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How does methadone maintenance affect early mothering?

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Background

- Methadone is a synthetic opiate used as part of a maintenance programme since 1965

Method

A systematic literature review

- Searched core databases & selected journals
- Keywords for *mother, child & opiates/methadone*
- 4,886 titles retrieved after duplicates removed
- 93% agreement on 100 randomly selected abstracts
- Data extracted and analysed descriptively

Results

Only 4 papers were directly pertinent :

1. **Wilson et al (1981):** Level 1&2 measures. At one year, 100% of drug-free control, (n=58) 80% of MM (n=39) and 52% of untreated drug-dependent (n=30) women's children remained with mother; care patterns most similar MM and drug-free mothers
2. **Fischer et al (1998):** Level 2 measures only. At 3 years, 100% buprenorphine mothers (n=10), 56% MM mothers (n=43) and 44% slow release morphine mothers (n=29) still with children
3. **Fundaro et al (2002):** Level 1& 2 measures. At 7.8 years in 94% of MM (n=32) and 31% untreated (n=29) cases children with mother in a drug free household
4. **Simmat-Durand et al (2011):** Retrospective cohort study of 170 newborns 1999-2008. Level 1 & 2 measures. Improvements in direct child measures and lowered fostering rates attributed to MM/similar

Inclusion criteria

- **Sample:** mothers on MM from pregnancy into post partum **and** their live newborns
- **Study design:** must include treatment comparison
- **Study measures:** must include ratings of child outcome (level 1) or from which this may be inferred (level 2, e.g. mother retains custody)

Our questions

- How does methadone maintenance affect capacity to care for the newborn ?
- Does it confer any advantages over other treatments?
- Is there good enough evidence to inform care and custody decisions?

- Rarity of study
- Probable longer-term advantage for children of methadone maintained mothers
- May be because this engages mothers with services
- Need comprehensive services
- Maternal childhood trauma a major confounding factor