

Contingency Management and Relapse Prevention for Stimulant Abusing Methadone Maintained Individuals

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Research Question

Do Contingency Management (CM) or Relapse Prevention (RP) Techniques, alone or in combination, reduce stimulant use by methadone maintained individuals?


Study Design

120 participants, all who are maintained on methadone and meet DSM IV criteria for stimulant dependency, are randomly assigned into 1 of 4 conditions

Contingency Management

Relapse Prevention

	NO	YES
NO	MMTP alone	MMTP plus CM
YES	MMTP plus RP	MMTP plus CM and RP



MMTP Stimulant Abusers

Subjects

- Enrolled on methadone maintenance at Matrix
- DSM-IV criteria for stimulant abuse or dependence
- Not dependent on alcohol or sedatives requiring treatment
- No stimulant treatment in past 30 days
- Not mandated by court or employer

MMTP Stimulant Abusers

Intake

- Screening interview
- Informed consent
- Two-week intake period
 - Physical exams
 - Baseline data
 - Lead-in Groups (Mon. Thurs. for 2 weeks)
- Drop criteria
 - Fail to get a physical or attend baseline session
 - Miss 2 Lead-in groups
 - Excluded by physician
- Random assignment to CM, RP, CM & RP, MMTP only



MMTP Stimulant Abusers

Study Parameters

- Mon., Wed., Fri. attendance (UAs every visit)
- 16 weeks
- Weekly data visit
- Follow-up at 4, 6, and 12 months post admit
- Subjects pay reduced methadone fees for participation



Relapse Prevention

Group Format

- 90 minutes; Mon., Wed., Fri.
- A topic is discussed for 45 minutes
- Recent and upcoming events are discussed in the context of relapse prevention

Relapse Prevention

Content

- Cognitive-behavioral
- Topics focus on areas relevant to relapse prevention
- Group does not address emotional, historical, spiritual, or psychodynamic issues
- Relapses are analyzed and discussed in terms of antecedents and plans for future relapse prevention

Relapse Prevention *Procedures*

- Subjects must attend at least one hour of group or it is considered a “miss”
- Subjects provide a UA each visit; temperatures for each urine are recorded (must be 93-97); specimens are observed weekly on a random schedule
- Breath alcohol test at each visit
- Drop criteria: 6 consecutive missed RP groups; 2 consecutive missed data visits

Contingency Management *Procedures 1*

- Subjects provide UAs Mon., Wed., & Fri.
- Temperature of each specimen is recorded (must be 93-97)
- One test per week is observed on a random schedule
- Breath alcohol test at each visit



Contingency Management *Procedures 2*

- Voucher redemptions are generally allowed for a wide range of options
- Staff are prohibited from providing counseling to CM subjects
- Drop criteria: 6 consecutive misses of CM sessions or 2 consecutive misses of data visits

Contingency Management

Reinforcement Schedule

- Progressive for 12 weeks; plateaus last 4 weeks
- Same as UVM (Higgins, et.al.) for first 12 weeks (\$997.50)
- \$20/UA last 4 weeks; \$10 bonuses for 3 consecutive negative samples
- Total possible earnings = \$1277.50



Contingency Management

Contingencies

- UA must be negative for stimulant and amphetamines
- Missed UA is considered positive
- Consequences of a positive test and criteria for re-earning lost position in the reinforcement schedule are same as UVM (Higgins, et.al)



Contingency Management Plus Relapse Prevention Combined

- Procedures are the same as for individual RP and CM conditions
- Subject who meets drop criteria for either condition is dropped from study participation



MMTP Only *Procedures*

- Standard methadone maintenance treatment
- Subjects provide urine specimens Mon., Wed., & Fri
- Subjects attend weekly data visit
- Drop criteria: 6 consecutive missed urines; 2 consecutive missed data visits

MMTP Stimulant Abusers

Demographics (n=120)

Age	44.8 yrs
Gender	55% male
Years of Education	12.19
<u>Race</u>	
– Caucasian	39%
– African American	32%
– Hispanic	26%
– Asian/Native American	3%

MMTP Stimulant Abusers

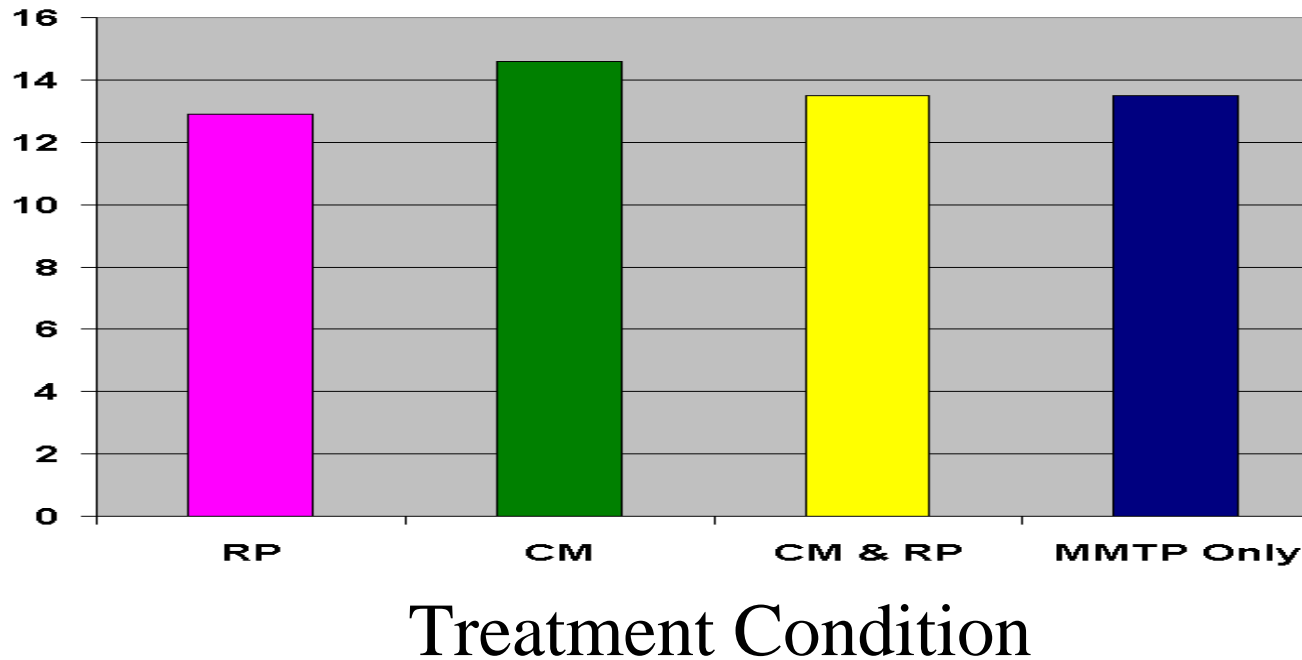
Psychiatric Comorbidity (n=108)

<u>Psychiatric Disorder</u>	<u>% Meeting Diagnostic Criteria (Current)</u>
Adjustment Disorder	1%
Antisocial Disorder	44%
Anxiety Disorder	25%
Eating Disorder	4%
Mood Disorder	23%
Psychoactive Substance Use Disorder	100%
Somatoform Disorder	3%

MMTP Stimulant Abusers Study

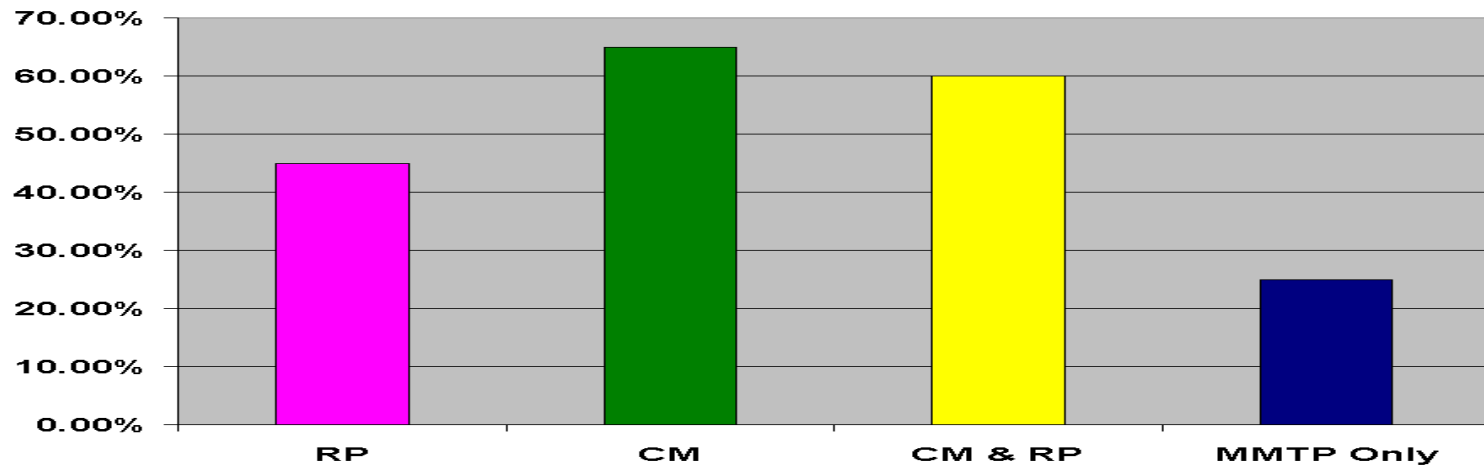
Retention

Mean # of Study Weeks



MMTP Stimulant Abusers In-treatment UA Results

% of Stimulant-Negative Urine Samples

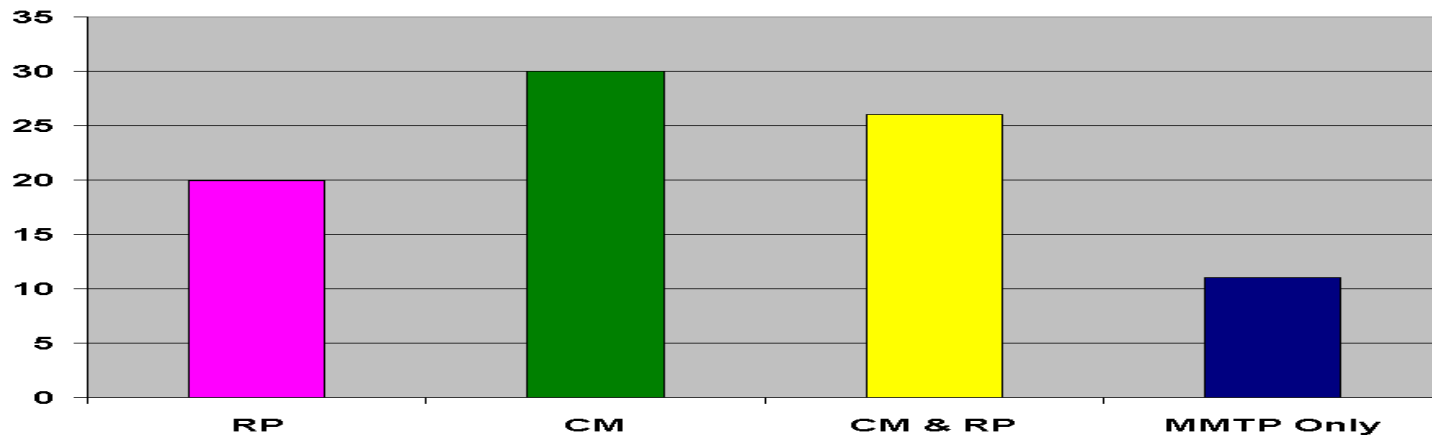


Treatment Condition

MMTP Stimulant Abusers

Treatment Effectiveness Scores

TES Points (# of Stimulant Negative UA's in the Trial)

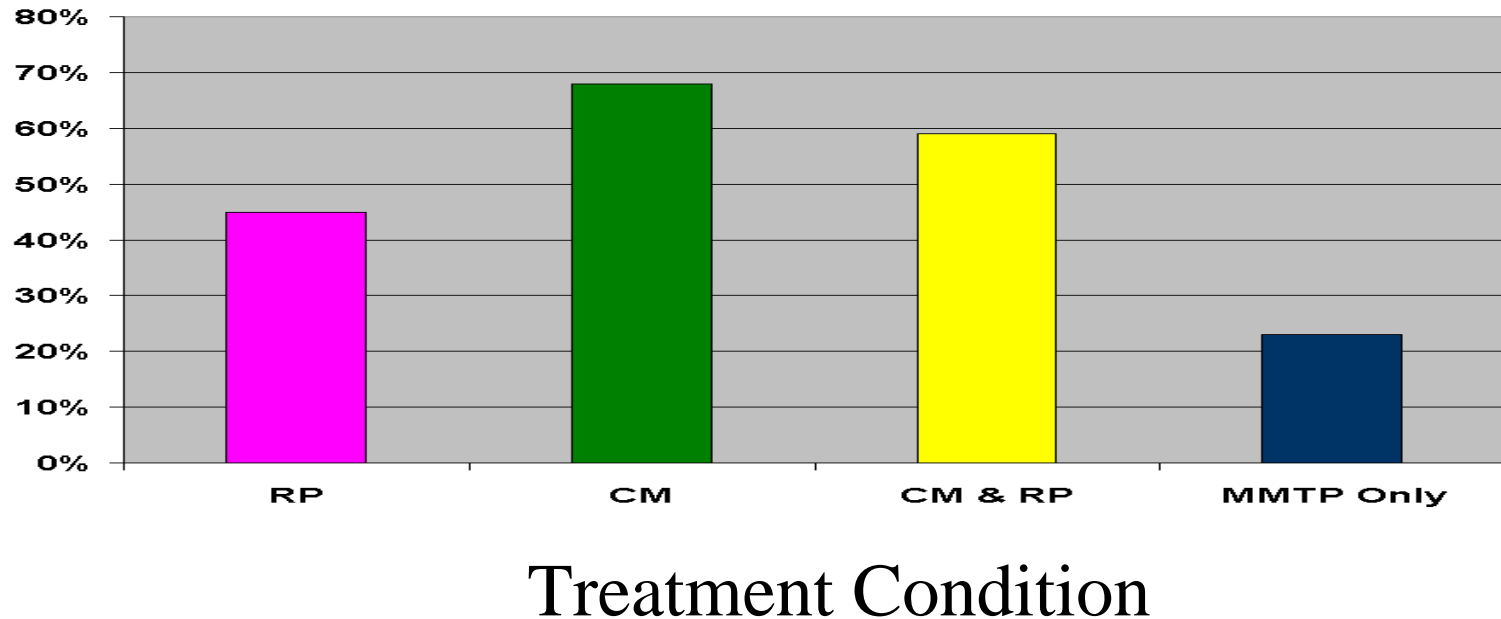


Treatment Condition

MMTP Stimulant Abusers

Week 17: Urinalysis Results

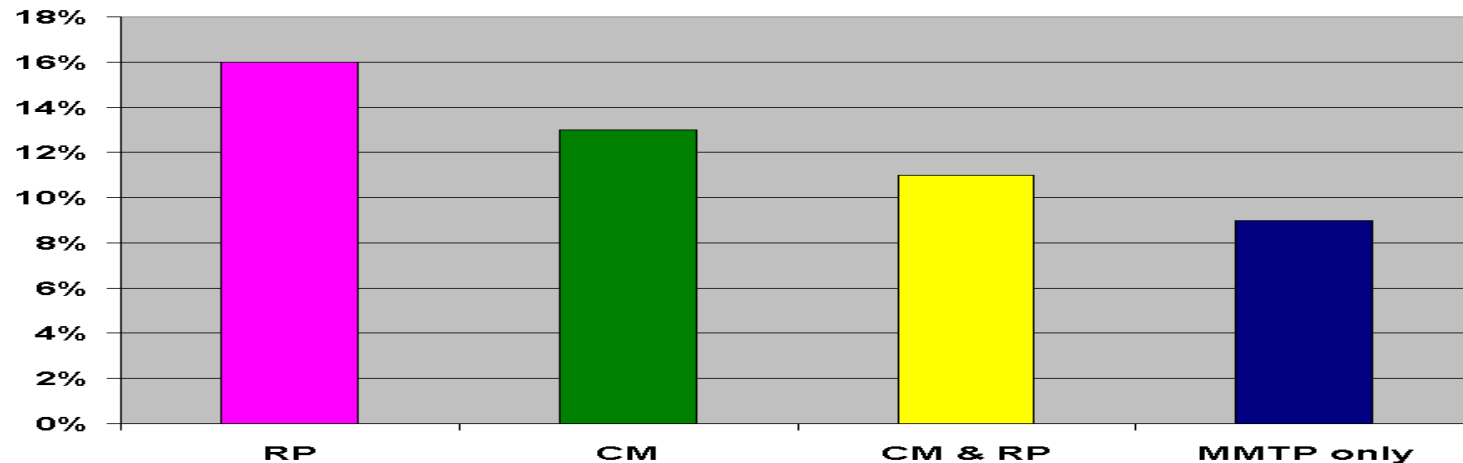
% of Stimulant-Negative Urine Samples



MMTP Stimulant Abusers

Week 26: Urinalysis Results

% of Stimulant-Negative Urine Samples

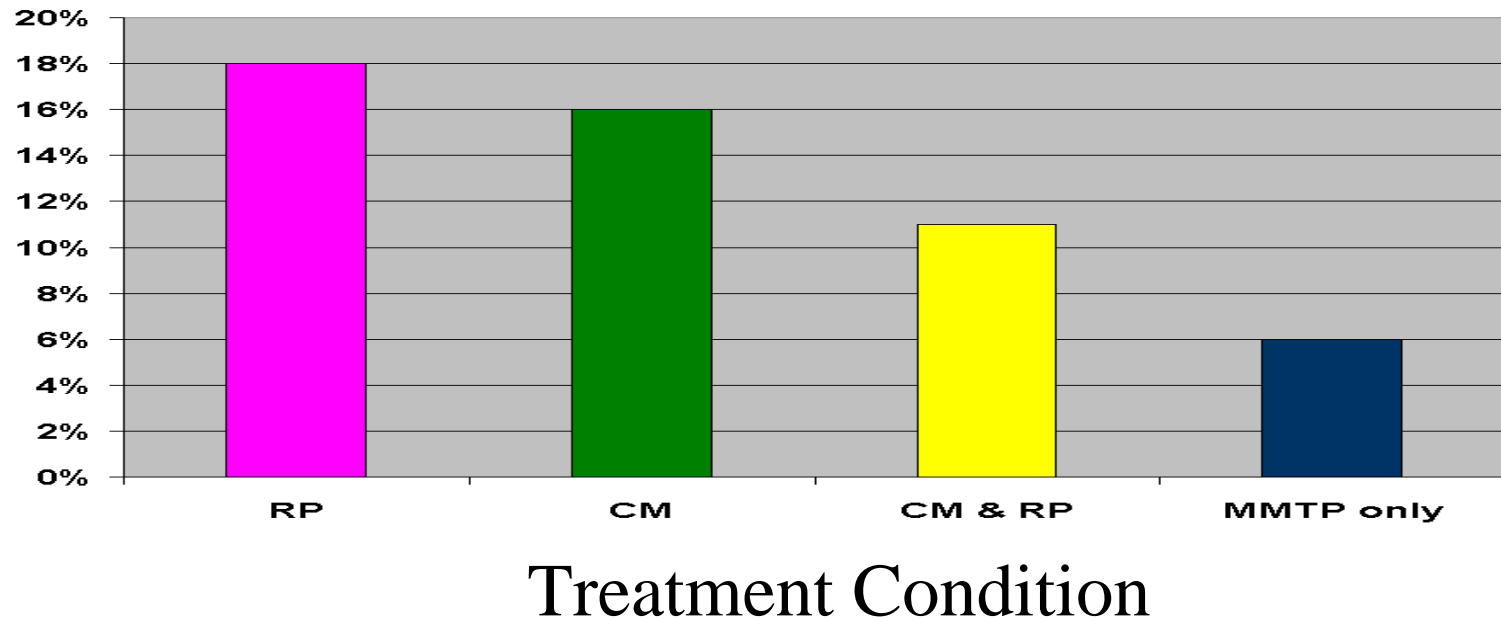


Treatment Condition

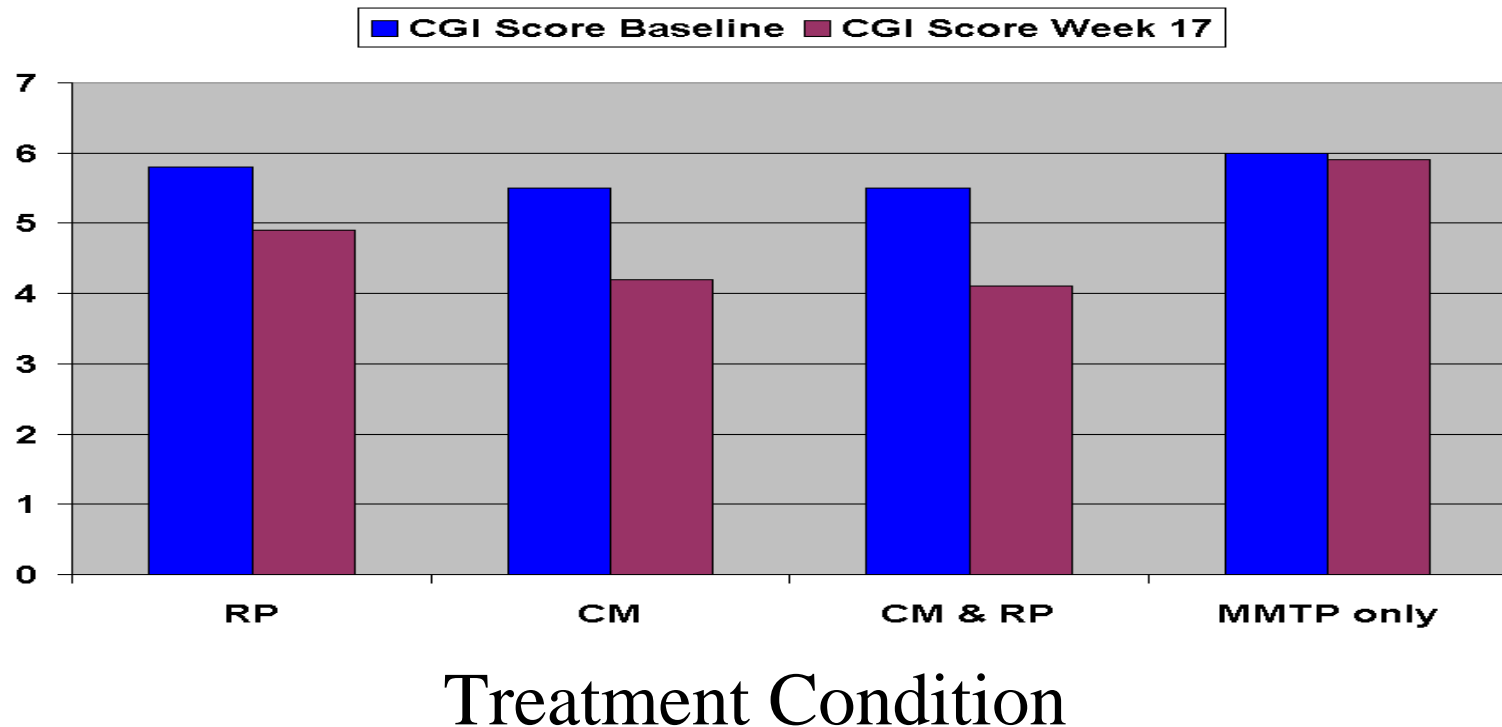
MMTP Stimulant Abusers

Week 52: Urinalysis Results

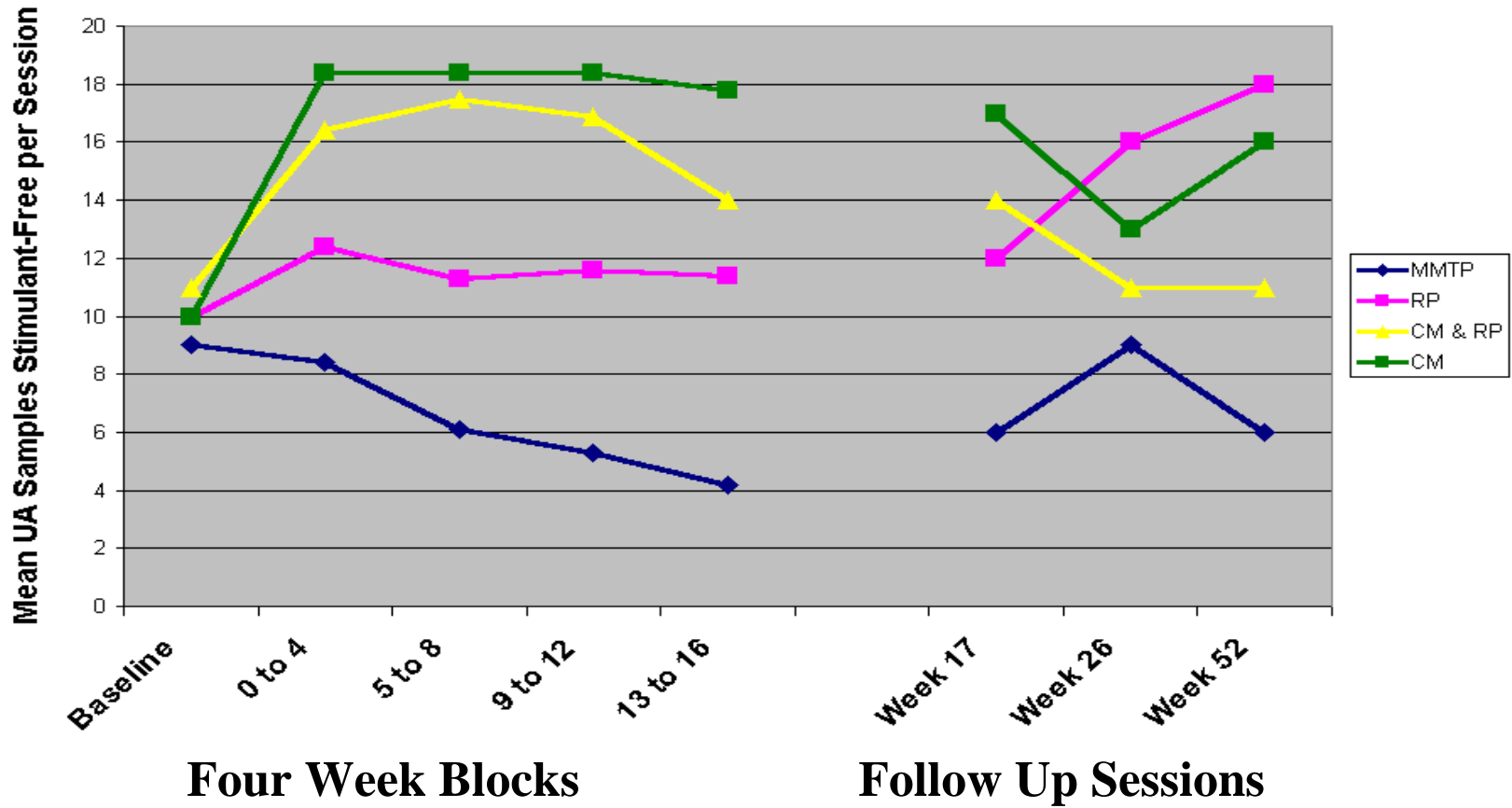
% of Stimulant-Negative Urine Samples



MMTP Stimulant Abusers Clinical Global Impression Scores

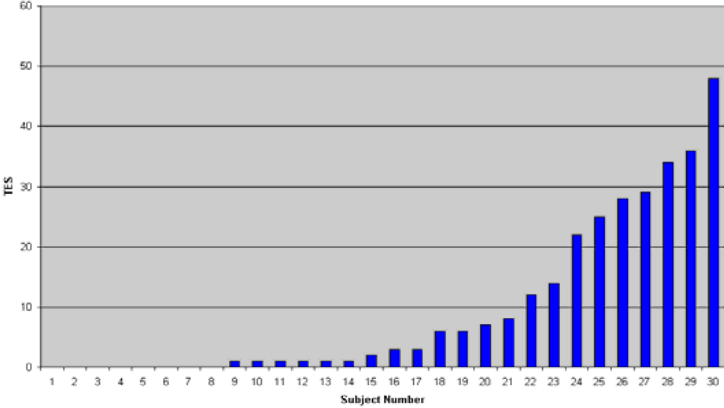


UA Results Across Study

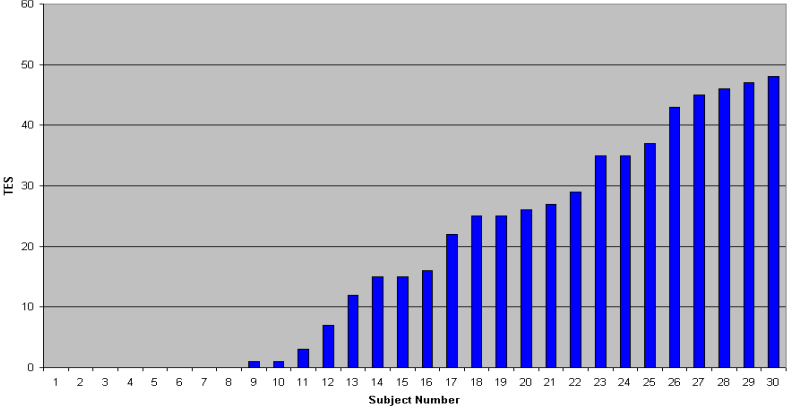




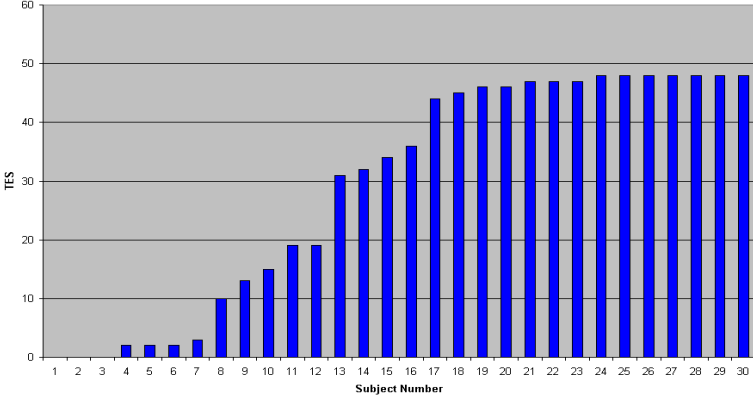
Methadone Maintenance



Relapse Prevention



Contingency Management



Contingency Management and Relapse Prevention

