

Guide to Understanding Accelerated Opioid Detox

You Deserve Freedom From Addiction.

Learn what makes The Coleman Method a unique and more comfortable way to detox quickly.



The Path to Freedom Starts Here.

Facts About Opioid Addiction

America's Opioid Crisis: How Did We Get Here?

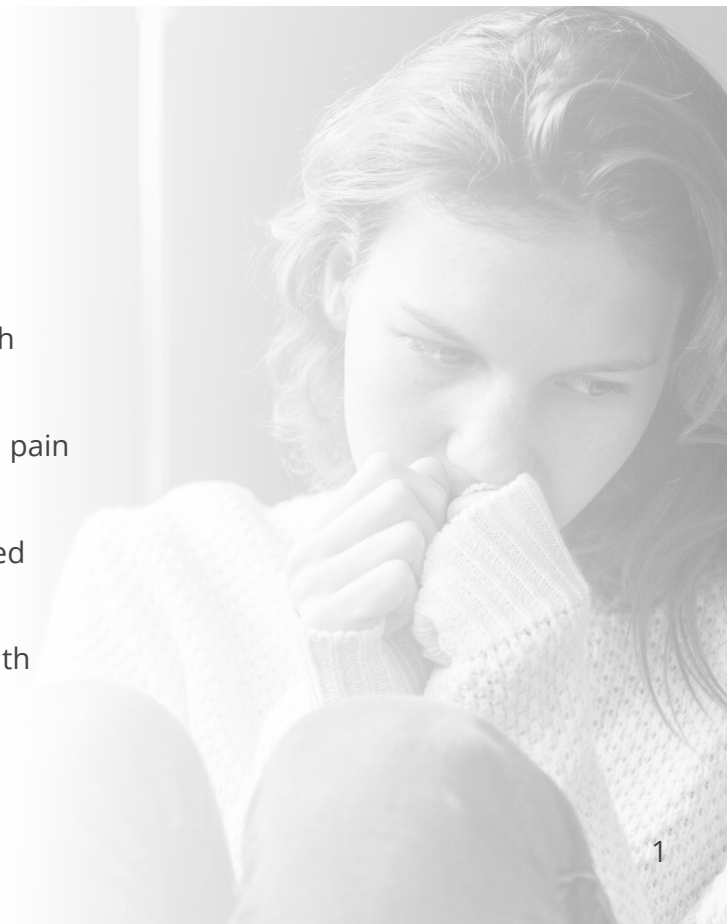
It doesn't really matter how people originally become addicted to opioids—the outcome is the same. Having to take prescription pills or street drugs simply to function and feel normal is a horrible imprisonment, and it doesn't go away until they get help.

Some people started using opioids like Percocet®, OxyContin®, or Vicodin®, because they were curious and wanted to experience what the drugs might be like. They may have used other drugs beforehand but very quickly became physically dependent. They stopped getting a euphoric feeling from the drugs and started noticing intense withdrawal symptoms when they tried stopping. Other people started on opioids because their doctor prescribed them for legitimate pain conditions. They might have had an accident, back pain, or some other medical condition that required opioids, and they likely took the medicine just as prescribed. But soon the medication stopped working as effectively and either the patient started taking more, or they started noticing how bad they felt if they tried to stop. The truth is that it doesn't take long to become physically dependent on these drugs, even when they are prescribed for real pain.

The United States is now suffering from an epidemic of opioid dependence. Drug cartels are able to bring huge quantities of fentanyl, heroin, and other opioids into the country so that they are available even in the remotest parts of America. Pharmaceutical companies spent millions of dollars reassuring doctors that they could prescribe these pills without creating dependency and, if patients continued to feel pain, doctors could keep increasing the dose. The consequences have been horrendous. Nearly 3 decades later the effect on American society and the economy is huge. The opioid crisis has caused enormous suffering with overdoses, broken families, and emotional upheaval all across the country. The economic toll of the opioid crisis is estimated at over \$78 billion per year.

5 Startling Facts about Opioid Use in the U.S.

- According to the National Institute on Drug Abuse, 130 Americans die from overdosing on opioids daily.
- In 2017, there were 70,237 drug overdose deaths, of which 47,600 (67.8%) involved opioids
- 11.1 million people aged 12 or older misused prescription pain relievers in the past year.
- 3 out of 4 people who used heroin in the past year misused prescription opioids first.
- Approximately 2.1 million people have been diagnosed with Opioid Use Disorder (OUD).



Choosing a Detox Method that is Right for You

Common Opioid Detox Options and How to Decide Which is Best For You.

Detoxing from opioid addiction on your own is extremely difficult — if not impossible — and potentially dangerous. Opioids cause physical changes in your brain. Most people cannot stop using opioids without a severe and intolerable withdrawal reaction, so that most people need to seek out professional help through detoxification. Detox is the first step on the road to recovery from opioid addiction.

Types of Detox:

- **Self Detox:** Stopping suddenly is known as “going cold turkey,” and this can be extremely uncomfortable and dangerous. Most people try tapering or weaning down themselves, but this is almost never successful. This approach is usually so uncomfortable that most patients are unable to tolerate the pain and resort to using opiates again. Self-detox from long-acting medication such as Methadone or Buprenorphine can be even more drawn out and uncomfortable. Self detox is not generally recommended due to the high probability of **relapse** and potential safety concerns.
- **Ultra Rapid Opioid Detoxification (URD or UROD):** This inpatient, hospital-based method involves putting patients under General Anesthesia and intravenously administering opioid antagonists such as Naltrexone. This process of flushing the drugs out of their system can take place in as few as five minutes. UROD comes with a high cost and serious medical risks — and there have been fatalities reported.
- **Inpatient Detoxification:** Inpatient detox can take place in a hospital or rehab facility for several days to upwards of 30 days in order to fully rid the body from opiates. Medical professionals supervise and administer the medications for pain and discomfort during the detox, as well as monitor the patient for safety. This method can be very expensive and often interrupts daily responsibilities. With inpatient detox, it is important to be aware that health insurance may not cover the full length of stay it requires to fully detox. The number of days required will vary with each patient.
- **Accelerated Outpatient Detoxification using The Coleman Method:** Our unique approach, called **The Coleman Method**, uses a combination of specific comfort medications and small doses of Naltrexone to help patients safely and comfortably detox in as few as three days. At **The Coleman Institute for Addiction Medicine**, 98 percent of patients successfully complete their opioid detox, without the risks and costs of General Anesthesia, or the need to take an extended break from their daily responsibilities. We recognize that completing a detox is just the first step towards recovery; behavioral and environmental changes are also necessary so that the brain has time to recover. After the detox, we use long-acting Naltrexone to help patients begin their recovery. **Naltrexone is a non-addictive opioid blocker that reduces cravings and blocks the “high” from opioids. It is also effective in reducing cravings for alcohol.** Available in both a one-month injection or two-month implant, Naltrexone is highly effective in bridging the gap between detox and recovery. We recommend that our patients have 6-12 months of Naltrexone therapy following the detox, while they begin to work their recovery program.

Accelerated Opioid Detox Using The Coleman Method

The Comfortable, Fast Detox.

The Coleman Institute for Addiction Medicine has been a leader in opioid detox since 1998. In 2001, Dr. Peter Coleman introduced accelerated opioid detox using The Coleman Method, as a safer, faster and more comfortable method of recovery. This method limits the pain associated with withdrawal and can be completed in as few as 3 days so you can reclaim your life with little disruption to your day-to-day responsibilities.

How it Works and What to Expect

Before the Detox Begins: Patients stop taking their opioids 16-48 hours before their first scheduled appointment, based on guidance from our physician.

Day 1: Because they stopped taking opioids the previous evening, patients will be in mild withdrawal. A licensed and experienced healthcare provider will administer sedatives and other comfort medications in the office and prescribe medications to take throughout the day. They will administer a micro-dose of Naltrexone to speed up the healing process and make it more manageable.

Intermediate Day(s): The second day of the detox is similar to the first in that patients continue to receive more sedatives and comfort medications throughout the day. Physicians will adjust dosages to make it as comfortable as possible. Again, micro-dose Naltrexone helps the detox process.

Final Day: By the third and final day of the detox, patients will have made significant progress. Under light sedation, the remaining opioids are gently removed from their brain, typically over six to eight hours. At this point the detox is complete, we administer long-acting Naltrexone, and the patient can return home knowing that all of the opioids have been removed from their brain.

Additional Information About Our Process

- Healthcare providers administer micro-doses of Naltrexone throughout the three days to accelerate the process, making the final day quick and easy.
- Following the detox, many patients choose Naltrexone implants for additional support as they start a new life, free from addiction.
- **Vivitrol®**, a once-monthly injection of Naltrexone, is also widely available to assist in relapse prevention.

Benefits of The Coleman Method

Outpatient Care:

- Detox in as little as 3 days
- 98% detox completion rate
- No hospital stay required

Less Discomfort

- Safe, assisted withdrawal process
- Customized medications to reduce discomfort
- Caring, compassionate medical professionals who specialize in addiction treatment

Recovery Support

- Naltrexone therapy to reduce cravings and prevent relapse
- Access to recovery support services

A woman with long, wavy brown hair, wearing a white button-down shirt and dark pants, is walking on a city street. She is smiling and looking towards the camera. The background is a blurred city street with other people and buildings.

More Than 6,500 Patients Treated

[VIEW PATIENT TESTIMONIALS](#)

Recovery Support

Continue Your Road to Long-Term Recovery.

According to the **Substance Abuse and Mental Health Services Administration** (SAMHSA), recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. There are four major dimensions that support recovery:

Dimensions of Recovery Support

1

Health

Overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being.

2

Home

Having a stable and safe place to live.

3

Purpose

Conducting meaningful daily activities and having the independence, income, and resources to participate in society.

4

Community

Having relationships and social networks that provide support, friendship, love, and hope.

Hope is the foundation of recovery. The belief that these challenges and conditions can be overcome is a core component of successful healing. Recovery is highly personal; you set your own path and your own pace. It is characterized by continual growth and improvement of health and wellness. Throughout your recovery journey, setbacks can be natural and can occur. Working through both anticipated and unforeseen setbacks is an exercise in resilience.

Relationships play a role in supporting your recovery. Family and friends often become the champions of their loved one's recovery journey. You may also experience adversities that lead to increased **family stress**, guilt, shame, anger, fear, anxiety, loss, grief, and isolation. Addressing adversity requires the resilience of both you and your family members. Your family can foster resilience by ensuring access to intentional peer support as a way of promoting your health and well-being. Having access to intentional peer support is crucial as it promotes engagement with treatment. Recovery support should be flexible and from a person-centered approach. Person-centered care furthers your recovery engagement by actively involving you in treatment decisions.

Support Services For Person-Centered Aftercare

The Right Support at the Right Time

We strongly believe that detoxification without appropriate follow up and treatment is almost always unsuccessful. Because of this we encourage all of our patients to find a treatment program that will best suit their needs and begin therapy with an appropriate substance abuse facility in their area as soon as possible following detoxification. Types of treatment modalities include:

- **Clinical Case Management:** Case managers provide support by putting you in contact with recommended health and human services. A clinical case manager can help develop a treatment plan and help you connect with resources to begin treatment. By staying involved, they can help you stay on the right track.
- **Behavioral Therapy:** **Behavioral therapies** help you change your attitude and behavior, increasing your ability to handle situations that may lead to substance misuse.
- **Individual Counseling:** Often called psychotherapy, or talk therapy, individual counseling is the process of working one-on-one with a trained mental health professional in a safe, confidential, and caring environment. It is highly encouraged to research your mental health professional to learn more about their specialty (i.e. do they have the experience related to your situation) and their practice philosophy (such as core beliefs of the practice) to ensure a good fit.
- **Substance Use Group Counseling:** Substance use group counseling is a process where a number of individuals with similar issues or concerns meet as a group with one or more therapists or facilitators to process and learn from one another's experiences. Substance use groups tend to have higher rates of success than other treatment methods. Groups reduce isolation, allow individuals to witness recovery in others, gain hope, and often can draw them into a culture of recovery.
- **Partial Hospital Program:** Partial Hospital Program (PHP) is an outpatient model of care that is time limited based on medical necessity of services. PHP would serve as an alternative to inpatient care or is the next step in care after an inpatient stay in lieu of continued hospitalization. These programs are available at least five days a week but also can offer half day, weekend, and evening hours.
- **Intensive Outpatient Program:** Intensive Outpatient Program (IOP) is a series of sessions aligned to person-centered plans. This may include services provided during evenings and on weekends and/or interventions delivered by a variety of service providers in the community. The program may function as the next step following partial hospitalization, detoxification, or residential services. IOP may also be used to prevent or minimize the need for a more intensive and restrictive level of treatment and is considered to be more intensive and integrated than individual outpatient services.
- **Structured Outpatient Addiction Program:** Structured Outpatient Addiction Program (SOAP) is an outpatient program designed for the treatment of addiction and/or co-occurring mental health disorders. Similar to IOP, the program operates five days per week, including evening hours, and is determined by specific conditions. The average length of treatment is six to eight weeks.

- **Residential Treatment:** Residential treatment is treatment taking place in an inpatient unit. Generally, it is between 30 and 90 days. The length of time is determined by your individual symptoms. Treatment may or may not include medication-assistance or dual-diagnosis treatment for psychiatric illness.
- **Trauma-Informed Services:** Some patients may require a trauma-informed treatment approach, as trauma may impact their substance misuse. SAMHSA defines a trauma-informed treatment approach to mental health treatment as one that:

- Understands the impact of trauma
- Recognizes signs and symptoms of trauma in the patient as well as friends and family
- Integrates knowledge of trauma into treatment systems and practices
- Works to prevent re-traumatization in the individual

Models of trauma-specific interventions for substance use disorders generally use a multicomponent approach consisting of working collaboratively with patients, families, friends, and human services providers. These individuals come together to contribute to empower and educate about trauma and its effects, and train in coping and interpersonal skills.

- **Family Engagement and/or Therapy:** Substance misuse can not only affect you, but also your family members. Therapy can help you to address any family-related factors contributing to substance misuse, as well as help improve family relationships. Family therapy may involve educating the family about substance use disorders and their psychological, medical, and behavioral effects, or it may actively engage all family members in psychological therapy to address how family relationships may affect or be affected by substance misuse.
- **Medication Assisted Treatment:** Medication Assisted Treatment (MAT) combines behavioral therapy and medications to treat substance use disorders.
 - Naltrexone is a non-addictive opioid blocker that reduces cravings for opioids to help with long-term recovery success as well as blocking the 'highs' from opioids.
 - Naltrexone Implant: The Naltrexone Implant is a small pellet that is inserted under your skin. The implant slowly releases the medication as it dissolves, typically lasting two months.
 - **Vivitrol®:** Vivitrol® is an FDA approved branded version of injectable Naltrexone that lasts one month. Vivitrol® works in conjunction with behavioral therapies.
 - **Buprenorphine:** Buprenorphine is a partial opioid agonist that blocks other narcotics while reducing withdrawal risk. When joined with behavioral therapy, you can achieve a person-centered approach to your treatment.
 - **Methadone:** Methadone is a full opioid agonist which is only available from opioid treatment programs (OTPs) certified by SAMHSA. Methadone can decrease the pain associated with withdrawal and blocks the 'high' of opiates. Counseling and social support are highly encouraged.
- **Support Groups:** Community-based support groups include Alcoholics Anonymous, **Narcotics Anonymous** (NA), **SMART Recovery**, **Refuge Recovery** and others. These groups are typically peer-led and many incorporate a 12-step program that encourages regular participation in meetings.

The Coleman Institute

for

ADDICTION MEDICINE

ASK FOR HELP. CALL **877-494-9333**

TheColemanInstitute.com

