

The Boogie Man who sits in your ear.

Tapering to a Lowest effective dose is a procedure that that helps patients develop a realistic relationship to their medication and also affords patients the opportunity to confront psychological issues that are a part of addiction. There is literally no downside to being on a lowest effective doseunderline the word 'effective-' you will not lose effectiveness of your medicine. Patients should remember that they have a natural internal opiate system that is quite powerful. We all have a natural opiate system, and some theorize that the natural opiate system is there to protect us from feeling wounds in the middle of a fight. Remember that during most of the time during our evolution on this planet we had to fight with other animals for resources. Feeling a wound during the middle of a fight distracts one from ones opponent- our internal opiate system is powerful enough to protect us from feeling our wounds.

Tapering to a lowest dose is using your medicine efficiently. Being on a lowest effective dose also reawakens your natural opiate system such that your wellbeing is due to greater participation of your natural opiate circuits. There is no logical reason not to want to find the Lowest effective dose, and yet the vast majority of patients are highly resistant to giving it a try.

The Boogie Man

The photo above pictures the Boogie man who hears what I have to tell patients about tapering but then translates to patients what he want them to hear leading to confusion.

The Boogie man is essentially speaking to your fears. It is a part of the regressive psychology that got you in trouble with drugs, and confronting the Boogie man will be progressive.

Patients have various fears. One is the fear of relapse and return to their old lifestyle. This won't happen because you are not giving up effectiveness in finding the lowest effective dose. The fear that relapse might happen is related to the fact that many circumstances in the former drug addicted lifestyle are traumatic. Trauma tends to haunt people in its repercussions. Patients should remind themselves that the changes they have been making in their lives while in treatment have put them in a safer world where if is something is threatening, they have the support of their therapist and the growth they are achieving to deal with it.

Another voice of the Boogie man encourages patients to attribute too must of their success to their medicine, neglecting to fairly reward themselves for their achievements and stability. In reality, your medicine is no more nor less than a tool. Much like a car, it is an important and necessary tool, but tools serve us and our own ends. We own them, they shouldn't be owing us. One of your therapist came up with a beautiful phrase, 'be active wise rather than medication wise.' Your stability is due far more to your active achievements than to the medicine.

We don't force patients to taper to a lowest effective dose. We encourage it because it promotes growth.

Here's how to do it:

The Protocol

First, think like an engineer. Know your dose in milligrams. Most patients are on 16 mg of buprenorphine daily and you will not be making dose changes of greater than 2 mg at a time.

The protocol is to decrease your dose by two milligrams and thereafter every two weeks continue to step the dose down by two milligrams provided that you feel as natural in your step down dose as you did before starting. So the sequence would be 14 mg- 12 mg- 10 mg ... etc.

As you are tapering you are looking for a bottleneck where you tell yourself, I'm not quite sure this intermediate dose is quite as good as what It was before I started.

Say you comfortably get to 10 mg, go down to 8, but don't feel quite right after two weeks on the 8mg. This is the bottle neck, and it is what you are looking for in doing the procedure because it is giving you feedback about what the lowest dose for you is. When you feel the bottleneck, what should you do?

Above all, don't immediately run from the discomfort and bump the dose up. If you feel the bottle neck before 4 mg it is very likely to open up if you give it time. We recommend that people stay in the bottleneck at least 4 weeks, it should open up. If it does, continue the every two week step down. One should also consult with ones therapist to make sure that the negativity you are feeling in the bottle neck is related to what one should reasonably expect your medication to protect you against.

Imagine that you have back pain and it flares up. Have you been to a spine specialist to get the problem assessed? Pills tend to make us passive, many patients treat their pain as the problem rather than regarding their pain as a messenger who is trying to get them to pay attention to the problem underlying the pain.

Or imagine that you to have a decrease in stress tolerance. Do you really want to be blocking the discomfort of stress by numbing the discomfort rather than focusing on the psychological issues that make it difficult for you to manage stress.

In summary, wrestling with the boogieman will help you develop as a person. In doing the taper you are not losing the effectiveness of your medicine nor are you distancing yourself from treatment. If anything, you are improving your alliance with treatment as well as improving your resilience to life independently.

We want our patients to eventually be able to successfully graduate from treatment. Part of that success will be developing a proper emotional relationship to your medicine. In the long run, such a proper relationship will be yet another factor protecting you from relapse.