

Q&A: Methadone Patient Registry

1. What is changing in 2015?

The College will discontinue the current Methadone Patient Registry effective July 6, 2015. As of that date, Methadone Prescribers will no longer be required to submit initiation/transfer/cessation forms to the College for patients seeking MMT for addiction.

2. Why is the Methadone Patient Registry being eliminated?

The College believes methadone and all other narcotics prescribed by a physician require the same level of vigilance in prescribing. Specifically, professional judgment should ensure the risks and benefits for the patient as well as issues of public safety are considered. Therefore, the need for a specific registry for patients receiving methadone is not warranted.

3. How will this change be beneficial for patients?

Patients have the potential to have their treatment delayed with the current administrative system in place. The current administrative system only tracks those patients receiving MMT treatment. Who is a good candidate for MMT like any other drug is a medical decision between the physician and patient. Real time treatment will no longer be obstructed by the need to register and de-list patients.

4. How will it be beneficial for physicians?

While many physicians seek approval from the CPSO to commence methadone treatment, it has never been a formal requirement. The Patient Registry has been an administrative tool, which is no longer required. Physicians have potentially delayed treatment awaiting CPSO approval. Without the Registry in place, patients will be able to access immediate treatment on MMT.

5. What will happen to the patient registry that the College now maintains?

The Methadone Program will no longer enter information and the current data will be disposed of according to the CPSO retention policy. Eventually all information will be expunged.

6. Will the College still be involved in any aspect of the program and if so, how?

The College will continue to track those physicians who receive an exemption from Health Canada to prescribe methadone for addiction. In addition, the College will continue to assess MMT prescribers, maintain and update the Methadone Maintenance Treatment Standards and Guidelines and work with the Centre for Addiction and Mental Health on educational programs for MMT.

7. Will the MMT Program Standards and Clinical Guidelines still apply or will there be new ones?

The College will expect that physicians be in compliance with the MMT Program Standards and Clinical Guidelines. As these guidelines undergo a review every five years, the standards and guidelines that relate to CPSO approval to initiate a patient will no longer be required.

8. How will physicians who prescribe methadone be affected?

The only effect on physicians who prescribe methadone is they will no longer be required to submit the initiation and cessation information to the College. Overall, there should be no effect on physicians who prescribe methadone as it is the physicians' clinical judgment that should determine whether a patient should be initiated and maintained on Methadone Maintenance Treatment according to the expectations set out in the standards and guidelines.

9. Who will process the application for exemptions, the assessment of physicians and recommend to Health Canada the names of physicians for consideration of an exemption to prescribe methadone?

Physicians who wish to prescribe Methadone for opioid dependence will be required to go through the College's process of completing an application, training and a clinical mentorship prior to the College endorsing their methadone exemption to Health Canada. The College will continue to assess prescribers on an ongoing basis.

10. How will patients currently on methadone be affected?

Patients should not be negatively affected by this change. In fact, in those cases where a patient could not access treatment because a former prescriber had not completed the appropriate paperwork for submission to the CPSO will now be free of this administrative barrier to treatment.

11. Patient care and access to treatment have been greatly improved since 1996 when the College became involved in administering the methadone program in Ontario. How will the new program ensure this continues?

The Patient Registry was only one aspect of the Methadone Program. The College will continue to support the methadone exemption process, the administration of physician assessments, and, in the interim, the methadone line at 416-967-2600 ext. 661 (primarily as a referral line for patients seeking treatment). However, moving forward we will work with stakeholders to develop an external referral service for patients.