

Who should treat patients with opioid use disorder?

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In a Point/Counterpoint, two doctors debate whether or not family physicians should provide medication-assisted treatment to their patients with opioid use disorder.

Family physician David Loxterkamp states that family medicine, with its focus on relationships, communities, and team-based care, must be at the forefront of treating patients touched by this epidemic.

Because [family physicians](#) know how to listen, care, and be present for their patients, Loxterkamp contends, they are well-qualified to treat addiction.

In contrast, psychiatrist Richard Hill states that patients requiring medication assisted treatment need care from highly trained specialists in addiction medicine or addiction psychiatry who can treat both substance use disorder and co-morbid psychiatric disorders.

Adding treatment for substance use disorder to the responsibilities of an already-overextended primary care workforce, Hill states, is an undue clinical burden.

Editorialists Richard Saitz and Timothy Daaleman contend that substance use disorder can only be treated successfully if primary care is a strong point of entry to care. Primary care physicians must be responsible for the initial and longitudinal care of patients with [substance use disorders](#), and specialized services must be widely available and

accessible.

"Our nation will not be able to adequately respond to the current epidemic without addressing it in [primary care](#) and there is no question that the time to do it is now," they write.

More information: *Annals of Family Medicine*,
www.annfammed.org/content/15/4/310

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