

CADTH RAPID RESPONSE REPORT: REFERENCE LIST

Methadol Liquid, Methadone, and Compounded Methadone in Patients with Opioid-Use Disorder Using Opioid Agonist Therapy: Comparative Clinical Effectiveness and Guidelines – An Update

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Research Questions

1. What is the comparative clinical effectiveness of compounded methadone versus methadone liquid or methadone in patients with opioid use disorder or withdrawal using opioid agonist therapy?
2. What are the evidence-based guidelines on the use of compounded methadone versus methadone liquid or methadone in patients with opioid use disorder or withdrawal using opioid agonist therapy?

Key Findings

No relevant literature was identified regarding the clinical effectiveness of compounded methadone versus methadone liquid or methadone in patients with opioid use disorder or withdrawal using opioid agonist therapy. In addition, no relevant evidence-based guidelines were identified regarding the use of clinical compounded methadone versus methadone liquid or methadone in patients with opioid use disorder or withdrawal using opioid agonist therapy.

Methods

This report is an update of a literature search strategy developed for a previous CADTH report. For the current report, a limited literature search was conducted on key resources including PubMed, the Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. The initial search was limited to English-language documents published between January 1, 2008 and March 28, 2018. For the current report, database searches were rerun on December 9, 2019 to capture any articles published since the initial search date. The search of major health technology agencies was also updated to include documents published since March 2018.

Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

| | |
|---------------------|---|
| Population | Patients with opioid use disorder or opioid withdrawal using opioid agonist therapy (OAT) |
| Intervention | Q1: Compounded methadone Q2: Compounded methadone, methadone or methadone liquid |
| Comparator | Q1: Methadone liquid or methadone Q2: Not applicable |

| | |
|----------------------|--|
| Outcomes | Q1: Clinical effectiveness (e.g., benefits/harms, safety, duration on the medication) Q2: Guidelines |
| Study Designs | Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies and evidence-based guidelines |

Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

No relevant health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, or evidence-based guidelines were identified regarding the comparative clinical effectiveness of compounded methadone versus methadol liquid or methadone in patients with opioid use disorder or withdrawal using opioid agonist therapy.

References of potential interest are provided in the appendix.

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-analyses

No literature identified.

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies

No literature identified.

Guidelines and Recommendations

No literature identified.

Appendix — Further Information

Previous CADTH Reports

1. CADTH. Evidence on opioids: opioid use disorder/addiction treatment. (*CADTH evidence bundles*) 2019; <https://www.cadth.ca/evidence-bundles/opioid-evidence-bundle>. Accessed 2019 Dec 13.
2. Buprenorphine/naloxone versus methadone for the treatment of opioid dependence: a review of comparative clinical effectiveness, cost-effectiveness and guidelines. (*CADTH rapid response report: peer-reviewed summary with critical appraisal*). Ottawa (ON): CADTH; 2016: https://www.cadth.ca/sites/default/files/pdf/htis/sep-2016/RD0032_Suboxone_Final.pdf. Accessed 2019 Dec 13.
3. Suboxone versus methadone for the treatment of opioid dependence: a review of the clinical and cost-effectiveness. (*CADTH rapid response report: summary with critical appraisal*). Ottawa (ON): CADTH; 2013: https://www.cadth.ca/sites/default/files/pdf/htis/dec-2013/RC0495_Suboxone%20for%20opioid%20dependence_Final.pdf. Accessed 2019 Dec 13.

Systematic Reviews

Methadol or Compounded Methadone Not Specified

4. Rahimi-Movaghar A, Gholami J, Amato L, Hoseinie L, Yousefi-Nooraie R, Amin-Esmaeili M. Pharmacological therapies for management of opium withdrawal. *Cochrane Database Syst Rev*. 2018;6:CD007522. [PubMed: PM29929212](https://pubmed.ncbi.nlm.nih.gov/302929212/)

Clinical Practice Guidelines

Methadol or Compounded Methadone Not Specified

5. Korownyk C, Perry D, Ton J, et al. Managing opioid use disorder in primary care: PEER simplified guideline. *Can Fam Physician*. 2019;65(5):321-330. [PubMed: PM31088869](https://pubmed.ncbi.nlm.nih.gov/31088869/)

Unclear Methodology

6. ODT guidelines addendum: compounding methadone. Edmonton (AB): Alberta College of Pharmacists; 2014: <https://abpharmacy.ca/sites/default/files/CompoundingMethadoneAddendum.pdf>. Accessed 2019 Dec 13.

Additional References

7. Opioid agonist treatment update. Metadol® and Metadol-D® (10mg/mL) available exceptionally via Special Authority request. Vancouver (BC): British Columbia Centre on Substance Use (BCCSU); 2019: <https://www.bccsu.ca/wp-content/uploads/2019/02/Methadone-to-Metadol-D-and-METADOL-06Feb2019.pdf>. Accessed 2019 Dec 13.

8. College of Pharmacists. Opioid policy. *Practice Policies & Guidelines* 2018 Dec; <https://www.ocpinfo.com/regulations-standards/practice-policies-guidelines/opioid-policy/>. Accessed 2019 Dec 13.
9. Guidelines & Protocols Advisory Committee. Opioid use disorder - diagnosis and management in primary care. Victoria (BC): BCGuidelines.ca; 2018: <https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/bc-guidelines/opioid-use-disorder#alternative>. Accessed 2019 Dec 13.