



WIRED VOLUNTEER: KEVIN MANLEY

Methadone Q & A

Kevin Manley describes his views and experiences of methadone.

Why did you decide to start taking methadone?

I was told by my key worker that it would help me to stop using. I really wanted to stop but had got to the stage where I couldn't handle a straight withdrawal. I had been on methadone in the past and had come off it cold turkey when I went to prison. After that, I had decided that I never wanted to go on methadone again.

Before I went on methadone again I tried Subutex, but I really couldn't get on with it. It really messed with my head. I had unbearable highs and lows. So I saw methadone as the only option left to me.

What did you hope it would offer you?

I hoped it would give me stability, that my addiction would be lifted gradually. I swapped to methadone as a route to being abstinent.

What were your expectations?

I expected my usage of heroin to stop and the methadone to hold me, i.e. to not withdraw or have symptoms of withdrawal.

What was the process of getting scripted?

I had to be referred to a statutory prescribing service. I did this myself and was put on the waiting list. That was the worst part – the waiting. I waited for nearly a year and it was shit. By the time I could get a script I wasn't ready to stop using, I wasn't as motivated as when I had originally asked for help.

When I finally got a script, I went on Subutex but found the psychological side of it unbearable – it was like a rollercoaster of highs and lows. I gave the Subutex two separate goes but I couldn't get on with it so I went on methadone. Before I could go on the methadone, I had to give three positive urine samples, each a week apart.

I was told that I would be taken up to an amount of methadone that I was comfortable with and then I would stabilise on that amount and be regularly monitored to see how I was doing. I had said from the beginning that I had wanted to be on methadone for as short a time as possible and I was told that it would be up to me. My key worker said that once I stopped using heroin on top of my script then it would be up to me how quickly I came off the methadone. Their words were 'we'll cross that bridge when we get to it'. But when I got there they wouldn't let me reduce my methadone as I wanted to (See later).

Because I was started on a small dose, I was told to continue to use heroin but to cut down gradually as my methadone dose went up. I think that that advice was wrong. I wasn't able to control my use of heroin as it was. That advice just got me used to using both heroin and methadone. I carried on using heroin and methadone until I was admitted to hospital with septicemia in June 2005.

How did you feel when you first started taking it?

Physically I felt the same really, maybe a little bit better in the mornings after taking it. It was useful to have it there for when I needed it but some days I wouldn't use it. I was on a weekly pick-up quite soon after I started getting a script, so I would only take it when I needed it and I would sell the rest to buy smack.

I wanted to be totally clean and off prescription drugs as well, but at the time I was really out of control, taking loads of crack and smack and heading for destruction really. Luckily, I ended up in hospital otherwise I don't know what would have happened to me. I ended up spending eight months in hospital and when I left I went into a Christian rehab. Being in hospital gave me the time that I needed to think about my life and where it was going. I also began to learn about Christianity and found my faith in Jesus. This was the biggest turning point for me.

Kev's reduction plan

Week	Daily amount (ml)
0	120
1	110
2	100
3	90
4	80
5	70
6	60
7	50
8	40
9	35
10	30
11	25
12	20
13	18
14	16
15	14
16	12
17	10
18	8
19	6
20	4
21	2
22	0

Reducing

I decided to reduce my methadone when I went into the Christian rehab. I was happy not to be using gear and I didn't see any point in continuing with the methadone. It was a natural progression after stopping using smack to come off the methadone as well.

I talked to my key worker at the statutory prescribing service but she wasn't happy for me to reduce as she thought that it was too soon. It seemed like it was easier for them to keep me on it – like they figured their job had been done because I wasn't using heroin on top. Luckily, I was still on a weekly pick-up so I was able to control how much I took. I let my key worker know my intentions and told her my reduction plan (see later). She was skeptical and advised against it.

When I started reducing I was on 120ml of methadone a day. I decided to reduce at a weekly rate of 10ml until I started to feel withdrawals, and then I lowered the amount to weekly drops of 10%. Towards the end (20ml), I came down in 2ml drops per week until I was on zero.

All the way through my reduction I was really happy and I couldn't wait to be off it totally and to be free from addictive drugs.

Describe the process of reducing

I think it was important that I had a reduction plan, but also for it to be a little bit flexible. It was important to me to be able to speed up if I was finding it easy and slow down if I was finding it hard. The one rule that I set for myself was to drop an amount ever week, even if it was 1ml. It meant that I was going the right way and my reduction was continuing. How long it took me to totally get off methadone wasn't important to me, but the fact that I was progressing weekly was absolutely everything.

Physically, I didn't find reducing that bad apart from at some points when I would experience leg cramps and diarrhea. Towards the last five weeks when I was reducing quite quickly at 2ml a week, these symptoms got worse and also included heavy sweating. The diarrhea continued for about three to four months after stopping and the sweating continued for about nine months. In the end, I had a talk with my doctor about the sweating and he prescribed me a roll-on antiperspirant which totally stopped my excess sweating.

Psychologically, I was really happy to be off methadone. Really, I should've slowed the reduction down at the end but I wanted to be off it so much that I just continued with 2ml drops.

One of the hardest parts for me was reducing off the last 10ml. The withdrawals were at their worst, but I was so desperate to get off it that I was willing to put up with them just to get off it as quickly as possible.

Throughout my reduction my main support was through God – he helped me when no-one else could have. I was also very lucky to have the support of my family. They have stuck by me and helped me through the tough times.

I also received support from friends and people at the rehab, but I received no help from the prescribing service. They wouldn't lower my methadone as I had asked so I had to keep pouring away the excess. I would go in for my appointment every few weeks and tell them the amount that I was now on. My key worker would be shocked and then have to reduce my script. But I was continuing to drop, so we would go through the same process again at the next appointment. It wasn't until I was on 8 ml that they started to reduce my script weekly in line with what I had asked for.

I think that I would have benefited from more support and belief from my key worker. I didn't need the extra hassle that came with measuring my methadone every day and also the temptation to use more than I had set for myself. Every appointment became a struggle and it felt like I was carrying them rather than them helping me!

It surprised me how easy it was for me to get my script increased – if I asked once it would be done. But to get it decreased was extremely hard – I had to fight at every turn – energy that would've been better spent concentrating on my reduction.

I believe that if I was on daily supervised consumption at this time I probably would still be on methadone because they really didn't want me to reduce and I wouldn't have had control – the pharmacist would have. I'm not sure how the pharmacist would have reacted to me only taking some of my methadone and throwing the rest away!!

With hindsight, would you have gone on methadone in the first place?

To change a bit of my history may have the result of a different outcome for me so no, I wouldn't change it. The thing that really helped me though was that I was in rehab and I was learning about and getting an understanding of my mental addiction which helped me to stop.

What are the pros and cons of methadone?

When I was on 120mls of methadone I was still using a lot of gear on top. When I stopped the gear I didn't even cluck, the methadone must have been blocking it. I've found out since that above about 80-90mls a day, methadone acts as a blocker simply because the opiate receptors in the brain are totally clogged up with methadone, not allowing any other kind of opiate to have any kind of measurable effect.

I felt that the truth about the blocking effect was kept from me by my key-worker because when I'd asked why they wanted me to be on at least 80-90ml/day I was told that it was because this amount is when methadone has the best effect. I was told absolutely nothing about the blocking effect. I felt that important details were kept from me, and if I'd known this I would've done things differently and probably stopped the gear sooner.

Do you have any advice for others who are using methadone?

First of all, do your research on methadone – find out about it from independent resources, ask people who have been on it, who are still on it, those who have used it successfully and are still abstinent. Your local drugs project is probably the best place to start. There is also an organisation called The Alliance (formerly Methadone Alliance) that can give you all the information available.

It is then possible to make an informed choice, and then if you think methadone is for you, get up to an amount that you are comfortable with not using on top of. Then get help with the mental side of your addiction – this also needs to be conquered. Then get off the methadone – you don't need it any more.

Also, something that makes this process a lot easier is to give your life over to God, asking Jesus into your life by faith, believing in him and his power to help you will enable you to beat your addiction.

Do you have any comments for those who prescribe methadone?

I don't think that it should be prescribed in the manner that it is. It should be in a controlled environment and should always be in a reduction scheme with abstinence as the goal.

It's no good putting a band aid on a broken leg. Just prescribing drugs for addiction is only part of the solution, there also needs to be treatment for the mental side of addiction.

Would you like to add any other comments about methadone?

Methadone is not the answer – it's not the cure all that it is described as. It can help but not in the way that it is being used at the moment. The physical side of addiction is just the tip of the iceberg.

A methadone addiction is not as limiting as a smack addiction but it is still a ball and chain around your ankle. Until you are free from all drug use, legal and illegal, you are still an addict.