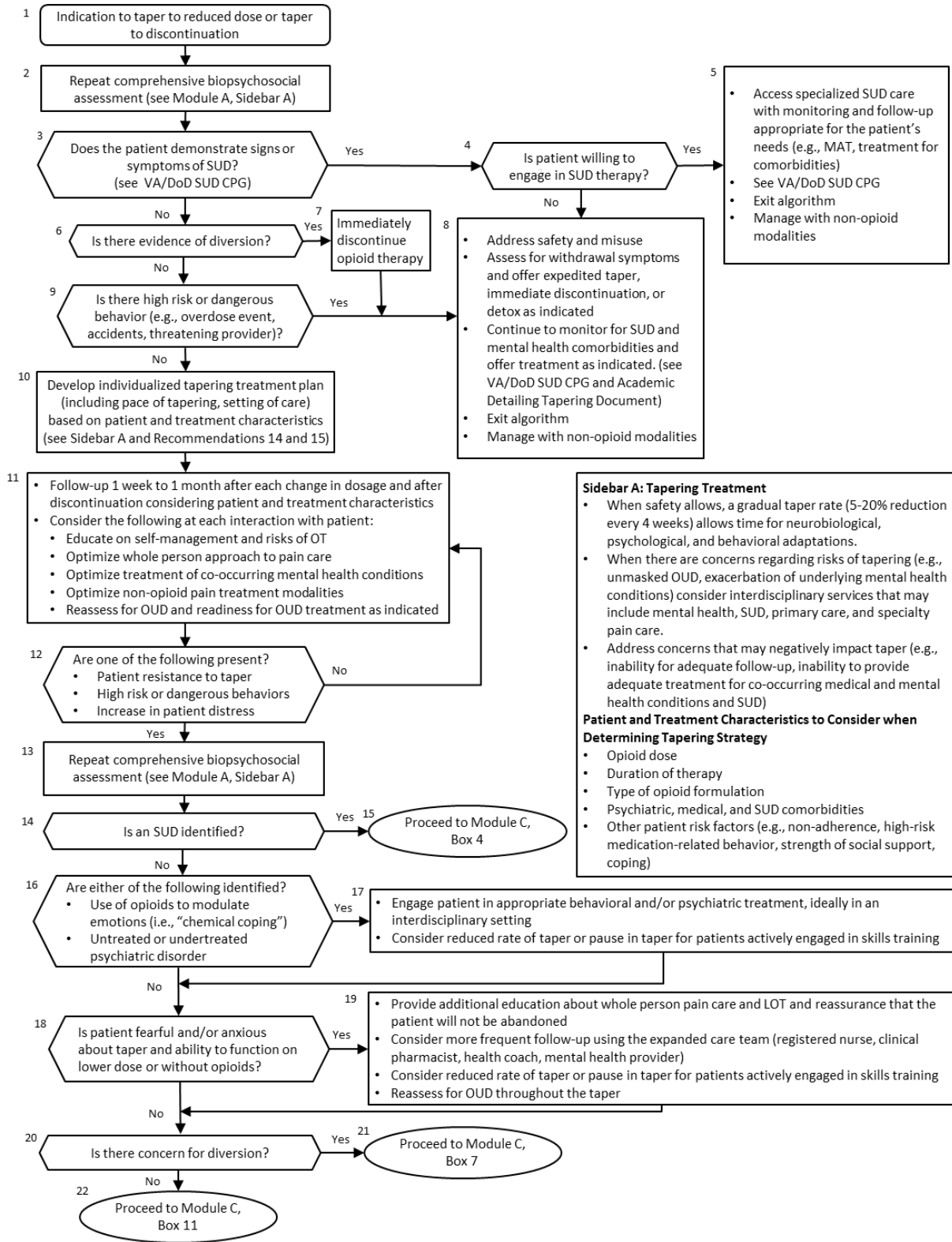


C. Module C: Tapering or Discontinuation of Opioid Therapy



Sidebar A: Tapering Treatment

- When safety allows, a gradual taper rate (5-20% reduction every 4 weeks) allows time for neurobiological, psychological, and behavioral adaptations.
- When there are concerns regarding risks of tapering (e.g., unmasked OUD, exacerbation of underlying mental health conditions) consider interdisciplinary services that may include mental health, SUD, primary care, and specialty pain care.
- Address concerns that may negatively impact taper (e.g., inability for adequate follow-up, inability to provide adequate treatment for co-occurring medical and mental health conditions and SUD)

Patient and Treatment Characteristics to Consider when Determining Tapering Strategy

- Opioid dose
- Duration of therapy
- Type of opioid formulation
- Psychiatric, medical, and SUD comorbidities
- Other patient risk factors (e.g., non-adherence, high-risk medication-related behavior, strength of social support, coping)

Abbreviations: LOT: long-term opioid therapy; MAT: medication assisted treatment; OT: opioid therapy; OUD: opioid use disorder; SUD: substance use disorders; VA/DoD SUD CPG: VA/DoD Clinical Practice Guideline for the Management of Substance Use Disorders