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Challenges of methadone maintenance treatment during the COVID-19 epidemic in China: Policy and service recommendations

The methadone maintenance treatment (MMT) program, implemented by the Chinese government to control illegal drug abuse, has been operating as a nation-wide program since its initiation in 2004 (Sullivan et al., 2015). By the end of 2017, it has established an extensive network of 789 community MMT clinics in 29 provinces, with 162,000 patients receiving treatments everyday (Committee, 2019). According to the regulation, patients registered with the MMT program are required to visit a designated clinic daily to take medication.

Since the novel coronavirus disease 2019 (COVID-19) epidemic, the local government of Wuhan has implemented measures to control the epidemic, including restricting population mobility through traffic control, etc. However, these measures make it difficult for MMT patients to go to the clinics. Furthermore, some patients were afraid of walking to the clinics because it may increase the risk of contracting virus in public. If the patient is offered to take methadone home without a comprehensive monitoring plan, it may cause serious consequences such as overdose and illegal drug trade.

Take the Liu Jiao Ting MMT clinic as an example, the clinic is located in central area of the COVID-19 epidemic (close to the Hua Nan Seafood Market) in Wuhan, serving 300 MMT patients living in the surrounding communities. The average number of visits decreased from 127 persons per day to 109 persons per day. We just finished a small survey using PHQ-9 and GAD-7 for 17 clients. Participants experienced some level of depression (PHQ mean score 14.65 ± 5.37) and anxiety (GAD mean score 11.65 ± 4.14). 14 participants reported it was difficulty to go to the clinic for medication, and 2 participants reported having been exposed to COVID-19 patients, while luckily no patients have been infected so far. The situation of the other 11 MMT clinics in Wuhan is very similar to that in Liu Jiao Ting clinic.

Concerning the epidemic and special situation of MMT clinics in China, timely special management measures for maintaining and improving services for substance-dependent patients should be developed urgently. We propose the following recommendation: (1) the national public



health emergency system should pay attention to MMT patients and other substance-dependent populations, including medication delivery, each prescription dosage and related regulations. (2) communications between the clinic and patients and between clinics should be strengthened via a variety of channels such as phone, mobile app (e.g. WeChat), or social media sites (Liu et al., 2020). (3) In order to prevent the client from COVID-19 infection, clinics in epidemic areas could carry out "Take-home dosing plan" based on special provisions for high- and low-risk patients and patients with disabilities (Matusow et al., 2018). Patients, whose daily dose is low, who usually have good compliance records, and who have no illegal records, could be allowed to take home a dose of 3 to 5 days. Implementing online appointments to get methadone with a propose dose is also necessary to reduce the risk of cross-contact of patients when visiting the clinic (Qiu et al., 2020).

Conflict of Interest

We declared no conflict of interests.

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