MIH 10A – BUPRENORPHINE-NALOXONE (SUBOXONE®)

MOBILE INTEGRATED HEALTH PARAMEDIC

Class: Opioid Partial Agonist

Actions/Pharmacodynamics: Buprenorphine is a partial agonist at the mu opioid receptor and an antagonist at the kappa receptor. It has very high affinity and low intrinsic activity at the mu receptor and will displace morphine, methadone, and other opioid full agonists from the receptor. Naloxone competes with and displaces narcotic substances from opiate receptors.

Indications:

- History of overdose or high-risk substance abuse
- History of opioid dependence with presence of withdrawal symptoms and abstinence of use of at least 24 hrs. (72 hrs. for methadone)
- COWS (Clinical Opiate Withdrawal Score) >= 8
- Willingness to engage in outpatient recovery through an identified outpatient center.

Contraindications:

- Current evidence of intoxication due to alcohol or other substances (can re-evaluate in 24 hrs.)
- Known history of recent benzodiazepine or other sedative use/ abuse
- Known current pregnancy (High risk patients may be treated with medical direction consultation in rare circumstances)
- Presence of severe cirrhosis, liver failure or renal failure (dialysis)
- Unstable vital signs or signs of hemodynamic or respiratory instability.
- Taking methadone or any other long-acting narcotic within 72 hrs.
- Chronic pain patients who are prescribed opioids
- Patient is in an established program currently.
- Known hypersensitivity or anaphylaxis.
- Opioid naïve patients
- Any active medical issue requiring urgent medical attention (infection, trauma)
- Concurrent use of Monoamine Oxidase (MAO) inhibitors.

Pharmacokinetics: Onset of action within 2 minutes after IVP/IOP/IN administration with duration of effect up to 2 hours.

MIH 10A – Buprenorphine- Naloxone (Suboxone®) cont.'

Side Effects: Diaphoresis, abdominal pain, constipation, nausea, headache, withdrawal syndrome, vasodilation, palpitations, CNS depression, hepatic events, hypersensitivity reactions, hypotension, QT prolongation.

Dosage:
8-24 mg sublingual per physician verbal order
Second dose 8-16 mg (Max 32 mg) in 15 minutes if COWS score >8 or symptoms not resolved.
Second and subsequent day dosing will be dosed based on previous dose effectiveness.

How Supplied:
Buprenorphine 2 mg and naloxone 0.5 mg sublingual tablet
Buprenorphine 8 mg and naloxone 2 mg sublingual tablet

Buprenorphine 2 mg and naloxone 0.5 mg sublingual film
Buprenorphine 4 mg and naloxone 1 mg sublingual film
Buprenorphine 8 mg and naloxone 2 mg sublingual film
Buprenorphine 12 mg and naloxone 3 mg sublingual film

Special Comment: Buprenorphine-Naloxone (Suboxone) sublingual is a Schedule III DEA classified medication and appropriate storage in a locked vehicle safe will be mandated along with use of the DEA approved narcotic tracking processes already in place in accordance with the Office of the Medical Director (OMD) policies/protocols.