

Getting through Opioid Withdrawal

Please note this factsheet is only a guide. If you are thinking about managing your opioid use seek advice from your doctor to get support tailored to your needs.
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What are opioids?

The term 'opioid' is used here to refer to opiates (drugs made from the opium poppy, such as heroin, morphine, opium and codeine) and synthetic opioids (drugs such as oxycodone and methadone).

What is opioid withdrawal?

Opioid withdrawal is a group of symptoms that occur after stopping or decreasing the amount of opioid you use. Opioid withdrawal symptoms may be physical or emotional, and are temporary.

What to expect in withdrawal

Different people will experience opioid withdrawal differently. Some people may find opioid withdrawal more challenging than others. If you are finding opioid withdrawal hard see your doctor to get support.

How long does withdrawal last?

Opioid withdrawal symptoms generally start 6-24 hours after stopping use. Symptoms reach their peak between days 1-3 of withdrawal, and start to improve after day 5.

What are the common opioid withdrawal symptoms?

Common physical symptoms of opioid withdrawal include:

- Headache
- Yawning
- Sweating
- Hot or cold flushes
- Goosebumps
- Flu-like symptoms
- Muscle aches and pains
- Nausea and vomiting
- Diarrhoea
- Sleep difficulties and sleep disturbance

Common emotional symptoms of opioid withdrawal include:

- Low mood or mood swings
- Anxiety, irritability or agitation
- Feeling distracted

What about opioid agonist treatments (methadone and buprenorphine)?

Methadone and buprenorphine are opioid medications that may be used:

- Short-term to reduce opioid withdrawal symptoms
- Long-term to help keep you abstinent from opioids and reduce your risk of opioid overdose, and other opioid-related complications if you were to lapse in future

These medications are usually taken daily and must be prescribed. Speak to your doctor if you would like more information about these.

What are the benefits of opioid agonist treatments?

Methadone or buprenorphine have been shown to be highly effective in reducing the risk of relapse, and preventing overdoses. They are also associated with a reduction in other health and wellbeing risks associated with opioid use, including legal complications and relationship issues.

What if I don't want to be prescribed opioid agonist treatments?

If being prescribed methadone or buprenorphine isn't for you, you can choose to withdraw entirely from opioids. This can come with some risks, including a higher risk of overdose if you do experience a relapse in future. Talking with your doctor is recommended if you choose to do this, so that you can discuss:

- ① Additional support options (e.g. detox, counselling)
- ② Other medications to manage symptoms of opioid withdrawal
- ③ Getting take home naloxone

What is naloxone?

Naloxone is a fast-acting drug that reverses opioid overdose and prevents death. It can be given by injection or by a spray in the nose. It is important to have naloxone in case you ever lapse in the future, as your risk of opioid overdose will be higher if you haven't used opioids for a long time. Naloxone can be purchased over the counter at a pharmacy, or at a lower cost with a prescription from your doctor.

How can I quit opioids or start on opioid agonist treatments?

Step 1: Get help by talking to your doctor. They will be able to arrange prescribing of opioid agonist treatment for you if you are suitable for this. If you also experience chronic pain, it is particularly important you speak to your doctor about other ways of managing this if you are reducing or stopping your opioid use.

Step 2: Talk to someone and get support. The following services are available to you:

- **Drug and Alcohol Counselling:** Call the *National Alcohol and Other Drug Helpline* (1800 250 015) to be linked in with counselling in your area
- **Online Counselling:** Head to *Counselling Online* (www.counsellingonline.org.au) for web-based drug and alcohol counselling.
- **Peer Support:** Consider getting peer support from *Narcotics Anonymous* (www.na.org.au) or *SMART Recovery* (www.smartrecoveryaustralia.com.au)

Step 3: Get rid of any remaining opioids and cut ties with your dealer to reduce your chances of a lapse.

What strategies can I use to manage my opioid use?

- Stay positive and be kind to yourself while you are experiencing opioid withdrawal
- Spend time with friends and family who support you
- Get away from your source of opioids. This might include deleting your dealer's phone number and stopping contact with them.
- Avoid situations where you used to use opioids and begin new activities to replace opioid use
- Set goals and rewards for using the money you save by quitting
- Good **nutrition**, **exercise** and **sleep** will help your body recover and ease some of the discomfort caused by withdrawal symptoms.
- Warm baths, massage, light exercise and deep breathing can help with aches and pains
- Sleep difficulties are common in withdrawal so follow these tips to help you sleep:
 - Try to go to bed around the same time each night, and set an alarm to wake at the same time each day
 - Go to sleep when you feel tired
 - If you do not fall asleep within 30 minutes of being in bed get back up and return to bed only when you are feeling tired

What strategies can I use to manage my opioid use? (continued)

- Expect to have cravings to use opioids; they are a difficult but normal part of withdrawal. Use the 4 D's approach anytime you experience cravings:
 - **Delay** acting on the urge to use opioids and remind yourself why you wanted to stop in the first place. The urge will pass after a few minutes on its own.
 - **Deep breathe.** Take long, slow breaths in and out. Repeat this three times.
 - **Do something else.** Take your mind off opioids by doing something else: put on some music, keep your hands busy, or go for a walk
 - **Drink water.** Sip water slowly to beat cravings for opioids. You'll feel better both physically and mentally.
- Most relapses occur within the first week after quitting. Having a specific plan or activity for each day can help you get through the withdrawal period and stay on track.
- If you have a lapse, keep yourself safe by practicing good hygiene, and use needle syringe programs and safe injecting rooms. Also make sure you let someone know you are using opioids so they can call for help if you need it.
- Consider getting support for any stresses in your life. Stress can make your withdrawal worse than it actually is. Talk to your doctor or consider getting help from a counsellor.
- Know that sometimes people undertake a number of withdrawal attempts before succeeding. If you keep this in mind and keep going you will succeed.