

Naltrexone

What is naltrexone, and how does it work?

Naltrexone (Revia) is a medication used to treat alcohol dependence. Naltrexone is an opioid antagonist medication, which means that it blocks the effects of drugs known as opioids (for example, morphine, heroin, oxycodone [OxyNeo], codeine [in Tylenol 1, 2 and 3]). If you are using opioids, whether prescribed, over the counter or illegal, naltrexone is probably not an option for you. It is important to discuss this with your physician. You must be off opioids for seven days before starting naltrexone.

Exactly how naltrexone works in alcohol dependence is not understood, but it is thought that naltrexone reduces alcohol's pleasurable effects and so helps people to abstain from alcohol. Patients taking part in studies of the effectiveness of naltrexone for alcohol dependence reported that the medication can:

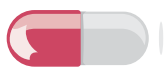
- reduce your urge or desire to drink
- help you remain abstinent
- interfere with your desire to continue drinking more if you slip and have a drink.

Counselling was an important component of these studies, and it is patients who are willing to take the medication every day as prescribed and take part in counselling who do best in treatment with this medication.

Naltrexone does not treat alcohol withdrawal symptoms. Many patients need to undergo alcohol withdrawal management ("detox") before starting this medication.

How is naltrexone taken?

Naltrexone is taken once daily in the evening.



Is it possible to become addicted to naltrexone?

No. Naltrexone is not habit forming or a drug of abuse. It does not cause patients to become physically or psychologically dependent.

What are the side-effects of naltrexone?

Naltrexone is well tolerated by most people. The most common side-effect is nausea. In one study of naltrexone for alcohol dependence, the side-effects reported included:

- nausea (10%)
- headache (7%)
- depression (5 to 7%)
- dizziness (4%)
- fatigue (4%)
- insomnia (3%)
- anxiety (2%)
- sleepiness (2%)

These side-effects were usually mild and lasted a short time. Among those who experienced nausea, many found it severe enough to make them stop the medication. Some patients are started on a lower dose of naltrexone for a few days to help minimize this side-effect.



Most patients report that they are largely unaware of being on naltrexone. The medication usually has no psychological effects, and users do not feel either "up" or "down."

Naltrexone can rarely have toxic effects on the liver. You should call your physician immediately if you experience vomiting, yellowness of the skin/eyes, dark urine, loss of appetite, fever, upset stomach or light-coloured stools. Your liver function will be monitored while you are on this medication. You should report any side-effects to your physician.

What will happen if I drink alcohol while taking naltrexone?

Naltrexone does not:

- reduce effects of alcohol such as impaired co-ordination and judgment

- affect your blood alcohol level or “sober you up” if you drink
- change the way the body metabolizes (breaks down) alcohol, so it will not make you feel sick if you drink.

Naltrexone may decrease the pleasure you feel from drinking alcohol compared to what you have experienced in the past, and may decrease the desire to drink more.

Can I take other medications with naltrexone?

Naltrexone may block the desired effects of medications that contain opioids. Examples include:

- opioid-containing painkillers, such as acetaminophen with codeine (e.g., Tylenol 1, 2 and 3),
- oxycodone (e.g., Percocet, OxyNeo) and morphine
- cough and cold medications containing codeine, such as Benilyn with Codeine and Co-Actifed
- opioid-containing medications for diarrhea, such as Lomotil.

Ask your physician or pharmacist about safe alternatives to these medications.

If you take a small dose of an opioid-containing medication while you are on naltrexone, there will be little or no effect. If you take a large dose of opioid, it is possible to overdose and suffer serious harm.



When naltrexone is taken with medications that don't contain opioids, there is likely to be little impact. However, discuss any medications you are taking with your physician and pharmacist so they can evaluate possible interactions.

The clinic will give you a wallet card to carry, which explains that you are on naltrexone, to help ensure that in an emergency you will get appropriate pain treatment.

What will happen if I become pregnant while taking naltrexone?

There are no studies on the use of naltrexone in pregnancy. For that reason, if there is a possibility of becoming pregnant, use an effective method of birth control while taking naltrexone. If you miss a menstrual

period, report this to your physician at once and take a pregnancy test. If you become pregnant, you will need to alert your physician to discuss ongoing treatment options. Your physician will help you abstain from alcohol during pregnancy. Your health should be monitored throughout your pregnancy, as should the health of your baby after delivery.

Should I take naltrexone with a meal?

Naltrexone can be taken with or without food. Some people like to time their dose with meals to help them remember to take the medication.

If I take naltrexone, does it mean that I don't need other treatment for alcohol dependence?

No. Research has shown that naltrexone is most effective when combined with counselling and/or mutual support groups.

What is the relationship of naltrexone to AA and other mutual support groups?

You can participate in support groups while taking naltrexone. In fact, one study showed that people who attended mutual support groups, such as AA, while taking naltrexone had better outcomes. Naltrexone is most likely to be effective for you if your goal is to stop drinking altogether.



If other group members caution against taking any medications, you should refer them to the pamphlet “The AA Member—Medications and Other Drugs,” which states that AA members should not “play doctor” and advise others on medication provided by medical practitioners or treatment programs.

Dosage and cost

The usual dosage is 50 mg a day, though your physician may prescribe a lower or higher dosage. The daily cost will be around \$6.