BUPRENORPHINE AND NALOXONE (Suboxone) EMSAC JULY 2024

ACTION: Partial Opioid Agonist

- Buprenorphine: Binds opioid receptors with high affinity but moderate efficacy (partial agonist). This partial agonism makes buprenorphine suitable for treating withdrawal symptoms while improving its safety profile compared to other opioids.
- Naloxone: Antagonizes effects of opioids by competing at the receptor site, resulting in reversal of respiratory depression associated with opiate overdoses. When taken sublingually Naloxone is inert and has no effect on the patient.

INDICATION	ADULT	PEDIATRIC
Opiate withdrawal with **COWS score ≥ ~~7~~ 8**	16 mg SL May repeat 8 mg x1 in 10 min.	Not applicable

CONTRAINDICATIONS:

- Hypersensitivity or prior allergic reaction
- Patient meets exclusion criteria described in protocol 2.18 Opiate Withdrawal Appendix B~~**Appendix B**~~
- COWS score < 8

POTENTIAL SIDE EFFECTS:

- Precipitated opioid withdrawal (less likely to occur if patient is already withdrawing with a COWS score ≥ 8)
- Diaphoresis
- Headache
- Nausea
- Constipation
- Tooth decay

NOTES:

- Naloxone is poorly absorbed through the GI tract. When formulated with buprenorphine, naloxone reduces the risk of overdose in those who misuse the combination medication by injection, while also reducing its abuse potential.
- When buprenorphine is formulated alone, common brand names include Belbuca, Buprenex, Butrans, Sublocade, and Subutex, whereas Suboxone is a brand name of a formulation containing buprenorphine and naloxone.
- Please use eMedications.03 code “Buprenorphine (1819)” to document use of Buprenorphine in your ePCR software programs.