Maximizing Outcomes for Pregnant Women on Medication Assisted Therapy

Maureen A. Keating, PCC-S, LICDC Robyn Fox, BS, LCDC-III, CFC, CCJS

Methadone

- A synthetic, long-acting, rigorously tested narcotic medication used for the treatment of narcotic withdrawal and dependence
- Maintenance treatment in the U.S. 1960's
- Opioid "agonist" acts in a way that is similar to morphine and other narcotic medications
- Is a treatment not a cure

Why Methadone Maintenance (MMTP)?

- No physical cravings, no withdrawal
- "Blocks" the effects of street opiates
- Promotes physical and emotional health
- Raises overall quality of life
- IVDU relapse rate increase significantly off 3 months 14% off 6 months 57% off 9 months 72%

Goals of MMTP During Pregnancy

- Improve mother's attendance at high risk clinic
- Improve mother's nutritional status
- Prevents maternal drug level fluctuations
- Enhance the mother's ability to prepare for birth
- Promote drug and alcohol free environment
- · Reduce incidents of violence
- Reduce risk of HIV and Hepatitis C
- Reduce obstetrical complications

Methadone and Pregnancy

- Gold standard of treatment for opioid dependent mothers since the 1960's
- General principle and philosophy:

 "Despite possible complications and public policy controversy, methadone maintenance during pregnancy is still the treatment of choice for opioid dependent women. The course results in <u>better fetal outcomes</u> and helps stem the tide of HIV infection in mothers and their children."

Journal of Psychoactive Drugs 26:155-161, 1994

Buprenorphine

- High affinity for the Mu Opioid Receptor
- Competes with other opioids and blocks their effects
- Displaces heroin or other opiates from receptors
- Slow dissociation from Mu Opioid Receptor
- Prolonged therapeutic effect
- "Ceiling effect" poor drug for intoxication purposes

Buprenorphine

- Safer in an overdose
- Formulated with Naloxone
- Naloxone is poorly absorbed if taken orally
- Naloxone blocks opiate effects if injected
- Not approved by FDA for use in pregnancy

Limited Indications for Use

- Potential benefits must outweigh the risks
- Conceive already on buprenorphine
- Opioid addicted but cannot tolerate methadone
- Poor program compliance or MAT not available
- Documented informed consent
- Limit use to Subutex

Subutex and Pregnancy

- As safe as methadone
- Easier to administer
- Less potential for abuse/ overdose
- Neonatal Abstinence Syndrome is shorter and less severe
- NAS lower prevalence

Medically Supervised Withdrawal

- Never during the 1st or 3rd trimester
- Consultation with Medical Director of MMTP
- High relapse rate to street opioids
- Why?
 - * refuse to be on MMTP
 - * no transportation to clinic
 - * financial reasons
 - * Buprenorphine?

Methadone and Breastfeeding

- Absolutely!!!!
- Mothers should be encouraged to breastfeed *HIV, other drug use – exception *HCV, ok to breastfeed
- Excretion to breast milk is minimal to 180mg qd
- Immunologic and bonding benefits
- Reduce NAS?
- AAP considers methadone compatible with breastfeeding at any maternal dose

<u>Methadone and Neonatal Abstinence</u> <u>Syndrome</u>

- Complex and poorly understood disorder
- Syndrome itself is widely variable
- Many confounding variables:
 - * Maternal and fetal factors
 - * Illicit and licit drug use
- Hospital scale See handout

- 48 and 94% of neonates exposed to NAS
- Not all neonates need medication to treat NAS, all need to be evaluated
- Can be mild to severe
- Can begin after birth, average onset 72hrs
- Other drugs play a part in NAS, methadone has consistently shown to NOT affect NAS
- NICU stay variable
- Rhythmic feeding, sleep cycles, weight gain = discharge

NAS Treatment

- Supportive care
- Decrease sensory stimulation
- Medication increases hospital stay
- Optimal treatment has not been established
- Other conditions can mimic NAS, need complete blood work and comprehensive neurological consultation if indicated

Outcomes for Neonate

- Increased birth weight
- Increased head circumference
- Prolonged gestation
- Improved growth

Outcomes for Infants

- Findings show there are no significant differences between infants born methadoneaffected and those born with no exposure (see handout)
- Research on developmental sequelae associated with in-utero methadone exposure has found that infants through age 2 function well within developmental range (e.g., Kaltenbach and Finnegan 1986)

Perinatal Task Force

- Clinical Director
- Director of Women and Family Services
- Methadone Counselor
- RN
- Outreach Case manager
- Coordinator of Help Me Grow
- Intake Counselor/Nurse

Women's Recovery Program

- Outreach (Homeless Shelters, High Risk Clinics, CPS, Courts, etc)
- Women's Recovery Support Meetings (open to all women)
- Engage in treatment
- Schedule intake and assessment
- Assign level of care

Women's Recovery Program

- Treatment (OP, IOP, Residential)
- Case Management (Resources, Referrals)
- Collaboration (Medical providers, CPS, Courts, etc)
- Education
- Birth Plan
- Parenting

<u>Issues</u>

- Stigma
- Motherhood
- Depression (Pregnancy or Post Partum)
- Child Protective Services
- Other children
- Time in hospital
- Trauma
- Relationships

Primary Counselor

- Manage case
- Help develop a plan
- Address substance abuse issues
- Address mental health or collaborate with mental health provider
- Address trauma and make plans to reduce impact
- Maintain contact with other care providers

Case Management

- Assess for needs (see handout)
- Resources (see handout)
- Referrals (food, housing, etc.)
- Support
- Collaborate

Outcomes for 2010

- Tracked over 78 women
- 52 pregnant women delivered
- 4 miscarried
- 24 on medication assisted treatment
- 21 on methadone 19 babies methadone affected
- 2 with illegal drugs

Outcomes

- 3 subutex
- 24 drug free babies
- Others either moved, dropped out, aborted, etc

Summary

Women on Medication Assisted Therapy can have Healthy Babies with the proper care, intervention and support.

Contact Us

Maureen Keating

maureen.keating@commhealthcenter.org

Robyn Fox

<u>robyn.fox@commhealthcenter.org</u>