



INTERIOR REGION

First Nations Health Authority

Opioid Agonist Therapy

Opioid Agonist Therapy (OAT) is the leading standard for withdrawal management and provides a regulated (i.e. safer) approach to engaging in substance use.

Buprenorphine/Naloxone (Suboxone), Methadone and Slow Release Oral Morphine (Kadian) are the most common OAT. All are taken by mouth.

Buprenorphine/Naloxone is the recommended first treatment option! Buprenorphine/naloxone is fully covered by First Nations Health Benefits and is the most available option for individuals living in remote and rural First Nations communities.

Methadone comes in a liquid form and is also effective at reducing opioid use, but it can be challenging to maintain someone on Methadone in rural and remote communities.

Slow Release Oral Morphine (SROM) is a long-acting morphine medication that prevents a person from experiencing opioid withdrawal. This medication is usually taken once a day and is initiated at a low starting dose, slowly increasing over time with the supervision of a healthcare professional.

OAT has been shown to be superior to withdrawal management in terms of:

- Harm reduction
- Remaining in treatment
- Reduction of illicit opioid use
- Decrease risk of fatal toxic drug poisoning

For more information on OAT in the Interior Region please scan this QR code to access FNHA OAT information page!

