on a low dose of methadone and gradually increase your dose. Communicate closely with your doctor during this time.

Follow the directions on your prescription label carefully and ask your doctor or pharmacist to explain any part you do not understand. Take methadone exactly as directed. Do not take more methadone or take methadone more often than prescribed by your doctor. As you take methadone to control pain, your pain may return before it is time for your next dose of methadone. If this happens, do not take an extra dose of methadone. You will still have methadone in your system even after the pain relieving effect of the medication wears off, so if you take extra doses, you may accumulate too much methadone in your system and you may experience life-threatening side effects. Be aware that the pain relieving effects of methadone will last longer as your treatment continues for a longer time. Talk to your doctor if your pain is not controlled during your treatment with methadone or if you have questions about the risks of taking methadone.

What special dietary instructions should I follow?

Talk to your doctor about eating grapefruit or drinking grapefruit juice while taking this methadone as this may sometimes cause a rise in your methadone blood level and result in dangerous side effects. Star fruit may also have a similar effect.

What should I do if I forget a dose?

If your doctor has told you to take methadone regularly, take the missed dose as soon as you remember it. However, if it is almost time for the next dose, skip the missed dose and continue your regular dosing schedule. Do not take a double dose to make up for a missed one.

What storage conditions are needed for this medicine?

Keep this medication in the container it came in, tightly closed, and in a safe, locked location out of reach of children and inaccessible to anyone but those managing your medications with you. Store it at room temperature and away from excess heat and moisture (not in the bathroom). Keep track of how many tablets you have left so you will know if any go missing. To dispose of any medication that is outdated or no longer needed, grind it into powder, mix it with kitty litter or coffee grounds and place it in a closed container in the trash.

Methadone may cause side effects:

Tell your doctor if any of these symptoms are severe or do not go away:
drowsiness



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weakness
headache
nausea/vomiting
constipation
loss of appetite
weight gain
stomach pain
dry mouth
sweating
flushing
difficulty urinating
swelling of the hands, arms, feet, and legs
mood changes
vision problems
difficulty falling asleep or staying asleep
decreased sexual desire or ability
missed menstrual periods

Some side effects can be serious. If you experience any of the following symptoms, call your doctor immediately:

seizures
itching
hives
rash

Methadone may cause other side effects. Call your doctor if you have any unusual problems while you are taking this medication.

IMPORTANT WARNING - SYMPTOMS OF TOXICITY OR OVERDOSE:

Methadone may cause slowed breathing and irregular heartbeat, which may be life-threatening. If you experience any of the following symptoms, call your doctor or 911 immediately: difficulty breathing; extreme drowsiness; slow, shallow breathing; fast, slow, pounding, or irregular heartbeat; faintness; severe dizziness; or confusion.

In case of emergency/overdose:

In case of overdose, call your local poison control center at 1-800-222-1222. If the victim has collapsed or is not breathing, call local emergency services at 911.

Symptoms of overdose may include:

small, pinpoint pupils (black circles in the center of the eyes)
slow or shallow breathing
drowsiness
cool, clammy, or blue skin
loss of consciousness; coma
limp muscles



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What other information should I know?

Keep all appointments with your doctor, laboratory, and clinic. Your doctor will want to check your response to methadone.

It is important for you to keep a written list of all of the prescription and nonprescription (over-the-counter) medicines you are taking, as well as any products such as vitamins, minerals, or other dietary supplements. You should bring this list with you each time you visit a doctor or if you are admitted to a hospital. It is also important information to carry with you in case of emergencies.

--> PLEASE CALL THE CLINIC AND NOTIFY US IF YOU ARE STARTED ON ANY NEW MEDICATION OR DIETARY SUPPLEMENT. WE WILL THEN BE ABLE TO INFORM YOU HOW THAT CHANGE MAY AFFECT YOUR METHADONE TREATMENT AND AFFECT YOUR SAFETY

Always tell your doctor and pharmacist what prescription and nonprescription medications, vitamins, and nutritional supplements you are taking or plan to take. Be sure to mention any of the following: antidepressants such as amitriptyline (Elavil), amoxapine (Asendin), clomipramine (Anafranil), desipramine (Norpramin), doxepin (Adapin, Sinequan), imipramine (Tofranil), nortriptyline (Aventyl, Pamelor), protriptyline (Vivactil), and trimipramine (Surmontil); certain antifungals such as fluconazole (Diflucan), itraconazole (Sporanox), ketoconazole (Nizoral), and voriconazole (Vfend); antihistamines; buprenorphine (Subutex); butorphanol (Stadol NS); calcium channel blocking agents such as amlodipine (Norvasc), diltiazem (Cardizem, Dilacor, Tiazac, others), felodipine (Plendil), isradipine (DynaCirc), nifedipine (Adalat, Procardia), nimodipine (Nimotop), nisoldipine (Sular), and verapamil (Calan, Covera, Isoptin, Verelan); diuretics ('water pills'); erythromycin (E.E.S., E-Mycin, Erythrocin); laxatives; medications for anxiety, mental illness, nausea, or pain; medications for HIV including abacavir (Ziagen), amprenavir (Agenerase), didanosine (Videx), efavirenz (Sustiva), lopinavir (in Kaletra), nelfinavir (Viracept), nevirapine (Viramune), ritonavir (Norvir, in Kaletra), stavudine (Zerit), and zidovudine (Retrovir); certain medications for irregular heartbeat such as disopyramide (Norpace), flecainide (Tambocor), mexiletine (Mexitil), moricizine (Ethmozine), procainamide (Procanbid, Pronestyl), propafenone (Rythmol), propranolol (Inderal), quinidine (Quinidex), and tocainide (Tonocard); certain medications for seizures such as carbamazepine (Carbatrol, Epitol, Tegretol), phenytoin (Dilantin, Phenytek); phenobarbital nalbuphine (Nubain); naloxone (Narcan); naltrexone (ReVia, Depade); pentazocine (Talwin); rifampin (Rifadin, Rimactane, in Rifamate); risperidone (Risperdal); sedatives; certain selective serotonin reuptake inhibitors (SSRIs) such as fluvoxamine (Luvox) and sertraline (Zoloft); sleeping pills; certain steroids such as cortisone, fludrocortisone (Flurinef), and hydrocortisone (Cortef); and tranquilizers. Also tell your doctor or pharmacist if you are taking the following medications or have stopped taking them in the past 14 days: monoamine oxidase (MAO) inhibitors including isocarboxazid (Marplan), phenelzine (Nardil), selegiline (Eldepryl, Emsam, Zelpar), and tranylcypromine (Parnate). Many other medications may also interact with methadone, so be sure to tell your doctor about all the medications you are taking, even those that do not appear on this list. Your doctor may need to change the doses of your medications or monitor you carefully for side effects.

- tell your doctor what herbal products you are taking, especially St. John's wort.
- tell your doctor if you have or have ever had asthma or other breathing problems or a blockage in your intestine.

Your doctor may tell you that you should not take methadone.

- tell your doctor if you have or have ever had a head injury, a brain tumor, a stroke, or any other condition that caused high pressure inside your skull; irregular heartbeat; urethral stricture (narrowing of the tube that carries urine



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out of the body), enlarged prostate (a male reproductive gland), or any other condition that causes difficulty urinating; Addison's disease (a condition in which the body does not make enough of certain natural substances); mental illness; chronic obstructive pulmonary disease (COPD; a group of lung diseases); kyphoscoliosis (condition in which the spine curves abnormally); sleep apnea (condition in which breathing stops for short periods during sleep); low levels of potassium or magnesium in your blood; or thyroid, heart, liver, or kidney disease. Also tell your doctor if you drink or have ever drunk large amounts of alcohol or if you use or have ever used street drugs or have overused prescription medications.

- tell your doctor if you are pregnant, plan to become pregnant, or are breast-feeding. If you become pregnant while taking methadone, call your doctor.
- if you are having surgery, including dental surgery, tell the doctor or dentist that you are taking methadone.
- you should know that this medication may make you drowsy. Do not drive a car or operate machinery until you know how this medication affects you.
- remember that alcohol can add to the drowsiness caused by this medication.
- tell your doctor if you use tobacco products. Cigarette smoking may decrease the effectiveness of this medication.
- you should know that methadone may cause dizziness when you get up too quickly from a lying position. This is more common when you first start taking methadone. To avoid this problem, get out of bed slowly, resting your feet on the floor for a few minutes before standing up.