

Your Medication: Buprenorphine

How do I obtain and take my medication?

> Your provider will send a prescription to your local retail pharmacy of choice, where you may pick it up.

> You will receive a prescription for buprenorphine/naloxone combination (films or tablets), or will receive buprenorphine alone. Your provider will determine which product is best for you.

Regardless of which product you receive, buprenorphine should never be chewed or swallowed, injected or snorted. It should only be dissolved slowly in the cheek or under the tongue. Buprenorphine is best absorbed into your body by avoiding drinking, eating, smoking or talking while it is dissolving. After it dissolves, please take a large sip of water and swish around your mouth and swallow. This will prevent tooth decay that can be associated with the medication. Wait at least 1 hour prior to brushing your teeth after taking. Take good care of your teeth and see a dentist on a regular basis, at least once every 6 months.

Cheek film (buccal): open immediately before use, ensuring hands are dry before touching the film. Wet the inside of your cheek with your tongue or a little bit of water, and place film on inside of cheek. Hold for 5 seconds, until it sticks. If using 2 films, place on opposite cheeks. If using more than 2 films, you may use up to 2 films on the inside of each cheek. On average, films will take between 5-7 minutes to dissolve.

Under the tongue film (sublingual): open immediately before use, ensuring hands are dry before touching the film. Wet your mouth and place under the tongue, close to the base on the left or right side, and allow to dissolve. If using 2 films, place on opposite sides. Films will take between 5-7 minutes to dissolve.

Under the tongue tablet (sublingual): place tablet(s) under your tongue and allow to dissolve. On average, tablets will take 7-12 minutes to dissolve.

Long acting injection: buprenorphine is available as a long acting subcutaneous injection that is given monthly in your providers office. If interested, you may ask your provider about transitioning to this dosage form. A minimum of 7 days of oral buprenorphine is required before transitioning.

▶ If you miss a dose, please take it as soon as you remember. If it is close to the time for your next dose, skip the missed dose and continue with your normal dosing schedule. Do not take two doses at once, or take an extra dose. You may contact your provider or pharmacist for help if unsure what to do.

What can I expect while starting buprenorphine?

▶ Side effects are **much more common** when **first beginning** buprenorphine, and tend to become less noticeable after a few days of treatment. Buprenorphine will help manage withdrawal symptoms, but it can take a few days for your symptoms to stabilize and for you to begin feeling more comfortable. Buprenorphine is FDA approved for treatment of Opioid Use Disorder in adults and adolescents.

Common side effects include: dizziness, sleepiness, weakness, constipation, diarrhea, stomach pain or upset, nausea, headache, trouble sleeping, sweating, flushing and back pain. Products dissolved under the tongue may cause burning or numbness/tingling in the mouth, pain where it is placed and redness.

How does it work?

> Buprenorphine is a partial opioid agonist that binds to opioid mu receptors and decreases the effects of



physical dependence on opioids (withdrawal symptoms & cravings). It can cause effects such as euphoria and respiratory depression, but these effects are <u>weaker than full opioid agonists</u> (i.e. heroin, methadone, fentanyl, etc). Buprenorphine helps protect against misuse and overdose by inhibiting the action of other opioids that may be taken.

▶ Naloxone is combined with buprenorphine in many of the available dosage forms. When used as prescribed, the naloxone is not absorbed by the body and does not cause any effects. If the medication is snorted or injected, the naloxone will be absorbed and can help protect against overdose.

What else do I need to know about it? Is it safe?

▶ Medications for Opioid Use Disorder are a valuable component of a well rounded approach to recovery. Patients have the most success with buprenorphine when used in combination with counseling, peer support services and/or other validated support services.

▶ Do not stop taking this medication without consulting your provider. Stopping it without tapering off results in a much greater risk of relapse. The length of time that a patient is treated with buprenorphine can vary. Some patients may take it indefinitely.

▶ Buprenorphine is very safe when used as directed, and is a positive step into recovery. It is a recommended treatment for Opioid Use Disorder in pregnancy, and is recommended to be continued while breastfeeding (especially right after birth when it was used during pregnancy).

▶ If you experience any of the following symptoms, please seek medical help right away. These symptoms could be caused by withdrawal from other opioids when starting buprenorphine, or could signify a dangerous reaction to the medication: *Signs of allergic reaction (rash, hives, itching, wheezing, tightness in chest or throat, trouble breathing, swallowing or talking, swelling of mouth, face, lips, tongue or throat), feeling extremely nervous or excitable, depression or other mood changes, confusion, changes in muscle movement (extra movement, or slower movement), slurred speech, feeling drunk, a heartbeat that feels abnormal, noisy breathing, feeling very sleepy, dizzy or passing out, agitation, hallucinations, stiffness, seizures or shaking, excessive sweating, severe diarrhea, vomiting or severe headache.*

> Ensure that all of your healthcare providers (including doctors, nurses, pharmacists and dentists) are aware that you take buprenorphine.

> Avoid driving or operating machinery until you can see how buprenorphine affects you.

▶ It is recommended that all patients prescribed an opioid or Medication for Opioid Use Disorder are prescribed naloxone to treat an opioid overdose, if needed. Opioid overdoses are more likely to happen during a relapse, as tolerance typically decreases. If an opioid overdose has occurred, or if naloxone has been used, it is important to contact emergency services right away.

▶ Even one dose of buprenorphine can be deadly if taken by someone else or by accident, especially in children. If buprenorphine is taken by someone else, it is important to get medical help right away.

Severe side effects have occurred when buprenorphine has been used in combination with alcohol, marijuana, other forms of cannabis, or other medications that cause drowsiness or slowed actions. These effects include slow or troubled breathing, and death.

> Dental problems like cavities, infections and loss of teeth have occurred with buprenorphine. To prevent issues, rinse your mouth with water after it dissolves and see a dentist regularly.

▶ Use during pregnancy may cause symptoms of withdrawal in the baby. Ensure that your OB provider is aware that you take buprenorphine, as they will manage this risk to provide the safest possible outcomes.



<u>Storage:</u> buprenorphine should be stored at room temperature in a cool, dry place (not a bathroom). It should be stored in a safe place where children cannot see or reach it, and where others can not get to it. Consider storing it in a locked box. Keep away from pets. Film products should be stored in the individual foil pouch until used, and should not be frozen.

Unused or expired buprenorphine should be disposed of safely. Contact your local pharmacy for information on disposal and drug take-back programs in your area.

Adapted from www.uptodate.com and www.samhsa.com