



**MINISTRY OF HEALTH
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CEO SingHealth
CEO NHG
CEOs and CMBs of Restructured Hospitals
CEOs / GMs of Private Hospitals

RESTRICTIONS ON USE OF METHADONE

Methadone is an opioid agonist indicated for use either as an analgesic in the management of severe pain or as an adjunct in treatment of opioid dependence.

2 Medicinal products containing methadone are regulated by the Health Sciences Authority (HSA) under the Medicines Act. Currently, there are no medicinal products containing methadone approved by HSA for use in Singapore, and HSA will only allow such products to be imported on a case-by-case basis upon special request by a doctor for use in the medical treatment of named patients under his care. In addition, methadone is also scheduled as a Controlled Drug (CD) under the Misuse of Drug Act and can only be imported by those who hold the necessary CD licences, which are issued by HSA under the authority of the Minister for Home Affairs.

3 MOH and HSA have noted a significant increase in the use of methadone in recent years, especially in the public hospitals, and this has been attributed to the increasing use of methadone as an analgesic for pain management. In this respect, MOH and HSA are concerned over the potential abuse of this drug by patients, and would like to highlight that the MOH Clinical Practice Guidelines (CPG) issued in 2003 on “Cancer pain” does **not** recommend the use of methadone as an analgesic by non-specialist practitioners, as its peculiar pharmacological properties would cause pronounced inter- and intra-individual differences in its duration of action and relative analgesic potency.

4 With regard to the use of methadone in the treatment of opioid dependence, doctors need to be mindful of the national policy of “zero-tolerance” towards drug addiction, which places very strict restrictions on the use of drugs such as buprenorphine and methadone for substitution therapy.

5 Given the above concerns, MOH and HSA will be imposing additional controls on the import and use of methadone by doctors:

- (a) HSA will only allow the importation of methadone for the following cases:
 - i. For use in substitution therapy for specific named patients in the Institute of Mental Health (IMH), in particular, designated opium addicts and pregnant female addicts – the request must be made by a psychiatrist attached to IMH and whose scope of practice includes addiction psychiatry.



Ministry of Health, Singapore
College of Medicine Building
16 College Road
Singapore 169854
TEL (65) 6325 9220
FAX (65) 6224 1677
WEB www.moh.gov.sg

- ii. For use in analgesia for named patients suffering from cancer – the request must be made by an oncologist or a doctor who practices palliative medicine.
- iii. For use in management of chronic pain for named patients – the request must be made by specialists who sub-specialise in palliative medicine or specialists whose scope of work includes pain management (eg. anaesthesiologists).

All doctors who are granted approval by HSA to have special access to methadone for the purposes mentioned above will be required to key in every prescription of methadone in MOH's web-based Central Drug Prescribing Registry (CDPR).¹ MOH will issue each doctor a user ID and password to access the Registry to enter methadone prescriptions for his approved list of named patients.

- (b) Doctors who have been granted approval by HSA to prescribe methadone are expected to prescribe the drug in accordance with the MOH CPG on Treatment of Opiate Dependence published in August 2005 and the MOH CPG on Cancer Pain issued in 2003.

6 MOH would like to urge all doctors to, as far as possible, use analgesics other than methadone. Except for terminal patients with cancer pain, all other patients should be treated with the minimum appropriate dose of methadone and subject to regular urine drug screens for other illicit drug use. These patients should also be examined for physical evidence of drug abuse (eg. needle tracks, inappropriate lethargy). If suspected of drug abuse, such patients should be referred to the National Addictions Management Programme (NAMP). MOH will be monitoring the prescribing of methadone and may, from time to time, conduct audits to determine the appropriateness of methadone prescribing.

7 All medical practitioners are reminded that, should they suspect any of their patients developing an addiction to any drug, they are required under section 19 of the Misuse of Drugs Regulations to notify within 7 days of the patient's attendance to the Director of Medical Services (DMS) and the Director of the Central Narcotics Bureau (CNB) with the following information of that patient: (a) Name; (b) Identity Card Number; (c) Sex; (d) Age; (e) Address; and (f) the Drug to which the person is believed to be addicted. The sample form for notification is enclosed in Annex A.

8 Please disseminate this information to relevant doctors and pharmacies in your clusters/institutions for their immediate attention and compliance.

Thank you.



PROF K SATKU
Director of Medical Services

¹ This is the revamped version of the Central Addiction Registry for Drugs, Singapore (CARDS).

Notification to MOH and CNB <small>* fields are mandatory</small>	
1. I, Dr _____, MCR number _____ of _____ (clinic name) hereby certify that I am treating the following patient for the following:	
* Drug to which the person is believed to be addicted	_____
2. The particulars of the patient is given as follows:	
* Name	_____
* IC Number	_____
* Age	_____
* Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female
* Address	_____ _____ _____
	Postal Code: _____

Please complete the form and fax one copy to MOH at fax number 6325 1744, and one copy to CNB at fax number 6227 3978.

Incomplete form will not be entertained.