

Acamprosate Discharge Information for Primary Care

Date: _____

Patient: _____

Dear _____

This patient has been started on **acamprosate** as an anti-craving medication for alcohol use disorder (AUD).

Acamprosate is a GABA agonist and NMDA glutamate antagonist. **Acamprosate and naltrexone are the two first-line treatments for AUD;** neither medication makes people ill if they drink alcohol. Acamprosate is typically used with people who are seeking to stop rather than reduce their drinking. It is an alternative to naltrexone for patients who use opioids, have severe liver disease, or do not tolerate naltrexone. Acamprosate relieves mild ongoing acute withdrawal symptoms such as insomnia, dysphoria, and cravings. It works best in patients who are abstinent from alcohol for one to two days before starting it.

Acamprosate is provided in 333 mg tablets. It is usually started as 333 mg (one tab) three times daily and titrated to 666 mg (two tabs) three times daily over one week to minimize side effects. Common dose-related side effects experienced on this medication include diarrhea, fatigue, and anxiety. These are likely to resolve over time; if they persist, consider a dose reduction (one tab three times daily). Acamprosate is covered by ODB with LU code 531.

Therapeutic results are best when this medication is combined with counselling and/or community support.

Please keep the following considerations in mind:

- It is safe to consume alcohol while taking acamprosate, although its benefits (relief of insomnia, dysphoria, and cravings) are only felt if the patient is abstinent.
- Monitor patients with depression closely for suicidal thoughts and attempts at initiation (rare).
- Acamprosate is renally cleared; monitor kidney function tests at baseline and one month after initiation. Reduce dose to 333 mg three times daily if CrCl is 30–50 ml/min. Avoid use if CrCL is < 30 ml/min.
- Acamprosate can be continued as long as it is effective and tolerated.

Please see the attached prescription that the patient was given on discharge. For ongoing substance-related support, please contact your local rapid access addiction medicine (RAAM) clinic at _____.

Sincerely,

Phone: _____ Fax: _____