OST History in France



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OST history in France is a long and surprising one. When drug treatment was entrusted to public service psychiatrists only, it was almost unanimously rejected. In the early seventies, only 52 places were allowed in France for access to methadone, and most professionals refused to open those facilities.

Much later, in the late eighties, along with the rising of HIV/AIDS epidemic, many GPs, being in contact with people who injected drugs and wanting to help, decided to prescribe, without authorization, either slow release morphine or low dosage buprenorphine (0.2 mg) known as Temgesic®.

It was not until February 1996, that Subutex® (buprenorphine 0.4,2, or 8 mg) was officially authorized as substitution treatment, accessible to any GP, with a prescription going up to 28 days.

The same year, followed the first decrees creating « methadone centres », that had to be managed either by public hospital or by associations involved in drug treatment. First prescriptions were allowed only by doctors attached to these centres, but following ones could be transferred to any GP, when the patient was judged to be stabilized. Methadone mixture was then prescribed in bottles of 5,10, 20, 40, 60 mg but the prescription could not exceed 14 days, which was dispensed daily and sometimes observed either at the centre or at the pharmacy.

In 2002, a new decree allowed methadone into prison, and allowed the first prescription to any doctor working in a health institution public or private.

In 2006, generic buprenorphine appeared on the market, and soon afterwards Suboxone® (buprenorphine and naloxone) but both received little interest among professionals as well as people who used drugs.

In 2007, methadone capsules (1,5, 10, 20 and 40 mg) appeared on the market. They were restricted to stabilized patients who were at least one year after methadone mixture initialization and whose prescription had been extended to 28days, which could be dispensed daily, 3x / week, weekly or 2 weekly.

OST by slow dose morphine has a special status: not officially authorized, but allowed if approved by the Social Security practitioner. Experts by the Ministry of Health are working on a real status for this molecule.

After a very long assessment called "methaville", methadone is soon going to be allowed for prescription to voluntary GPs, after validation of specialists from the centres.

To this day, the estimate number of patients on buprenorphine is 100,000, on methadone is 60,000, and less than 5,000 on SRM. The amount of use of buprenorphine generics and Suboxone are not really rising but the amount of methadone capsules is slowly growing.

In conclusion, the OST program in France, belated like all harm reduction programs due to immobilisation and ideological positions of professionals is now well established and regulation is not too harsh. Unfortunately, the doctors and pharmacist networks, once very active have disappeared on most the territory, and it is still difficult for the patients to find professionals ready to prescribe or to deliver those treatments.