



Accurate Clinic

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Methadone and Drug Interactions

Due to the potency and delayed onset of action of methadone, it is important to be aware of the potential dangers that may occur when combining methadone with other medications and, sometimes, even foods. Because of the different mechanisms by which these drug interactions occur, dangerous interactions sometimes occur even when totally unexpected by the uninformed patient. For example, there is potential danger in just drinking grapefruit juice while taking methadone.

In what ways do other medications interact with methadone?

The Obvious:

The most obvious is when another medication with sedative properties is taken with methadone and a patient then becomes over-sedated and/or compromised in their judgement. Medications for sleep, anxiety or depression and alcohol are common examples.

The Not-So-Obvious:

Because methadone is metabolized in the liver, the rate the liver breaks down methadone determines the blood levels obtained and therefore the duration of action and the potency of effect of the methadone. This means the slower the liver metabolizes methadone, the higher the blood levels get and the more potent the effects.

The reason it is important to understand this is because when one takes other medications or even certain foods while on methadone, they may affect the rate at which methadone is metabolized and therefore may indirectly cause the blood levels of methadone to dramatically rise to dangerous, sometimes life-threatening levels. In fact, methadone-related deaths have been reported due to unfavorable drug interactions of this nature.

The reverse may also occur, resulting in faster metabolism of methadone and lower blood levels causing usual methadone doses to become less effective or even induce withdrawal.

Another way in which other medications may unfavorably interact with methadone is by slowing electrical conduction in the heart. Since methadone may slow electrical conduction as well, the combination of additional medications with this side effect may be potentially dangerous. While this mechanism appears to rarely cause problems it is nevertheless best avoided.

Be aware that there may be combined mechanisms of drug interactions. For example, antidepressants may be both oversedating *and* slow methadone metabolism leading to potentially serious problems.

How does one avoid becoming a victim of an unfavorable drug interaction?

Unfortunately, the list of medications that pose potential danger is both long and too often under appreciated by prescribing physicians not well trained in methadone management. Therefore, the best way to avoid problems is to be sure to tell the physician prescribing a new medication that you are on methadone and ask about potential drug interaction *AND* - important! - notify the physician prescribing your methadone **before** you start the new medication.

Most importantly, be aware that medications as seemingly innocuous as antibiotics can have this affect. Be alert to the signs that your methadone levels may be unexpectedly rising. Always start new medications at low doses, raise doses slowly and monitor carefully for signs of drug interaction. Do not increase your methadone intake when starting a new medication and be ready to reduce your usual dose when warranted.

Side effects of too much methadone may include:

- drowsiness, dizziness
- dry mouth, slurred speech
- nausea, vomiting



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□ confusion, slowed thinking

If these side effects occur, stop or reduce the dose of the new medication and/or the methadone and notify your physician immediately or seek emergency care.

It may take up to a week before steady state blood levels are achieved, so it is important to monitor yourself for at least a week after starting a new medication.

What medications should I watch for?

Because the list is long and impossible to memorize, just be aware of the potential problem and notify your physician for guidance when starting any new medication. These warnings also apply to over-the-counter (OTC) medications, herbal remedies and diet supplements, sometimes even certain foods.

Patients with diabetes, liver, kidney, lung or heart disease may be at special risk and should discuss this with their physician when starting a new medication.

Common medications you DON'T have to worry about interacting with methadone:

- tylenol (acetaminophen)
- NSAIDs (ibuprofen, naproxen)
- Gabapentin (Neurontin)
- Lyrica (pregabalin)
- Trazadone
- Savella

Medications potentially dangerous to take with methadone:

- Suboxone, Subutex
- Buprenex, buprenorphine, Butrans
- Stadol, Nubain
- Narcan, naltrexone
- Cocaine
- Alcohol
- Other opioids (hydrocodone, oxycodone, morphine, demerol, fentanyl, tramadol, Nucynta)

Common medications that may alter methadone metabolism:

- Benzodiazepines (valium (diazepam), Xanax (alprazolam), Ativan, Tranxene etc)
- Cannabis (marijuana, "pot")
- Dextromethorphan (found in Robitussin DM and other OTC cough meds)
- Antidepressants (Elavil (amitryptiline), Zoloft, Prozac, Paxil)
- Barbiturates (phenobarbital, Fiorinal/Fioricet)
- Antibiotics (Cipro, erythromycin, Biaxin, Flagyl, diflucan)
- Antivirals (used to treat HIV, hepatitis C)



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- Food (grapefruit, Star Fruit)
- Herbs (St Johns Wart)

THIS IS NOT A COMPLETE LIST

PLEASE CONSULT WITH YOUR PHYSICIAN BEFORE STARTING ANY NEW MEDICATION