

Penal Code Section 1210(c) defines successful completion of treatment:

The term "successful completion of treatment" means that a defendant who has had drug treatment imposed as a condition of probation has completed the prescribed course of drug treatment and, as a result, there is reasonable cause to believe that the defendant will not abuse controlled substances in the future.

The first condition, "completed the prescribed course of drug treatment," should be evaluated in the context of the treatment plan. The collaborative efforts of judges, probation officers, parole officers, prosecutors, defenders, law enforcement, administrators and treatment providers have led to the successful implementation of SACPA and have encouraged many individuals outside of direct treatment to become very knowledgeable about treatment. Nevertheless, SACPA appears to place the primary responsibility for the treatment plan on the treatment provider (Penal Code Sections 1210.1(c) and 3063.1(c)). We believe the discussion above concerning the role of the physician in planning and implementing NRT is consistent with this part of SACPA. Taken in accordance with a treatment plan, use of methadone should not be considered "abuse of a controlled substance."

Review of the Evidence-Base: The Alcohol and Drug Programs has reviewed the evidence accumulated over the last 30 years from the medical and scientific community. That evidence supports, in the strongest possible terms, that clients who are stabilized--compliant with treatment plan, not engaged in drug seeking behavior, etc. yet still taking methadone--should be considered "successfully treated." Accordingly, success in methadone treatment does not require discontinuation of Narcotic Replacement Therapies (NRT); indeed, premature discontinuation of methadone is highly associated with illicit drug relapse and increased rates of death. Further, a medical decision to discontinue NRT should come directly from the treatment provider's physician who is providing the NRT.¹

We encourage SACPA lead agencies to develop communications advising court or parole authorities that continuation of methadone maintenance is a necessary component of an effective treatment plan for the client, to be discontinued only after consultation with the treatment provider's medical staff. After NRT is discontinued, evidence documents high rates of relapse to opiate use, return to criminal activity, and significantly increased incidence of high risk behaviors and death. NRT should not be discontinued casually, and certainly not without the full cooperation of both the prescribing physician and the client.

¹ Addiction Treatment Forum, "Methadone Maintenance in the Treatment of Opioid Addiction" 2002.

All County Lead Agencies
July 30, 2003
Page Three

It is our intention that the courts will evaluate successful treatment of clients receiving NRT based on their social functioning, and not simply on whether they remain on NRT. Specifically, there should be an examination as to whether there has been a change the client's behavior in regard to illicit drug use, employment status, illegal activities and family relations.²

Please share this policy letter with all collaborative parties and encourage their careful consideration of the attached research findings. If you need additional guidance, please contact your SACPA County Liaison at (916) 445-7456 or e-mail SACPA@adp.state.ca.us

Sincerely,

[Original Signed By]

DEL SAYLES-OWEN
Deputy Director
Office of Criminal Justice Collaboration

Attachment: [Synopsis of three professional papers on the role of methadone maintenance in the treatment of addiction:](#)

1. "Leaving Methadone Treatment: Lessons Learned, Lessons Forgotten, Lessons Ignored," Stephan Magura, Ph.D., and Andrew Rosenblum, Ph.D.
2. "Methadone Maintenance vs. 180-Day Psychosocially Enriched Detoxification for Treatment of Opioid Dependence, A Randomized Controlled Trial," Karen L. Sees, D.O., Kevin L. Delucchi, Ph.D., Carmen Masson, Ph.D., Amy Rosen, Psy.D., H. Westley Clark, M.D., Helen Robillard, R.N., M.S.N., M.A., Peter Banys, M.D., Sharon M. Hall, Ph.D.
3. "Opiate Initiative: Evidence Summary," Mark Willenbring, M.D., VA QUERI INITIATIVE, VA Headquarters, Washington D.C. and Minneapolis VA Medical Center, 7/25/01.

² National Institute on Drug Abuse: Behavioral Therapies Development Program – Effective Drug Abuse Treatment Approaches, Individualized Drug Counseling for Methadone Maintenance Opiate Addicts; January 22, 2001.