Eva’s Story

Eva’s addiction started quite innocently. As an RN she sees a lot of pain and suffering on the job. So when she wasn’t feeling well, she went to her doctor for some relief. Her pain turned out to be a condition requiring a hysterectomy. Then the physical pain got much worse.

So she did what countless patients do when they are in pain—she took pain medication. Eva had to figure out how to alleviate the pain.

Ten years later, Eva was at work in the health clinic and someone whom she didn’t know approached her and asked her to take a urine test. “I got caught on the job. After all of those years of taking drugs it was a kind of release,” Eva said. “About 10 years of taking pain medications I developed an addiction.”

Her employer offered her a deal to get into treatment and recovery in order to keep her job. Eva went into outpatient treatment and has been sober since October 2012. But it wasn’t without a struggle and the use of medication-assisted treatment.

When she first started taking medication to help curb the craving for her opioid pain medication addiction, Eva said she was angry. “My theory is if you want to get better, you will get better. But if you don’t want to, then you won’t,” she said. And she was skeptical of taking yet another drug as part of her treatment and recovery process.

Then she was introduced to Vivitrol. After starting this drug to help curb her cravings for opioids, her quality of life improved dramatically, she said. There is no comparison from where she was before taking Vivitrol. The once-a-month injection of Vivitrol that Eva receives helps her live a normal life. Additionally, after understanding the way the drug works she knows it’s the only thing that will keep her sober.

“I came to the realization that this is my disease and it’s uncomfortable to talk about, but so is being addicted,” Eva said. “I know how people think. People don’t understand anybody can be addicted. They tell me how they feel about addiction and I want to laugh in their face and tell them they are talking to an addict.”

When Eva said she tells people, particularly family members, about her addiction, she said they are shocked to learn she was addicted to pain medications for so long. She’s also careful about with whom she shares her story because her colleagues in the health and medical field often are the most critical of patients who use medication to treat their drug dependence.

There is a stigma, she said, but only until more people understand the way addiction affects the brain and the individual, will the perception change.

Furthermore, Eva said recovery programs have to be tailored on an individual basis. After trying Suboxone and other drugs, which didn’t work for her, she found success with Vivitrol. In fact, she said she would never have succeeded in her recovery without Vivitrol. But she didn’t get started on Vivitrol until a few setbacks on other medications. She said health care providers must change their way of thinking about medication-assisted treatment. The methadone treatment religion, as Eva calls it, isn’t the right approach for everyone. In part because most methadone treatment centers offer the same, cookie-cutter approach for drug addiction treatment. She’s done the group therapy and 12-step programs, but her success depended on Vivitrol, she said.

“I feel a whole lot better about myself. This my journey and I’ve got to do it,” Eva said. “People will think what they want. I have to make a decision to want to be better and take this medication.”

While she hopes she won’t have to take Vivitrol for the rest of her life, she knows it will help her heal. And she has no problem taking Vivitrol because she knows it works.

“I’m being realistic about it,” she said. “I’m trying to get off this stuff in 5 years, but I don’t want to go back to my old ways.”