

**Addiction Therapy Services**

# Buprenorphine

**A Guide for Patients**

**hikma.**

## Table of Contents

<b>Understanding Opioid Use Disorder (OUD)</b>	<b>3</b>
<b>What is Buprenorphine?</b>	<b>4</b>
<b>Starting Buprenorphine</b>	<b>5</b>
<b>Maintenance therapy with Buprenorphine</b>	<b>6</b>
<b>Potential side effects</b>	<b>6</b>
<b>Common side effects of Buprenorphine</b>	<b>7</b>
<b>Pregnancy and breastfeeding</b>	<b>8</b>
<b>Medication safety</b>	<b>9</b>
<b>How counseling can help</b>	<b>10</b>
<b>Addiction and recovery</b>	<b>10</b>





### Understanding Opioid Use Disorder (OUD)

OUD is defined as a problematic pattern of opioid use that leads to serious physical & psychological impairments or distress.<sup>1</sup> Substances such as illicit heroin or pain relievers like morphine, oxycodone, or fentanyl fall under the opioid classification. When a person first begins taking an opioid, it can trigger a surge of dopamine within the brain. The effect on the brain is powerful because it can cause the person to feel “high.” If a person uses an opioid regularly, the brain adjusts to these surges and the higher level of dopamine.<sup>2</sup> Over time, a larger amount of the opioid is needed to get the same ‘high’ as before.<sup>2</sup> Eventually, the brain needs the opioid just to function normally.

## What is Buprenorphine?

Buprenorphine is a long-acting, semi-synthetic opioid used to treat opioid use disorder.<sup>1</sup> It is one of three FDA-approved medications commonly used to treat opioid addiction (the other two are methadone and naltrexone).

Buprenorphine has a protective effect because it blocks the action of other opioids.<sup>3</sup> The person who takes buprenorphine feels normal, not high. However, the brain thinks it is receiving the problem opioid, so withdrawal symptoms stay away. Buprenorphine also helps control cravings. If cravings continue to be a problem, your doctor will adjust your medication or help you find other ways to manage them.<sup>3</sup>

Buprenorphine is currently available in tablet, sublingual film (which is dissolved under the tongue) and injectable forms. Many formulations contain naloxone. The naloxone is added to prevent abuse—it brings on withdrawal in people who abuse buprenorphine by injecting it.<sup>3</sup>

Buprenorphine should be part of a comprehensive OUD management program that includes psychosocial support. However, buprenorphine treatment should not be withheld if psychosocial support is not available.

Overdose with buprenorphine in adults is uncommon.<sup>3,4</sup> It is most likely to occur in individuals who have not yet developed tolerance or those who also are using substances like alcohol or benzodiazepines.<sup>4</sup>

WITHDRAWAL SYMPTOMS STAY AWAY

**Blocks the action  
of other opioids**

Long-acting, semi-synthetic opioid

**Buprenorphine**  
FDA-approved

Available in tablet, sublingual  
film (which is dissolved under  
the tongue) and injectable forms

HELPS CONTROL  
CRAVINGS

Overdose is uncommon



## Starting Buprenorphine

Before you are given the first dose of any medication for opioid addiction, your doctor will ask you questions about your addiction, health and other issues. You will also take a drug test—usually a check of your urine or saliva. You also will have a physical exam and tests for diseases that are common to people who have been abusing drugs. Your liver will be checked to make sure the medication is safe for you. If buprenorphine is safe and appropriate for you, your doctor may recommend it.

You and your doctor or substance abuse treatment provider will decide on a treatment plan together. The plan will describe the medication routine, the counseling and other services that will be provided and the rules that must be followed. These rules will be explained to you and you will receive them in writing.

Your doctor will prescribe a low dose of buprenorphine for you to start taking after withdrawal symptoms begin. The starting dose of buprenorphine is usually 2–4 mg and stabilizes at 12–16 mg per day.<sup>1</sup> The dose may be adjusted as needed.<sup>3</sup>

Buprenorphine can make you feel drowsy at first. You should not drive or perform other high-risk tasks until you know how this medication affects you. If drowsiness continues to be a problem, your doctor may adjust your dose. Always take your buprenorphine exactly as prescribed by your doctor.

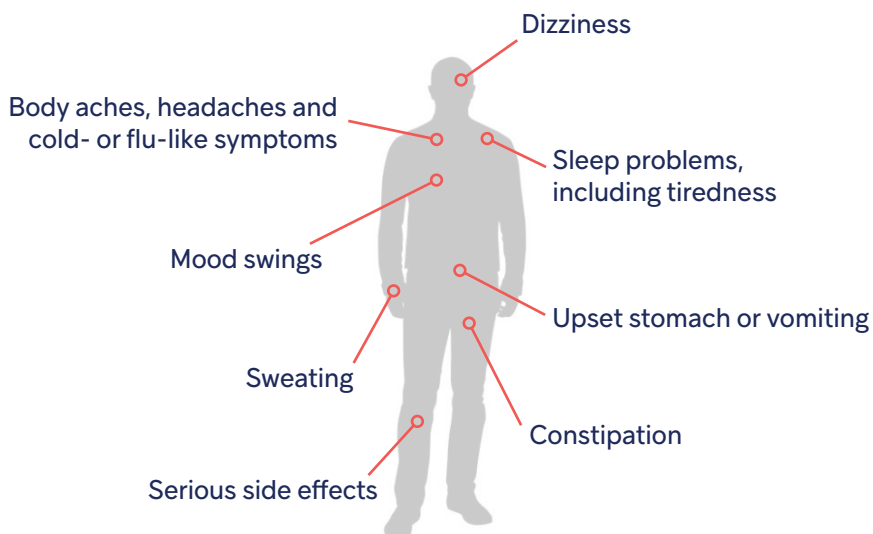
## Maintenance therapy with Buprenorphine

You may take buprenorphine for days, months or years—as long as it is needed to prevent relapse.<sup>3</sup> If you reach the point of stability in recovery and want to stop taking buprenorphine, you must do it slowly, over time.<sup>3</sup> This is called tapering. Tapering works best with the help of your doctor or substance abuse treatment provider, after you have made progress in your treatment.

### Potential side effects

Side effects are feelings of discomfort or sickness that can come with taking medicine.<sup>3</sup> Buprenorphine can cause a few mild side effects, such as body aches, cold, headache, and constipation.<sup>3</sup> Usually these go away after the medication has been taken for a while. If you experience any of these side effects, you should NOT stop taking the medication. Instead, talk with your doctor or substance abuse treatment provider about how to manage your side effects.





### Common side effects of Buprenorphine

**Body aches, headaches and cold- or flu-like symptoms**—Check with your doctor to ask which over-the-counter medicines you may take.

**Dizziness**—Stand up slowly. Call your doctor if problems with dizziness persist.

**Constipation**—Drink more water and juice. Eat food with fiber. Exercise more.

**Sweating**—Shower often. Dress in layers.

**Sleep problems, including tiredness**—Take your buprenorphine in the morning. Avoid naps. Go to bed at the same time every night. Exercise. Do not drink caffeine after lunchtime.

**Upset stomach or vomiting**—Take your buprenorphine after you eat. If needed, take an antacid product as directed by your doctor.

**Mood swings**—Exercise more. Do fun things that do not involve the previous, harmful lifestyle. Do your best to relax. Talk to your substance abuse treatment provider.

**Serious side effects**—Extreme stomach pain, vomiting and/or diarrhea are considered serious side effects.<sup>3</sup> If you experience any of these, contact your doctor right away.

## Pregnancy and breastfeeding

Buprenorphine may be prescribed to pregnant women who have an OUD.<sup>5</sup> Speak to your medical provider to see if buprenorphine is a safe option to manage OUD during your pregnancy. Buprenorphine stops and prevents withdrawals and reduces opioid cravings, allowing you to focus on your recovery and caring for your baby.<sup>5</sup>

Many pregnant women with OUD worry about neonatal abstinence syndrome (NAS), withdrawal symptoms that may occur in babies exposed to opioids and other substances before birth. However, NAS does not happen in every baby and it can be diagnosed and treated if and when it occurs.<sup>5,6</sup> It is considered safer for your baby if you prevent withdrawal during pregnancy with the use of medications such as buprenorphine.<sup>5,6</sup>

You may need medicines other than those for OUD to treat pain during or after delivery. Other options, such as an epidural and/or a short-acting opioid, can be used to help keep you comfortable.

All hospitals must report to state child welfare agencies when a mother who is using illicit substances gives birth. This report is used to make sure that a safe care plan is in place to manage the well being of the mother and baby. Participating in OUD treatment before and after the birth of your baby shows that you are committed to providing a safe, nurturing environment for your child.

Some pregnant women with OUD consider stopping opioid use completely, but seeking treatment is always the most helpful course of action.<sup>5</sup> Withdrawal may make you more likely to start using drugs again and put you at risk for overdose.<sup>5</sup> If you are not currently in treatment, talk with your doctor about treatment medicines and behavioral counseling.

Once your baby is born, ask your doctor if breastfeeding is a safe option for your baby. Your breast milk will contain small amounts of buprenorphine, which may help with or even prevent NAS. In addition, research has found that breastfeeding, cuddling, skin-to-skin contact and rooming in with baby can help prevent NAS as well.<sup>6</sup>





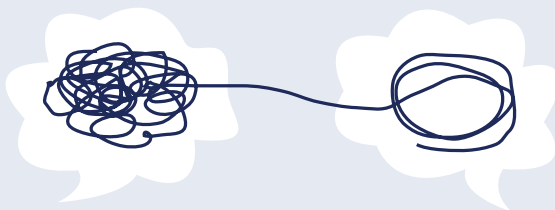
## Medication safety

- While taking this medication, you should NOT take other medications without consulting your doctor first.
- While taking this medication, you should NOT use illegal drugs, drink alcohol or take sedatives, tranquilizers or other drugs that could slow your breathing. Taking any of these substances along with buprenorphine can lead to overdose or death.<sup>3</sup>
- Buprenorphine must be kept at home and locked in a safe place to prevent accidental use by others, especially children.
- If you are pregnant and/or breastfeeding, ask your doctor if buprenorphine is safe for you and your baby. In special circumstances, doctors may recommend the naloxone-free form of buprenorphine. Ask your doctor for more information.
- Liver problems are rare but can occur.<sup>3</sup> If you have a pre-existing liver condition, your doctor should conduct tests on your liver regularly.

## How counseling can help

Medication is just one part of treatment for opioid addiction.<sup>3</sup> For many people, another important part is counseling.<sup>3</sup> Counseling sessions provide you the opportunity to talk with a professional either one-on-one or in a group with others who are in treatment. Counseling is important because it can:

- Help you understand the motivations and behaviors that led to your opioid addiction.
- Help you learn how to commit to a more healthful lifestyle.
- Offer support and help you develop skills as you work with others to manage your recovery long term.
- Provide you with encouragement and help motivate you to stick with treatment.
- Help you learn how to make healthy decisions, handle setbacks and stress and move forward with your life.



## Addiction and recovery

Addiction is a disease.<sup>3</sup> It cannot be cured, but it can be treated with medication, counseling and support from your doctor, substance abuse treatment provider, family and friends. Many people with an opioid addiction regain normal, healthy lives.<sup>3</sup> One way they do this is with medication-assisted treatment. The goal of medication-assisted treatment is to recover from addiction. It does NOT replace one addictive drug with another. It provides a safe, controlled level of medication to overcome the use of a problem opioid.<sup>3</sup>

Medication, counseling and support—together they can help you, your loved ones and your friends move on and return to a normal life.<sup>3</sup> Recovery is possible, but it takes work.<sup>3</sup> It is important to understand that everything is NOT automatically normal once treatment is finished. Recovery takes commitment every day, through treatment and beyond.



## References

1. Office-based Buprenorphine Treatment for OUD. National Institute on Drug Abuse website. Available at: <https://nida.nih.gov/videos/facts-medication-treatment-opioid-use-disorder-oud>. Accessed March 7, 2022.
2. Understanding Drug Abuse and Addiction. National Institute on Drug Abuse/National Institutes of Health/US Department of Health and Human Services website. Available at: <https://nida.nih.gov/sites/default/files/understanding.pdf>. Accessed March 7, 2022.
3. The facts about Buprenorphine for Treatment of Opioid Addiction. Substance Abuse and Mental Health Services Administration website. Available at: <https://store.samhsa.gov/sites/default/files/d7/priv/sma14-4442.pdf>. Accessed March 7, 2022.
4. Buprenorphine Quick Start Guide. Substance Abuse and Mental Health Services Administration website. Available at: <https://www.samhsa.gov/sites/default/files/quick-start-guide.pdf>. Accessed March 7, 2022.
5. Treating Opioid Use Disorder During Pregnancy: Getting the help and support you need from your healthcare professionals. Substance Abuse and Mental Health Services Administration website. Available at: <https://store.samhsa.gov/sites/default/files/d7/priv/sma18-5071fs2.pdf>. Accessed March 7, 2022.
6. Clinical Guidance for Treating Pregnant and Parenting Women With Opioid Use Disorder and Their Infants. Substance Abuse and Mental Health Services Administration website. Available at: <https://store.samhsa.gov/sites/default/files/d7/priv/sma18-5054.pdf>. Accessed March 7, 2022.



Addiction Therapy Services Customer Service

Toll Free 1.833.449.3475

Fax: 1.866.464.1562

Email: [usaddictiontherapy@hikma.com](mailto:usaddictiontherapy@hikma.com)

[addictiontherapyservices.com](http://addictiontherapyservices.com)

