Efficacy of an intensive outpatient buprenorphine detoxification treatment at reducing anxiety and depression in prescription opioid abusers

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Co-occurrence of mental health disorders among substance abusers presents a serious challenge to treatment efforts. Prevalence rates of mood and anxiety disorders are approximately 18% among substance abusers (Grant et al., 2004), with rates among prescription opioid (PO) abusers ranging from 19% - 75% (Peles et al., 2007). We have an ongoing NIDA-funded trial aimed at treating PO abusers using outpatient buprenorphine detoxification and subsequent naltrexone therapy. While the primary focus is on opioid abstinence, the trial provides an opportunity to characterize depression and anxiety in this population.

Eligible subjects are stabilized on buprenorphine, after which they receive a brief taper and are transitioned to the opioid antagonist naltrexone if successful with the taper. Throughout treatment, participants also receive regular urinalysis monitoring and individualized behavioral therapy. Depression and anxiety symptoms are assessed via the Beck Depression and Anxiety (Beck et al., 1961, 1988) Inventories at intake, at end of stabilization, as well as at Study Weeks 1, 2, 3, 4, 6, 8, and 12.

Forty subjects have completed the 12-week trial (27 yrs old, 35% female). At intake patients had "mild" BAI (M=13.57) and "moderate" BDI scores (M=20.93). Analyses show a significant decrease into the "minimal" range for both anxiety (M=5.33) and depression (M=6.85) scores at completion. Further analysis shows that responders, or those who successfully taper, have significantly lower depression and anxiety scores at completion than nonresponders.

Our treatment appears to improve both anxiety and depression symptoms in a sample of PO-dependent adults, with reductions most evident among those participants who are successful in achieving opioid abstinence during treatment. Data from the completed trial will be presented and will include an examination of changes in baseline anxiety and depression scores throughout the study. Baseline anxiety and depression scores will also be analyzed to determine if they can predict later success in treatment. Examination of this data will offer important clinical and scientific information on levels of anxiety and depression among PO abusers both prior to, and throughout an outpatient detoxification treatment.