

Treatment model in France shows better access to methadone in US could save lives

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In a new publication, Honora Englander, M.D., and co-authors compare access to methadone in France and the United States. They highlight that better access in the U.S. could save lives. Credit: OHSU

In France, the majority of people with an opioid use disorder—87%—receive access to medication designed to treat it. In the United States, where more than 100,000 people are dying annually from drug overdoses, less than 20% of people with opioid use disorder receive methadone or buprenorphine.

A new study [published](#) in the *International Journal of Drug Policy* highlights differences between the two countries—and a prime opportunity for the U.S. to better address an [opioid epidemic](#) that continues to ravage American families and communities.

"Americans are dying at persistently unacceptable, unthinkable rates," said lead author Honora Englander, M.D., an addiction medicine expert at Oregon Health & Science University. "This doesn't need to be political; this is science. Methadone is a life-saving medication that is inaccessible to most people who need it in the U.S. because of current regulations. Policymakers can change that."

Overdose rates are 32 times lower per capita in France than in the U.S., she noted.

Englander, professor of medicine (general internal medicine) in the OHSU School of Medicine, is spending a year conducting addiction and public health research at le Centre Hospitalier Vinatier in Lyon as a Fulbright Scholar. She said she is most surprised by the ease at which people with addiction can access care, compared with the firmly regulated landscape she's accustomed to in the U.S.

Methadone is one of three medicines approved by the Food and Drug Administration to treat opioid dependence, along with buprenorphine and naltrexone. Methadone is a full agonist, meaning it fully acts on the same targets in the brain as prescription opioids or heroin.

Buprenorphine is a partial agonist, and naltrexone is an opioid antagonist. Methadone and buprenorphine inhibit opioid withdrawal symptoms, while naltrexone blocks the euphoric effect of opioids. All three are readily available in France for treatment of [opioid use disorder](#).

The new study in particular highlights vastly different rates of adoption of [methadone](#), which is tightly regulated in the U.S. and primarily dispensed only through federally licensed opioid treatment programs.

"In France, methadone can be started in specialty addiction centers and hospitals, with handoff to primary care clinicians," the authors write. "It can be dispensed and stored like other opioids from community pharmacies."

Englander, who directs an in-hospital [addiction](#) intervention program at OHSU known as [Project IMPACT](#), said she is eager to advocate for policies in the U.S. and Oregon to reduce deaths and change methadone care systems so that people can access it.

"The French system is far from perfect," she said, "but it's just night and day what a system like this would mean for the patients I care for in Oregon."

More information: Honora Englander et al, Comparing methadone policy and practice in France and the US: Implications for US policy reform, *International Journal of Drug Policy* (2024). [DOI: 10.1016/j.drugpo.2024.104487](#)

Provided by Oregon Health & Science University

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