

# Methadone Treatment for OUD Considerations for Special Populations and Circumstances:

## Pregnant and Parenting People

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Pregnancy: Opportunity for Engagement

Parenting: When we Abandon Support

Federal Statute is Misaligned with:

Normal Physiology of Pregnancy,

Realities of Postpartum Period, and

Right and Dignity of Parenting

# Methadone Metabolism, Pregnancy, and “Take Homes” for Split Dosing

J Addict Med • Volume 14, Number 5, September/October 2020

Clinical Use of the Methadone/Metabolite Ratio

J Addict Med • Volume 12, Number 3, May/June 2018

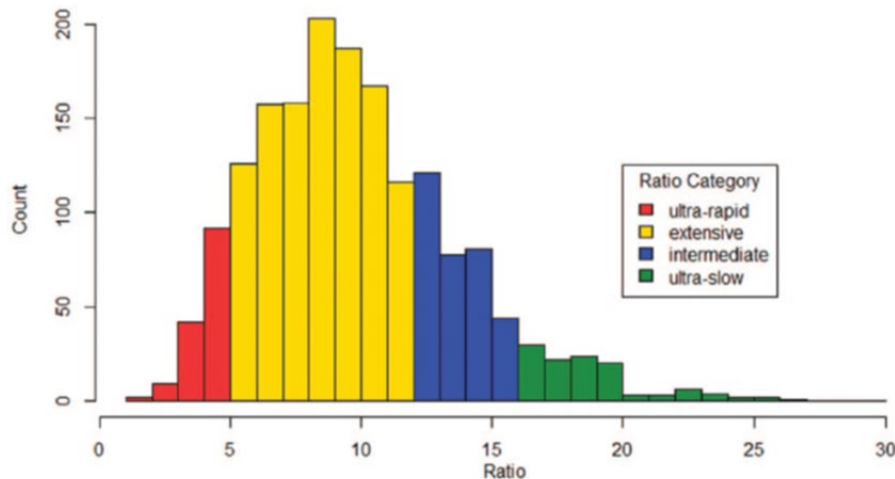


FIGURE 1. Distribution of methadone/metabolite ratio.

TABLE 3. Methadone/Metabolite (EDDP) Ratio* by Trimester				
Trimester	Mean Ratio	Median Ratio	SD	N (Individual Patients)
1	7.2	7.2	1.9	11
2	5.9	5.2	2.7	16
3	5.1	4.9	1.3	16
PP	7.2	6.5	3.3	11

PP, postpartum.

\*Data using each patient’s average ratio per trimester.

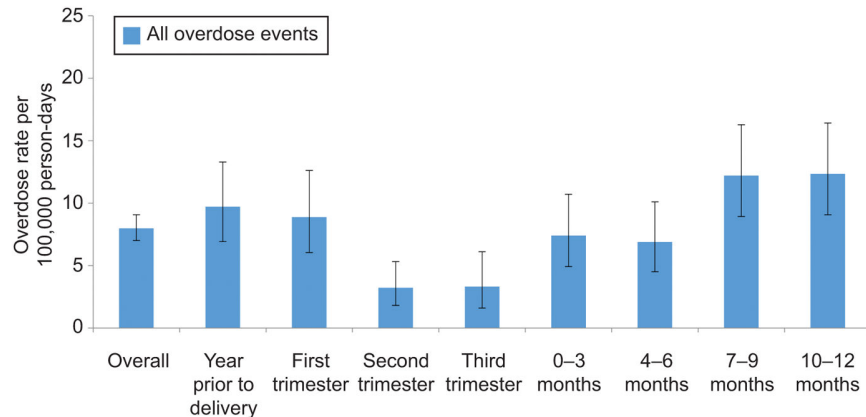
Pregnancy = Shift towards “ultra-rapid” metabolism of methadone  
Therefore, need split dosing and “take homes” to maintain steady state

1. McCarthy, et al., *Changing outdated methadone regulations that harm pregnant patients*. JAM, 2021

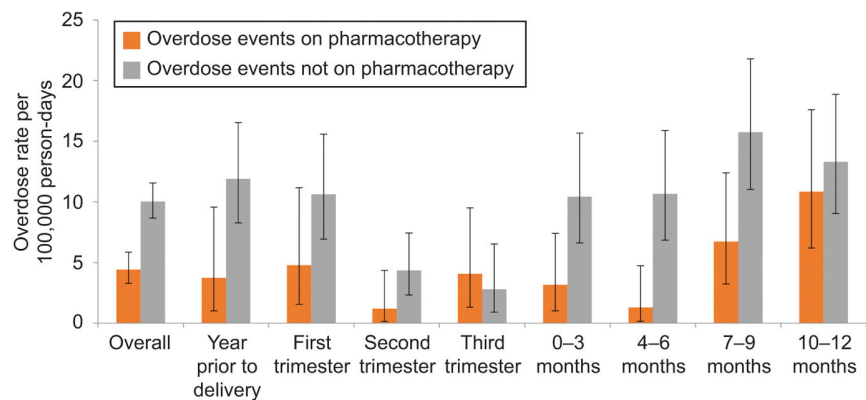
2. McCarthy, et al., *The use of serum methadone/metabolite ratios to monitor changing perinatal pharmacokinetics*. JAM 2018

3. McCarthy, et al., *The Use of the Methadone/Metabolite Ratio (MMR) to identify an individual metabolic phenotype and assess risks of poor response and adverse effects: Towards scientific methadone dosing*. JAM 2020

# Reproduction is more than Biology, and Pregnancy is part of Life Course: Postpartum Considerations



A



B

Need to redefine pregnancy so that care, payment, and public health metrics align

Treatment attrition postpartum associated with overdose

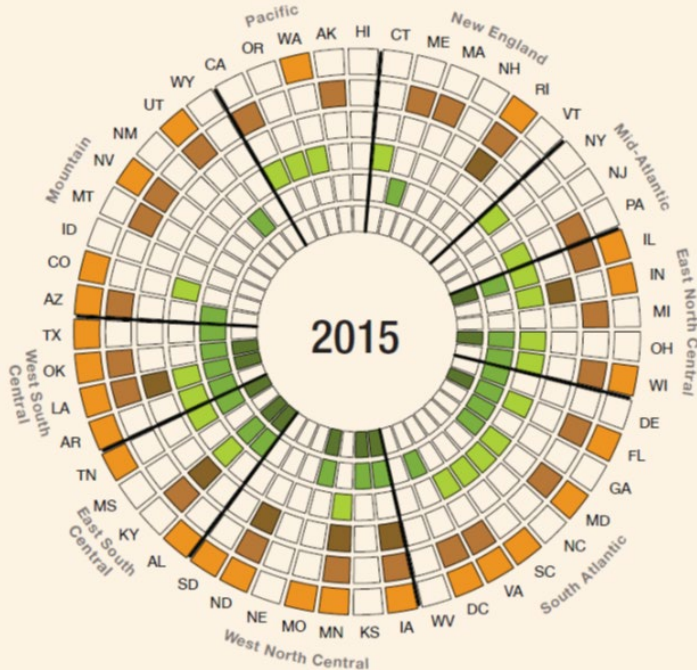
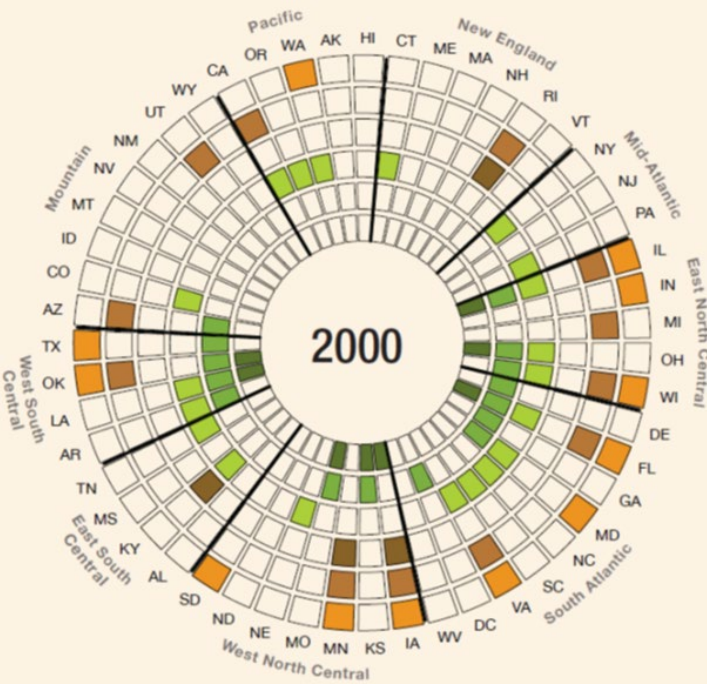
Health insurance is not health care – Medicaid Expansion perpetuates (in)eligibility criteria

Addiction treatment/OTPs, not welcoming of parents/children

1. Schiff, et al., *Fatal and nonfatal overdose among pregnant and postpartum women in Massachusetts*. ObGyn, 2018
2. <https://www.ilga.gov/legislation/publicacts/101/101-0010.htm>

# Punitive Policies Related to Substance Use in Pregnancy Proliferated

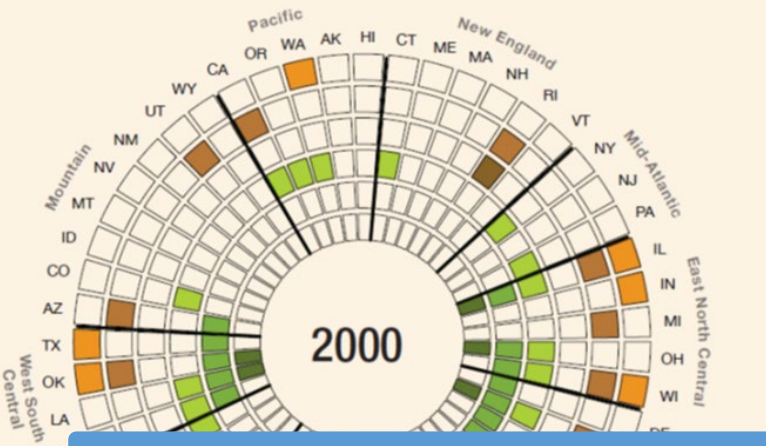
Punitive Policies Associated with:  
Increased Odds of Neonatal Abstinence Syndrome  
Increased Odds of Low Birth Weight  
Increased Odds of Preterm Delivery  
Decreased Odds of any Prenatal Care and APGAR 7+



1. Faherty, et al., *Association between punitive policies and neonatal abstinence syndrome among Medicaid-insured infants in complex policy environments*. Addiction, 2022
2. Thomas, et al., *Drug use during pregnancy policies in the United States from 1970 to 2016*. Contemporary Drug Problems, 2018
3. Carroll, *The harms of punishing substance use during pregnancy*. IJDP, 2021
4. <https://www.rand.org/pubs/infographics/IG148.html>



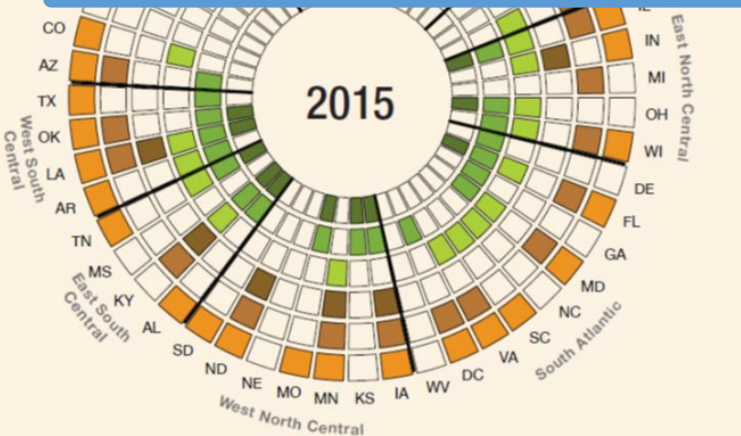
# Punitive Policies Related to Substance Use in Pregnancy Proliferated



US Drug Policy: Less Punitive

State Policies Drugs + Pregnancy: More Punitive

Driven by Increasing Restrictive Reproductive Policies



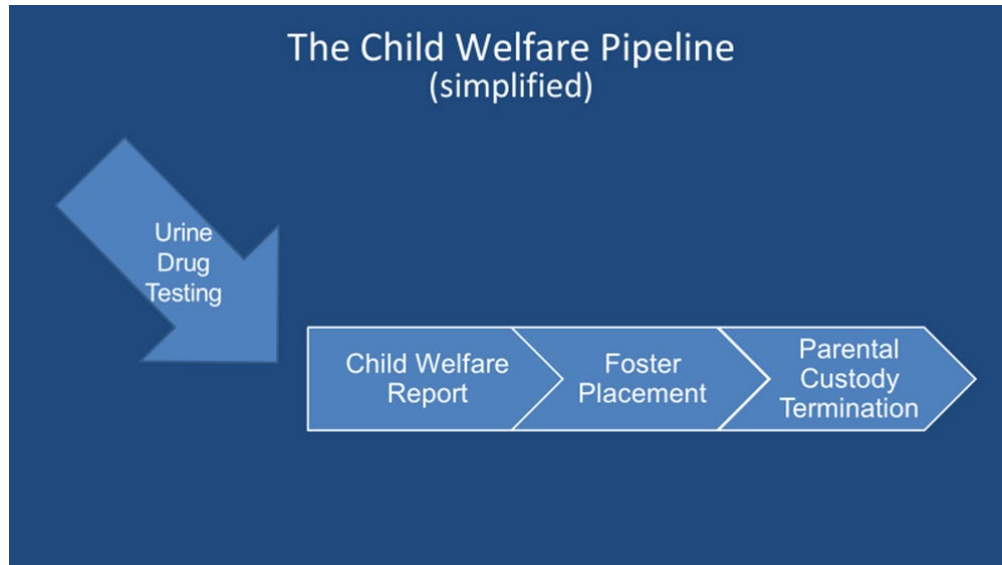
1. Roberts, et al., *Forty years of state alcohol and pregnancy policies in the USA: best practices for public Health or efforts to restrict Women's reproductive rights?* Alcohol and Alcoholism, 2017
2. Paltrow, *The war on drugs and the war on abortion: Some initial thoughts on the connections, intersections and effects.* Reproductive Health Matters, 2002

# Parenting as a Human Right vs. Family Separation: Provider Culpability

Rate of Screened-in Reports from  
Medical Professionals

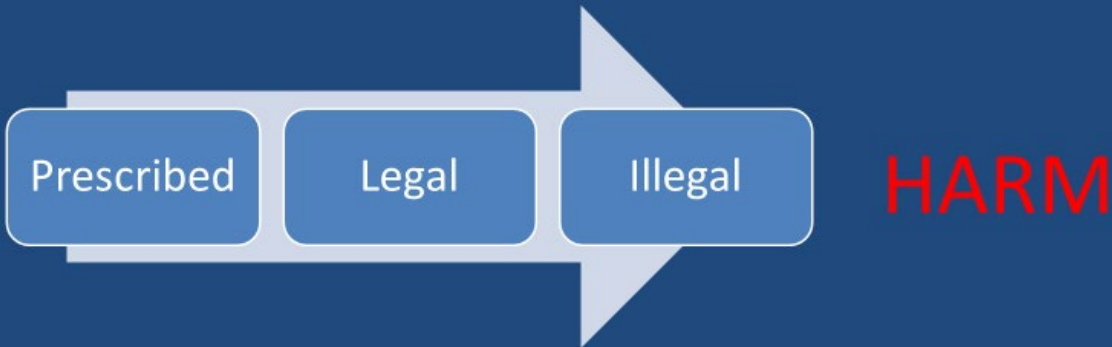
The child welfare and foster system holds perhaps the greatest power a state can exercise over its people: the power to forcibly take children away from parents and permanently sever parent- child relationships.

[www.movementforfamilypower.org/ground-zero](http://www.movementforfamilypower.org/ground-zero)



# Logical Tautologies, Ideology, and Misinformation

## The Ideology of Drugs



Known Teratogens: ACE-Inhibitors, Alcohol, Carbamazepine, Diethylstilbetrol (DES), Isotretinoin, Phenytoin, Tobacco, Valproic Acid (partial list)

## The Statutory Association between Substance Use in Pregnancy and Subsequent Maltreatment

Logical Tautology  
True (or false) by definition  
Defined in reference to itself  
"Formally undecidable"  
Not falsifiable  
Therefore, **not scientific**

$$A = B$$



# Serve not Save

## Support not Surveil

- OTP regulations must be loosened to address needs of pregnant and parenting people (split dosing, integrated reproductive health, child/family friendly)
- CAPTA reauthorization: opportunity for states to decouple substance use from child abuse, to roll back punitive and ineffective policies, to implement legislation that requires explicit consent for drug testing at birthing hospitalization
- Policy and public health work – center on people who use drugs and people affected by the child welfare system

Thank You