







First Nations Health Authority
Health through wellness

Opioid Agonist Therapy (OAT)


What is Opioid Agonist Therapy (OAT)?

-  OAT involves the use of medications to support those who are dependent on opioids to improve their mental, emotional, physical, and spiritual health.
-  OAT medications help to manage withdrawal symptoms and reduce cravings for opioids.
-  Quitting "Cold Turkey" or detoxing from opioids without medical support is not recommended as there is a high rate of relapse which can lead to overdose and death.
-  OAT is recommended as a safe and effective treatment option over detox alone.

Opioids include:
Heroin, Fentanyl,
Morphine, Oxycodone,
Hydromorphone
(dilaudid) & Codeine.

FNHA OAT Supports

- Community education and stigma reduction
- Developing and strengthening relationships with local OAT prescribers and pharmacies.
- Supporting nurse prescribing of OAT.
- Support with OAT clinic fee subsidy.
- Support with medical transportation for individuals to access their medications.

 A one-time OAT access grant of up to \$15,000 to support the development of OAT programming

Scan the QR code to learn more about OAT supports available through the FNHA



OAT Medications Include:



Buprenorphine-Naloxone (Suboxone):

This medication comes in pill form and dissolves under the tongue. It is taken once a day and is often prescribed as a first option.



Methadone:

This medication comes in liquid form and is taken as a drink once a day. Methadone is the oldest form of OAT and is very effective, especially when Suboxone has not worked or cannot be taken.



Slow-Release Oral Morphine (Kadian)

This medication comes in a capsule filled with small pellets which is taken once a day. It may be prescribed when Suboxone or Methadone have not provided benefit and is most often used to treat severe OUD.



Sublocade

This medication is a long-acting formulation of Buprenorphine and is given as an injection once a month by a health care provider. A person needs to be stable on Buprenorphine/Naloxone for at least 7 days before switching to Sublocade. This may be an option for those who have limited access to a pharmacy.

To learn more about OAT contact 4directions@fnha.ca