



# A TIMELINE OF OPIOID SUBSTITUTION (AGONIST) TREATMENT IN BRITISH COLUMBIA



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| 1926       | Rolleston Report released (United Kingdom): Elite committee of British physicians recognizes opiate addiction as a "manifestation of disease" and that continued administration of opiates by physicians can reduce the morbidity associated with addiction  |
| 1939       | Methadone is first synthesized (Germany)   |
| 1959       | Methadone treatment was first dispensed in Vancouver by the Narcotic Addiction Foundation of British Columbia for brief detoxification   |
| 1964       | Methadone treatment officially introduced in Canada: run by the Addiction Research Foundation in Ontario, they also developed guidelines for "good medical practice" in opiate maintenance treatment for the country   |
| Late 1960s | Methadone Maintenance Treatment (MMT) programs become well established across Canada including BC.   |
| 1972       | Amendments to the Narcotic Control Act place strict regulations on the prescription of methadone in Canada: All physicians prescribing methadone require authorization from federal health authorities   |
| 1982       | Number of patients in MMT drops to 560 in Canada: This represents about a third of the patients registered in 1972, approximately half of whom were registered in BC   |
| 1991       | Number of patients registered in Methadone Maintenance Treatment (MMT) program in BC is 1,221  |
| 1996       | Federal authorities pass jurisdiction over MMT to Provincial authorities nationwide. The College of Physicians and Surgeons of BC (CPSBC) takes over management of the Province's MMT program.   |
| 2004       | Number of patients registered in MMT program in BC is 8,221: Rapid rise in number of patients in MMT occurs after CPSBC loosens regulations on physician prescribing   |
| 2005       | North American Opiate Medication Initiative (NAOMI) trial begins   |
| 2009       | Number of patients registered in MMT programs in BC is 11,033  |
|            | Results of the NAOMI study are published in the <a href="#">New England Journal of Medicine</a> (NEJM) <ul style="list-style-type: none"> <li>Results indicate that participants treated with diacetylmorphine (heroin) reported improved physical and mental health, were more likely to remain in treatment and were less likely to take illicit drugs</li> </ul>  |
| 2010       | Buprenorphine/naloxone (Suboxone) approved as a limited coverage benefit in Pharmacare   |
| 2011       | BC College of Pharmacists requires all pharmacist and pharmacist managers to complete MMT training by September 30, 2011 to ensure compliance with the Board approved policies. Once complete pharmacists are required to sign the Declaration of Completion and Understanding form.   |
| Dec '11    | Number of patients registered in MMT programs in BC is 13,046  |
| 2013       | <a href="#">BC Methadone Maintenance System Report</a> published outlining performance measures for 2011/2012  |
| 2014       | All methadone patients in BC switched to a more concentrated formulation of methadone "Methadose". <ul style="list-style-type: none"> <li><a href="#">Many patients reported concerns about Methadose</a>, including that it did not last 24 hours</li> </ul>  |
| 2015       | <a href="#">BC Methadone Maintenance System Report</a> published outlining performance measures for 2013/2014 <ul style="list-style-type: none"> <li>Reports shows that only 36% of people who started on methadone maintenance treatment (MMT) in 2012/2013 were retained on MMT after 12 months.</li> </ul>  |
| 2016       | Prescribers no longer require an exemption to prescribe Suboxone for opioid use disorder <ul style="list-style-type: none"> <li>The College of Physicians and Surgeons will no longer maintain a central registry of patients registered in the methadone program.</li> </ul>  |
| Apr '16    | First results of the SALOME trial are published in <a href="#">Journal of the American Medical Association (JAMA): Psychiatry</a> . <ul style="list-style-type: none"> <li>Results indicate that hydromorphone is as effective as diacetylmorphine (heroin) in treating individuals with severe opioid use disorder.</li> </ul>  |
| Jul '16    | Physicians in British Columbia no longer have to hold a federal Section 56 exemption from the <i>Controlled Drugs and Substances Act</i> in order to prescribe buprenorphine/naloxone. See <a href="#">statement</a> .   |
| 2017       | <a href="#">Handbook</a> for patients on opioid substitution treatment developed by patients with financial support from BC Ministry of Health and coordination by the Centre for Addictions Research of British Columbia. Patients helping patients understand opioid substitution treatment.   |
| Feb '17    | PharmaCare covers Methadose™, buprenorphine/naloxone, and Kadian® 24-hour slow-release oral morphine for opioid use disorder treatment under <a href="#">Plan G</a> , based on income assessment and clinical criteria   |
| Jun '17    | The British Columbia Center on Substance Use (BCCSU) became responsible for the <a href="#">education and training pathways</a> and clinical care guidelines for prescribers of opioid use disorder treatment in BC  |
| Jul '17    | Updated <a href="#">BC Centre on Substance Use Guideline</a> for the clinical management of opioid use disorder published <ul style="list-style-type: none"> <li>The updated guidelines recommend Buprenorphine/Naloxone (Suboxone) as the preferred first-line opioid agonist treatment for opioid use disorder.</li> <li>Slow or sustained release oral morphine recommended as an alternative oral treatment to methadone and/or buprenorphine/naloxone.</li> </ul> |
| Oct '17    | BCCSU <a href="#">Guidance for Injectable Opioid Agonist Treatment (iOAT) for Opioid Use Disorder</a> released.  |
| 2018       | Amendments to Professional Practice Policy - 66: College of Pharmacists of BC, come into effect. <ul style="list-style-type: none"> <li>Name changed from "Methadone Maintenance Treatment" to "Opioid Agonist Treatment"</li> <li>Includes <a href="#">policy guides</a> for Buprenorphine/naloxone and slow release oral morphine maintenance treatment</li> </ul>   |
| Feb '18    | OAT prescribing is added to the <a href="#">scope of nurse practitioners</a>   |
| Mar '18    | Federal Government announces regulatory changes to allow health practitioners to prescribe and administer Methadone without an exemption <ul style="list-style-type: none"> <li>Federal government also announces plans to change regulations surrounding the prescription of diacetylmorphine (Heroin) outside of a hospital setting.</li> </ul>  |
| Sep '18    | Metadol-D made available via Special Authority Request   |
| Dec '18    | New <a href="#">online training</a> is developed by the BC Pharmacy Association for OAT for pharmacists  |
| 2019       |  |
| May '19    | Metadol-D <a href="#">becomes eligible</a> for regular health benefit coverage through PharmaCare  |

More information about the Harm Reduction program can be found at <https://towardtheheart.com/>

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