

Stepping Into the Wide World

As I write this in June, it seems appropriate that in this season of graduations we are publishing two articles on buprenorphine. This medication is emerging from the Nation's research centers into the wider world of community treatment settings, bearing a newly conferred Food and Drug Administration approval for treating opioid addiction. Researchers, clinicians, administrators, and policymakers are asking the same question many proud and nervous parents ask as they watch their children take diplomas in hand: Will it find its place in the world and thrive?

Buprenorphine's transition raises into high relief the critical importance of continuity and interplay between research and practice. For the new medication to have a long, productive future, community programs need to employ it appropriately, in line with the research results. To assist programs in doing this, we are pleased to publish Hendrée Jones's comprehensive practice-oriented research review, "Practical Considerations for the Clinical Use of Buprenorphine." Fidelity to empirical knowledge does not preclude creativity, as the three program directors on our response panel to Dr. Jones's article demonstrate. They have found ways to minimize side effects and costs for their patients.

Mirroring the need for research awareness among the practice community, buprenorphine now enters a phase in which the critical buprenorphine research agenda reflects experiences and questions arising out of its general use. One such question, posed in "Community Treatment Programs Take Up Buprenorphine," is when, if ever, patients may be able to terminate the use of the new medication without jeopardizing their treatment gains. The answer is of primary importance for Terry Horton of Phoenix House in New York City and George Kolodner of Kolmac Clinic in the Washington, D.C.-Maryland area. They are integrating the use of buprenorphine into programs that up until now have been completely abstinence based.

The two other peer-reviewed articles in this issue describe drug abuse treatments that include family dynamics among their intervention targets. William Fals-Stewart's behavioral couples therapy reduces intimate partner violence and facilitates children's behavioral adjustment while helping patients achieve abstinence. Valera

Jackson's Families in Transition program provides residential treatment that benefits both substance abusers and their children.

While both authors share a focus on treating families, they do so from opposite poles of the research-practice spectrum, and bridging the distance is important to both. Fals-Stewart's intervention has performed well in studies over 20 years, but has yet to be widely adopted by community clinics. Jackson's program is highly successful by its own internal measures, but wants research attention to sort out its critical components from others that may expend resources without contributing significantly to the desired outcomes.

Our "Science and Practice in Action" feature brings together researchers and community providers affiliated with the Community Anti-Drug Coalitions of America (CADCA) in a dynamic and frank discussion of challenges, methods, measures, and philosophies of drug abuse prevention. We thank CADCA for co-sponsoring this conversation at its 14th annual National Leadership Forum.

As always, we hope you find useful information and stimulating ideas in this issue of *Science & Practice Perspectives*.



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