

CASE REPORT 9 [ID#8]

Novel Use of Naltrexone as a Long-Acting Antidote for Opiate Naïve Patients

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INTRODUCTION: Naltrexone is a potent long-acting opioid antagonist which has been used to manage opioid dependence. We propose it can be used as an opioid antagonist for the treatment of long-acting opioid poisoning such as methadone, buprenorphine or fentanyl analogues in opioid naïve patients.

CASE SERIES: We present 4 cases of long-acting opioid poisoning that were managed successfully with naltrexone to wean patients off a naloxone infusion (Table 1). The four patients were either opioid naïve or had abstained from opioid use for a period of time. They had all taken a long-acting opioid drug such as methadone or oxycodone, developed respiratory depression and required escalating and prolonged use of a naloxone infusion. They all responded well to oral naltrexone, one receiving three consecutive daily doses, to prevent recurrent respiratory depression, bradypnoea or apnea. Only one patient developed minor adverse symptoms of vomiting and anxiety.

CONCLUSION: In our case series, we have shown that an oral dose of naltrexone (50 mg) can be administered daily to patients who are opioid naïve and have taken a long acting opioid, in lieu of a prolonged naloxone infusion. Its use can potentially reduce the resources required to manage prolonged opioid poisoning.