

A Heuristic for Evaluating Methamphetamine Withdrawal Treatment Programs

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Acknowledgements

The work presented here was conducted on Gadigal land, and I would like to pay my respects to elders past and present and extend that to any Aboriginal and Torres Strait Islander peoples here today.

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Conflicts of interest

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Methamphetamine withdrawal

Withdrawal -> a rapid reversal of neuroadaptation to chronic substance use:

- Permanently or **temporarily**
- **Safety**, not long-term abstinence
- Question of safety **does not apply to MA in the same way as** other drugs (e.g. alcohol)

Why MA withdrawal? - significant harm

- Intense symptoms
- Unmanaged symptoms -> use
- Barrier to people achieving their goals

Key elements of withdrawal – NSW Health Management of Withdrawal from Alcohol and Other Drugs

- Therapeutic relationships
- Reducing discomfort
- Collaboration with patients
- Supportive care

Because the role of MA withdrawal can be unclear (i.e. requiring rehab before admission) assessing treatment programs can be difficult

Development of a heuristic

- Based on principles set out on withdrawal guidelines
- Simple decision aid evaluating programs and identifying knowledge gaps against:

Accessibility

Availability of
treatment and services

Providers

Cost

Acceptability

Symptom severity

Side effects

Convenience

Meeting client needs

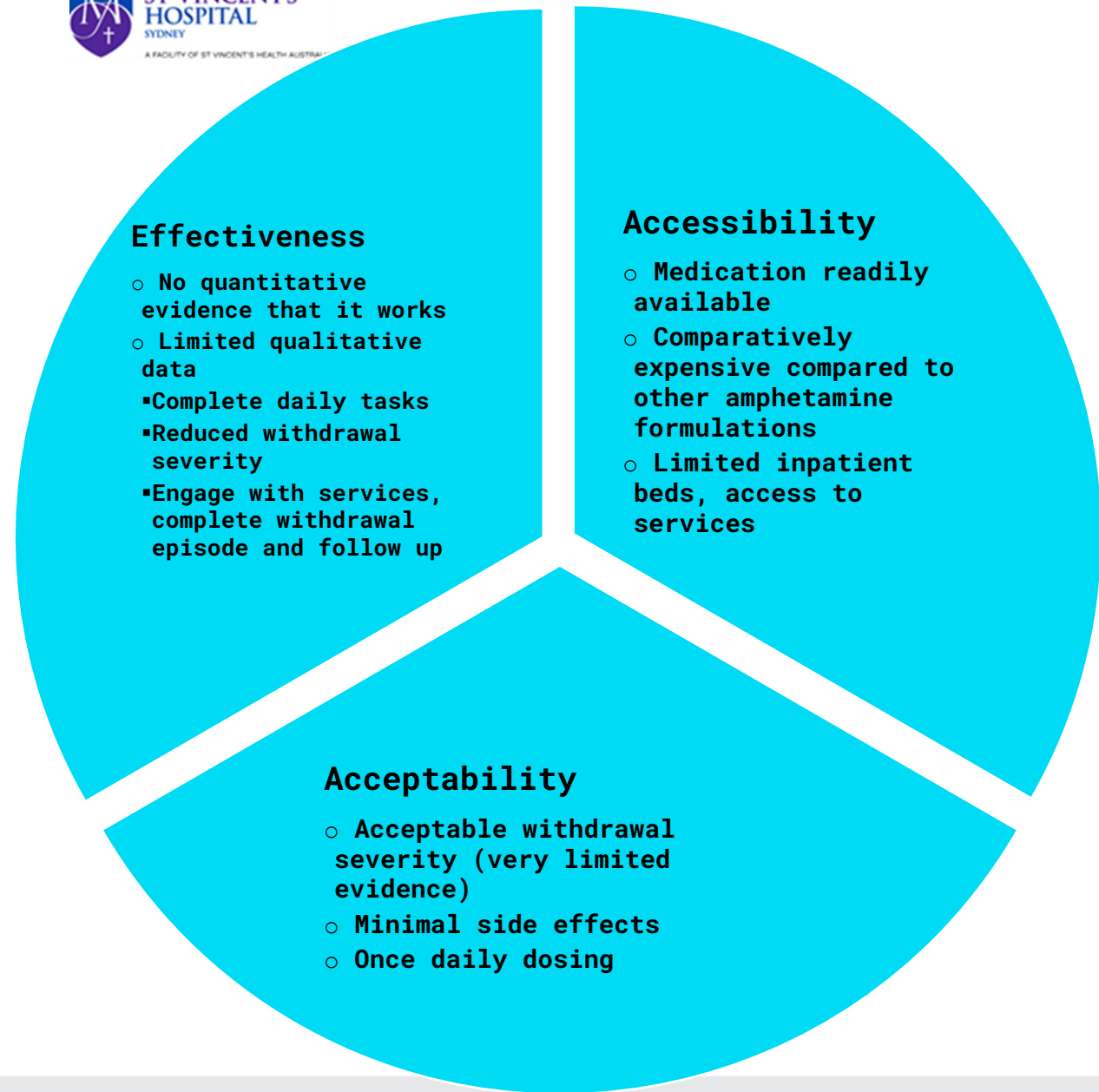
Effectiveness

Safety

Efficacy

Engagement in care

Evaluating a program: lisdexamfetamine for acute methamphetamine withdrawal in inpatient settings



Evaluation outcome

Lisdexamfetamine for methamphetamine withdrawal, delivered in inpatient services:

- Accessible medication (relatively)
- Inaccessible service
- Very limited data on acceptability and effectiveness
- Suggests a promising approach for further investigation

Needs to test other programs

- Pre-existing, non-pharmacological

Conclusion

- Only provides a framework for evaluation, and exposing key knowledge gaps for further research
- Provides framework for policy makers, funders, services etc. to assess programs in person centered terms
- Consumers should be involved in each part of the development
 - Design
 - Implementation
 - Evaluation

Thank you!

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