

Naltrexone helps HIV positive individuals reduce heavy alcohol use

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Extended-release naltrexone—an injection that decreases heavy drinking in the general population when taken in conjunction with counseling—appears to help HIV-positive individuals reduce their

number of heavy drinking days too, say Yale researchers.

This study was published online on Aug. 2 in *AIDS and Behavior*.

"While we know that patients with heavy [alcohol](#) use are less likely to take their medications for HIV, there is a paucity of interventions that target alcohol use to improve how patients take their medications," said Jennifer Edelman, M.D., first author and associate professor at the Yale School of Medicine. "Extended-release naltrexone is a [medication](#) that is safe and effective for patients living with HIV that can be delivered in HIV treatment settings that could potentially help this problem."

Conducted between April 2011 and February 2015, the trial involved 51 HIV-positive individuals who exhibited [heavy drinking](#) and suboptimal (less than 95%) antiretroviral adherence. All the participants in the study received counseling. Researchers found that the extended-release naltrexone led to clinically and statistically significant decreases in the number of heavy [drinking](#) days for the participants.

However, the researchers saw no appreciable effect of the extended-release [naltrexone](#), versus a placebo, on the adherence of HIV-positive individuals to their antiretroviral therapy regimens.

"We hope that these results will stimulate further research focused on enhancing the coupling of alcohol interventions with antiretroviral medication adherence interventions to improve both alcohol use and HIV-related outcomes," said Lynn Fiellin, M.D., senior author, director of the Yale Center for Health and Learning Games, and associate professor at the Yale School of Medicine.

More information: E. Jennifer Edelman et al. Efficacy of Extended-Release Naltrexone on HIV-Related and Drinking Outcomes Among HIV-Positive Patients: A Randomized-Controlled Trial, *AIDS and*

Behavior (2018). [DOI: 10.1007/s10461-018-2241-z](https://doi.org/10.1007/s10461-018-2241-z)

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