

Buprenorphine

Please note: The information given on this page is not medical advice and should not be relied upon in this way. Individuals wanting medical advice on this issue should consult a health professional.

What is buprenorphine?

Buprenorphine (pronounced bew-pre-nor-feen) is a prescription drug.

It is taken as a replacement for heroin in the treatment of heroin dependence. Replacing a prescribed drug to treat a drug of dependence in this way is known as pharmacotherapy. As well as improving wellbeing by preventing physical withdrawal, pharmacotherapy helps to stabilise the lives of people who are dependent on heroin and other opioids, and to reduce the harms related to drug use.

Buprenorphine pharmacotherapy can be used to:

- Help people to withdraw from heroin and methadone
- Reduce the need to use heroin – this is known as ‘buprenorphine maintenance’
- Treat severe pain

Other names

Pharmaceutical name

There are two formulations of buprenorphine available for people on pharmacotherapy treatment in Victoria:

- Suboxone Sublingual Film[®] – A combination of buprenorphine and naloxone (also known as Narcan[®]). This is the most widely used form
- Subutex Sublingual Tablets[®] – Contains only buprenorphine

Slang names

Bup, B

How is it used?

Suboxone Sublingual Film[®] is a lime-flavoured, rectangular, orange film, which is placed under the tongue to dissolve. The film will not work properly if it is chewed or swallowed.

Subutex Sublingual Tablets[®] are also placed under the tongue to dissolve and will not work properly if chewed or swallowed.

How effective is it?

Buprenorphine treatment is more likely to be successful if it is part of a comprehensive treatment program, which addresses the body, mind and environment in which heroin has been used.

For example, treatment may include a combination of buprenorphine, counselling, alternative therapies and the development of a positive support network of peers, friends and a support group.

Using buprenorphine on its own is unlikely to result in an overdose.

Buprenorphine maintenance

Buprenorphine maintenance may not work for everyone, so it is important to work with a doctor or drug counsellor to find the best approach.

Advantages of buprenorphine maintenance over heroin use

- Using buprenorphine on its own is unlikely to result in an overdose
- Buprenorphine maintenance keeps the person stable while they make positive changes in their lives
- Health problems are reduced or avoided, especially those related to injecting, such as HIV, hepatitis B and hepatitis C viruses, skin infections and vein problems
- Doses are required only once a day, sometimes even less often, because buprenorphine's effects are long lasting
- Buprenorphine is much cheaper than heroin

Use of any drug always carries some risk.

Use of any drug always carries some risk. Even medications can produce unwanted side effects. It's important to be careful when taking any type of drug.

Buprenorphine affects everyone differently, based on:

- Size, weight and health
- Whether the person is used to taking it
- Whether other drugs are taken around the same time
- The amount taken

The most common side effects of buprenorphine are:

The most common side effects of buprenorphine are:

- Constipation
- Headache
- Increased sweating
- Tiredness or drowsiness (especially after a dose)
- Loss of appetite, nausea and vomiting
- Abdominal pain
- Skin rashes, itching or hives
- Tooth decay
- Changes to periods (menstruation)
- Lowered sex drive (males and females)
- Weight gain (particularly for females)

Withdrawal from long-term use of buprenorphine

Withdrawal from long-term use of buprenorphine may produce some symptoms similar to those experienced through heroin withdrawal. However, symptoms tend to be milder than for heroin or other opioids such as methadone withdrawal.¹ Withdrawal symptoms vary from person to person, but may include:

- Cold or flu-like symptoms
- Headache
- Sweating
- Aches and pains
- Difficulty sleeping

- Nausea
- Mood swings
- Loss of appetite

These effects usually peak in the first 2 to 5 days. Some mild effects may last a number of weeks.

Further Information

The Druginfo website has information on:

- Help & support services
- Treatment
- Withdrawal
- References for this fact sheet

Go to druginfo.adf.org.au

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