

Injectable MOUD: Clinical Case Examples

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Disclosures

- Lynda – none
- Brian – none

Learning Objectives

- Upon completion of the session, participants will
 1. Gain comprehension of appropriateness and when and how to administer injectable MAT
 2. Increase communication skills regarding use of injectable MAT during a clinical interaction
 3. Recognize and understand differing purposes and utilizations of injectable MAT

Facilitator of the
Quarter
(Spring 2021)



Case 1: JB

- 33 year old woman
- History of IV heroin use
- Relapse in Jan 2020. Inpatient rehab, followed by buprenorphine maintenance.
- Stable on buprenorphine (8mg TID), no illicit use (of any kind) since prior to going to rehab. Smokes 4-5 cigarettes daily. Positive family involvement and social support.
- Married with 4 children. Works PT as a house cleaner.
- September 2020- 2 year old daughter swallowed one of her suboxone tablets. Child treated at cooper hospital with narcan drip. DCP&P investigation – case closed – no issues of abuse or neglect.

Case 2: PM

- **Feb 2019:**
 - **First visit to Ryan White-funded HIV clinic after new diagnosis**
 - **Tearful and upset**
 - **Self-reported heroin and cocaine use**
 - **Opiates: started with Percocet in 2013; currently injecting and sharing needle with his girlfriend**
 - **Cocaine: started 2018, using about \$200/day**
 - **Treatment history: multiple rehabs and outpatient programs; never tried methadone or other MOUD**
 - **'won't be able to focus on anything until his health is under control and his girlfriend is safe and working on her recovery.'**

PMH

- Diagnosed with 'schizophrenia, schizoaffective, bipolar'
- Refuses medication for above 'I have been a guinea pig since I was 9'
- 3-5 psychiatric admissions a year
- Unspecified personality disorder
- HIV, HCV
- Femoral artery stabbing 2013
- Homeless
- 4 kids (2 with their mother, 2 in foster care)
- Frequent incarcerations

Feb 2019

- Started sublingual buprenorphine
- Girlfriend was diagnosed with HIV and HCV

March 2019

- First visit with Cooper Addiction Medicine
- Started with Percocet in 2013 after a tooth extraction
- Became opioid-dependent after a femoral artery stab wound and fasciotomy in 2017
- Reported that the buprenorphine that had been prescribed when he met with LCADC had been stolen, and left angrily (and without buprenorphine) when he was told that closer follow-up was appropriate
- A few days later he became 'enraged' when LCADC asked his girlfriend (also a patient) if she had been assaulted by him

April 2019

- Admitted to inpatient facility and left AMA
- Prescribed buprenorphine again
- Reported using less heroin at a follow-up visit
- Then he disappeared...

November
2020

- Released from prison
- Was treated with 4mg of sublingual buprenorphine daily while in prison
- Had COVID-19
- Undetectable viral load
- Began a series of almost daily visits to the clinic, usually in an agitated manner
- Started 24mg of sublingual buprenorphine daily; multiple UDS were negative for buprenorphine and positive for opiates

November
2020

- I meet him for the first time at the end of the month
- Discussed need for a higher level of care given that sublingual buprenorphine was not effective for him
- Discussed the option of injectable buprenorphine
- Reported that he had tried it before but did not find it effective because he still had cravings
- Discussed how additional sublingual buprenorphine on top of the injectable formulation might help with cravings
- He agrees to move forward with the injection

December 2020

- Overdosed 3 times between 12/1 and 12/9
- Insurance was not active
- ‘I need the shot or else I am definitely going to die’
- Continued to overdose about 3 times per week while he struggled to initiate sublingual buprenorphine – kept precipitating withdrawal

January 2021

- OD on Jan 1
- First dose of injectable buprenorphine on Jan 6 – with no buprenorphine in his system
 - Found the injection to be very painful
- Instructed in use of high-dose buprenorphine administration in the case of precipitated withdrawal
- Still experiencing a low-grade protracted withdrawal ‘but no more close calls’
 - Sublingual buprenorphine prescribed

February 2021

- Presented for his second injection of buprenorphine but at the last minute requested to postpone a day because he had used a significant amount of opiates the day before
- Feeling good – still using, but not overdosing and gained a few pounds
- On exam he still has a significant lump at the site of the first injection
- Finally came back for second injection 3 weeks later
 - Used lidocaine this time

March 2021

- Had insurance issue and medication was not delivered
- Continued sublingual buprenorphine
- Still had significant lumps at the sites of his prior injections
- Still no overdoses despite continued illicit opiate use
- Started attending therapy visits on a regular basis

April 2021

- Returned for 4th injection
- Still using illicit opiates with no overdoses
- Developing a relationship with his therapist
- I saw him smile and heard him laugh for the first time
- His girlfriend is now being treated with injectable buprenorphine as well