

**A CARLAT PSYCHIATRY
REFERENCE TABLE**

Vivitrol vs Suboxone: Key Facts		
	Vivitrol (extended release nal- trexone)	Suboxone (buprenorphine/nalox- one)
Mechanism of Action	Opioid antagonist	Partial opioid agonist/ antagonist
Administration	Intramuscular injection, monthly	Oral, daily
Complete Detox Required Prior to Start?	Yes (7–10 days of abstinence)	No (12–24 hours of abstinence)
Recommended Target Dose	380 mg IM monthly	Varies with formulation
Generic Available?	No	Yes
Abuse Potential	None	Minimal
Regulatory Hurdles	None	Physicians must complete special training before prescribing
Cost	\$\$\$\$	\$\$
Pros	<ul style="list-style-type: none"> • Once-monthly injections make treatment easy and convenient for patients • Not an opioid, so there's no abuse potential • No special regulatory requirements—Vivitrol is not a controlled substance • Also beneficial for alcohol dependence 	<ul style="list-style-type: none"> • Patients can start treatment within 12–24 hours of opioid abstinence • Helps patients with withdrawal symptoms • More cost effective and more likely to be covered by health insurance
Cons	<ul style="list-style-type: none"> • Patients must be fully detoxed for 7–10 days prior to starting therapy • Clinicians must administer the gluteal IM injection; patients can't self-administer • More expensive and might not be covered by patients' health plans 	<ul style="list-style-type: none"> • Requires a DEA X-waiver to prescribe, plus specialized buprenorphine REMS training • Adherence with once-daily tablets may be an issue

From the Article:
“New Study Shows That Vivitrol Is Just as Effective as Suboxone...But Not Really”
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