



Facilitating factors and barriers to the use of medications in publicly funded addiction treatment organizations

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Objectives: Publicly funded addiction treatment organizations have been slow to adopt pharmacotherapies. Few studies have examined the organizational factors associated with adoption of different types of medication in this treatment sector. This study identifies the organization-level facilitators and barriers to the use of medications in publicly funded addiction treatment organizations. **Methods:** Face-to-face interviews with 318 administrators of a representative sample of publicly funded addiction treatment centers in the United States. **Results:** Only 23.4% of programs reported using any of the 5 Food and Drug Administration-approved pharmacotherapies for treating addiction. An additional 14.3% of programs only used medications approved for the treatment of psychiatric disorders. Multivariate multinomial logistic regression results revealed that the odds of adoption of addiction pharmacotherapies were significantly greater in government-owned programs and in programs with more medical personnel. Programs that relied more heavily on non-Medicaid public funding tended to be less likely to adopt addiction treatment medications. Greater contact with pharmaceutical representatives was positively associated with medication adoption. **Conclusions:** Current public funding policies and lack of access to medical personnel are barriers to the adoption of medications by publicly funded addiction treatment organizations. Efforts to promote adoption may also benefit from greater detailing activities by pharmaceutical representatives. These findings suggest that the large research investment devoted to developing addiction treatment medications may have limited public health impact because of the characteristics of the publicly funded service delivery system and the limited attention given to this system by commercial purveyors of medications.