

case for next issue

Call for Responses

The case outlined below, will be the basis for the In That Case section for the next issue of the *New Zealand Bioethics Journal*. We invite interested readers to provide commentaries for possible publication. Responses should be kept to approximately 500-700 words in length. The editorial board will select the responses to be published in the February 2002 issue of the *New*

Zealand Bioethics Journal. We also reserve the right to edit contributions, to avoid repetition of points for example. All editorial changes will be cleared with the authors before going to press. Contributions can be sent by email or by posting a copy to the Editor. Please include your name, address and phone number with your response.

Louis is a thirty-five-year-old who has been on methadone for some time. He has a 15-year history of opioid use composed of varying numerous lengths of abstinence and heavy use. He regards himself as 'not a junkie' as his most recent period of opioid use started when he was abstinent and was prescribed morphine sulphate (the most commonly sought after street drug) by a GP as a result of chronic pain due to a back injury received in a motor cycle accident.

Louis has been difficult to engage in any kind of counseling process, as he is often arrogant and abusive in interviews. However he does attend most interviews. His urines have always been free of Benzodiazepines and opioids but contain cannabinoid and occasional amphetamines.

Currently Louis picks up his methadone on Mondays, Wednesdays, and Fridays. However Louis has been asking to have methadone doses to take away with him as he has a job at a vehicle wrecker and could work more hours if he was able to self dispense methadone on more occasions. For some time he has been requesting a split dose as he finds that after a hard day in the wreckers yard his back gives him trouble and by splitting his takeaway doses and having a half dose at night he gets pain relief and improved sleep.

There have been consistent reports from other clients that Louis sells his methadone and although the pharmacist has never had hard proof, Louis is always quick to exit the shop following receiving his oral dose. Louis has just been convicted and given a non-custodial sentence on a charge of possession of morphine sulphate. He claims this was old medication which he had forgotten but remembers that he put into a different container in order to be less conspicuous when he was going away for a weekend. Louis has been told the treatment team is contemplating taking him off methadone.