



## Your Medication: Naltrexone

### How do I obtain and take my medication?

- ▶ If receiving orally, your provider will send a prescription to your local retail pharmacy of choice, where you may pick it up.
- ▶ If receiving a monthly injection, your provider will work with a specialty pharmacy to have it delivered directly to their office. You will have an appointment scheduled, and will receive your injection during a visit.

**Oral Dosage Form:** Naltrexone can be dosed once or twice daily. Some patients may prefer to take it at bedtime due to drowsiness. Take as directed by your provider and as written on your prescription label. You will likely start with a lower dose (usually 25 mg), and increase if well tolerated.

**Injection Form:** Naltrexone injections are given intramuscularly in the gluteal muscle every 3-4 weeks. It is common to start out taking the oral form and transition to the injection if it is working well for you.

- ▶ If you miss an oral dose, please take it as soon as you remember. If it is close to the time for your next dose, skip the missed dose and continue with your normal dosing schedule. Do not take two doses at once, or take an extra dose. If you miss your appointment to receive a naltrexone injection, please call your provider's office as soon as possible to reschedule.

**Emergency Medical ID:** It is important that patients taking naltrexone (oral and injection) carry a patient safety card, or wear a medical ID indicating this information. As naltrexone blocks the effects of opioids, in an emergency hospital staff and emergency workers need to know that you are taking this medication, so can effectively and safely treat your pain. A medical ID card has been provided at the end of this handout.

### What can I expect while taking naltrexone?

- ▶ **Common side effects include:** feeling nervous and excitable, anxiety, headache, muscle cramps, constipation, diarrhea, stomach pain, vomiting, decreased appetite, unusual thirst, trouble sleeping, feeling dizzy, sleepy, tired or weak; back, muscle and joint pain; signs of a common cold, tooth pain.
- ▶ Side effects are **much more common** when **first beginning** naltrexone, and tend to become less noticeable after a few days of treatment. Drinking alcohol when taking naltrexone can result in strong side effects of nausea and vomiting.

### How does it work?

- ▶ Naltrexone is used to help keep patients alcohol and/or opioid free. Naltrexone may also help reduce cravings and lessen use in patients with stimulant dependency. It is not recommended for patients age < 18.

**Alcohol Use Disorder:** Naltrexone binds to endorphin receptors in the body and blocks the effects and feelings of alcohol. It helps reduce alcohol cravings and the amount of alcohol consumed. Once a patient stops drinking, taking naltrexone helps patients maintain their sobriety. Naltrexone treatment typically lasts for three to four months.

**Opioid Use Disorder:** Naltrexone binds to opioid mu receptors and blocks the euphoric and sedative effects



of opioids. This helps reduce and suppresses opioid cravings

**Stimulant Use Disorder (off label use):** Naltrexone injection may be used in combination with bupropion to help block the euphoric and pleasurable effects of taking stimulant medications. Research shows that this combination of medications can help decrease cravings and result in decreased abuse of stimulants.

## What else do I need to know about it? Is it safe?

### All Indications:

- ▶ Medications for Substance Use Disorder are a valuable component of a well rounded approach to recovery. Patients have the most success with naltrexone when used in combination with counseling, peer support services and/or other validated support services.
- ▶ Do not stop taking this medication without consulting your provider. Stopping it without tapering off results in a much greater risk of relapse. The length of time that a patient is treated with naltrexone can vary. Some patients may take it indefinitely.
- ▶ Naltrexone is very safe when used as directed, and is a positive step into recovery. It is a recommended treatment for Substance Use Disorder in pregnancy. Naltrexone is minimally excreted into breast milk and is recommended to be continued while breastfeeding.
- ▶ **If you experience any of the following symptoms, please seek medical help right away.** These symptoms could be caused by withdrawal from other opioids when starting buprenorphine, or could signify a dangerous reaction to the medication: *Signs of an allergic reaction (hives, rash, itching, redness, wheezing, blisters or peeling skin with/without fever, tightness in the chest or throat, trouble breathing, trouble swallowing or talking, swelling of mouth, face, lips, tongue or throat), signs of liver problems (dark urine, tiredness, decreased appetite, upset stomach or pain, light-colored stools, vomiting, yellow skin or yellow eyes), high blood pressure (severe headache or dizziness, passing out or changes in eyesight), new or worse behavior, mood changes like depression or thoughts of suicide, confusion, slow or shallow breathing.*
- ▶ Naltrexone is not a controlled substance, is not addictive and does not have any potential for abuse. Stopping naltrexone does not cause withdrawal.
- ▶ Ensure that all of your providers are aware that you take naltrexone (doctors, nurses, pharmacists and dentists)

### Alcohol Use Disorder:

- ▶ Avoid drinking alcohol while taking naltrexone. Doing so may cause severe nausea and vomiting.

### Opioid Use Disorder:

- ▶ If you have taken an opioid in the past 14 days, you will need to let your provider know before you take naltrexone. You must be opioid free for at least 7-10 days (up to 14 days for long acting opioids) before starting naltrexone. Otherwise, you may experience signs and symptoms of withdrawal.
- ▶ Do not take opioid medications while taking naltrexone. Opioid drugs will not work. Do not take higher doses of opioid drugs to try to get them to work, as doing so can cause severe injury, coma or death.
- ▶ It is recommended that all patients prescribed an opioid or Medication for Opioid Use Disorder are prescribed naloxone to treat an opioid overdose, if needed. Opioid overdoses are more likely to happen during a relapse, as tolerance typically decreases. If an opioid overdose has occurred, or if naloxone has been used, it is important to contact emergency services right away.
- ▶ Patients taking naltrexone to maintain opioid-free state, may have more effects from opioid drugs when



this drug is stopped. Even low amounts of opioid drugs or amounts you have used before may lead to overdose and death.

**Storage:** naltrexone tablets should be stored at room temperature in a cool, dry place (not a bathroom). It should be stored in a safe place where children cannot see or reach it, and where others can not get to it. Consider storing it in a locked box. Keep away from pets. The injectable form will be stored by your provider's office until you are ready to receive it.

Unused or expired naltrexone tablets should be disposed of safely. Contact your local pharmacy for information on disposal and drug take-back programs in your area.

Medical ID Card :

**Important information regarding the patient and the practitioner who prescribed medication naltrexone:**

Patient's name: \_\_\_\_\_ Phone: \_\_\_\_\_

Patient's DOB: \_\_\_\_\_

Date treatment began: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name of physician: \_\_\_\_\_

Pharmacy phone: \_\_\_\_\_

Emergency contact name & phone: \_\_\_\_\_

**To Medical Personnel Treating Me in an Emergency:**

**The patient is taking an opioid inhibitor**

- Suggestions for pain management include regional analgesia or use of non-opioid analgesics.
- If opioid therapy is required, it should be administered by healthcare providers specifically trained in the use of anesthetic drugs and management of respiratory effects of potents, specifically the establishment and maintenance of a patent airway and assisted ventilation.
- The patient should be monitored closely in a setting equipped and staffed for cardiopulmonary resuscitation.