

## **A pilot study of the safety and feasibility of oral naltrexone and bupropion for methamphetamine use disorder**

Krista J Siefried<sup>1,2,3,4</sup>; Liam Acheson<sup>1,2,3</sup>; Brendan Clifford<sup>1,2,3,4</sup>; Carl Moller<sup>5</sup>; Jonathan Brett<sup>6,7</sup>; Michael Christmass<sup>8</sup>; Adrian Dunlop<sup>4,9,10</sup>; Paul Haber<sup>4,11,12</sup>; Didier Jutras-Aswad<sup>13,14</sup>; Nicholas Lintzeris<sup>4,11,15</sup>; Kirsten Morley<sup>11,12</sup>; Steve Shoptaw<sup>16</sup>; Madhukar Trivedi<sup>17</sup>; Nadine Ezard<sup>1,2,3,4</sup>

<sup>1</sup> *The National Centre for Clinical Research on Emerging Drugs, c/o the University of New South Wales, Sydney, Australia,* <sup>2</sup> *St Vincent's Hospital Alcohol and Drug Service, Sydney, Australia,* <sup>3</sup> *The National Drug and Alcohol Research Centre, the University of New South Wales, Sydney, Australia,* <sup>4</sup> *New South Wales Drug and Alcohol Clinical Research and Improvement Network, c/o the New South Wales Ministry of Health, Sydney, Australia,* <sup>5</sup> *School of Medicine, The Institute for Mental and Physical Health and Clinical Translation (IMPACT), Deakin University, Geelong, Australia* <sup>6</sup> *St. Vincent's Clinical School, the University of New South Wales, Sydney, Australia,* <sup>7</sup> *School of Population Health, the University of New South Wales, Sydney, Australia,* <sup>8</sup> *Next Step Drug and Alcohol Services, Western Australia Mental Health Commission, Perth, Australia,* <sup>9</sup> *Drug and Alcohol Clinical Services, Hunter New England Local Health District, Newcastle, Australia,* <sup>10</sup> *School of Medicine and Public Health, the University of Newcastle, Newcastle, Australia,* <sup>11</sup> *Faculty of Medicine and Health, Central Clinical School, Discipline of Addiction Medicine University of Sydney, Sydney, Australia,* <sup>12</sup> *Edith Collins Centre for Translational Research, Drug Health Services, Royal Prince Alfred Hospital, Sydney, Australia,* <sup>13</sup> *Research Centre, Centre Hospitalier de l'Université de Montreal (CRCHUM), Montreal, Quebec, Canada,* <sup>14</sup> *Department of Psychiatry and Addictology, Faculty of Medicine, Université de Montreal, Montreal, Quebec, Canada,* <sup>15</sup> *The Langton Centre, South East Sydney Local Health District, Sydney, New South Wales, Australia,* <sup>16</sup> *Department of Family Medicine, The University of California Los Angeles, Los Angeles, California, USA,* <sup>17</sup> *Peter O'Donnell Jr. Brain Institute, the University of Texas Southwestern Medical Center, Dallas, Texas, USA*

Presenter's email: [krista.siefried@svha.org.au](mailto:krista.siefried@svha.org.au)

**Introduction:** A recent study found depot injection naltrexone and oral bupropion, in formulations not readily available internationally, reduced methamphetamine use compared to placebo. We undertook a pilot study to examine an oral formulation.

**Methods:** A single-arm, open-label, pilot study of oral extended-release naltrexone and bupropion (40mg/450mg daily in divided doses; primary endpoint Day 84) in adults with methamphetamine use disorder. Participants were outpatients of a stimulant treatment program in Sydney, Australia. Participants attended weekly visits from Baseline to Week 12, and received treatment as usual psychosocial therapy, reimbursement was up to \$80 for each study visit. Primary outcomes were feasibility (time to recruit, proportion ineligible, retention, and study medication adherence by pill count and self-report), and safety (treatment-emergent adverse events [AEs]).

**Results:** Over 20 weeks between March and August 2024, 183 expressions of interest were received, 24 individuals were screened, and 20 (83%) enrolled. Adherence by pill count was >80% amongst 46% of participants at the primary endpoint, pill returns were inconsistent across the study. Adherence by self-report was >80% among more than 60% of participants across all visits, and >80% of participants reported at least 80% adherence on seven of the twelve study visits. Fifteen (75%) participants were retained on study medication to primary endpoint. Ninety-three AEs were reported in 19 participants (95%), one (1.1%) was classified serious but unrelated to study medication.

**Discussions and Conclusions:** Oral combination naltrexone and bupropion was safe in this sample. Adherence aligned with other oral medications trialled in this population, however, did not achieve the rates of adherence in the previous US study using different formulations with smartphone video app and monetary incentives for medication adherence.

**Implications for Practice or Policy:** This study demonstrates safety and feasibility of this combination in this population, to inform the design of a larger randomised trial.

**Disclosure of Interest Statement:**

This study was funded by the National Centre for Clinical Research on Emerging Drugs (NCCRED). NCCRED receives funding from the Commonwealth Department of Health and Aged Care, Australia.

KJS, LA, BC, CM, MC, AJD, KM, SS, NE—none to declare. JB is supported by the National Health and Medical Research Council (NHMRC) Centre of Research Excellence in Medications Intelligence (ID: 1196900) and an NHMRC Investigator Grant (ID: 1196560), PSH has received research funding from Invidior, DJA is supported by a senior clinical scientist scholar award from the Fonds de recherche Québec – Santé (FRQS), and receives grant support from the Canadian Institutes of Health Research, Health Canada and the FRQ. He has received study material in 2022-23 from Cardiol therapeutics. NL has received grants from the Australian NHMRC, Camurus and Indivior for unrelated work, MHT has provided consulting services to Acadia Pharmaceuticals, Alkermes Inc., Alto Neuroscience Inc, Axsome Therapeutics, BasePoint Health management LLC, Biogen MA Inc, Cerebral Inc., Circular Genomics Inc., Compass Pathfinder Limited, Daiichi Sankyo Inc., GH Research, GreenLight VitalSign6 Inc, Heading Health, Janssen Pharmaceutical, Legion Health, Merck Sharp & Dohme Corp., Mind Medicine Inc., Myriad Neuroscience, Naki Health Ltd, Neurocrine Biosciences Inc., Noema Pharma AG, Orexo US Inc., Otsuka America Pharmaceutical Inc., Otsuka Europe LTD, Otsuka Pharmaceutical Development & Commercialization Inc., Praxis Precision Medicines Inc, PureTech LYT Inc, Relmada Therapeutics Inc., SAGE Therapeutics, Signant Health, Sparian Biosciences, Titan Pharmaceuticals, Takeda Pharmaceuticals Inc, WebMD. He has received grant/research funding from NIMH, NIDA, NCATS, American Foundation for Suicide Prevention, Patient-Centered Outcomes Research Institute (PCORI), Blue Cross Blue Shield of Texas, SAMHSA and the DoD and has received editorial compensation from Elsevier and Oxford University Press.