



## ADULT MEDICATION GUIDELINE

# BUPRENORPHINE

<b>Scope (Staff):</b>	All WNHS Staff
<b>Scope (Area):</b>	Obstetrics and Gynaecology

This document should be read in conjunction with the [Disclaimer](#).

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### Medication Class

Opioid

### Presentation

Sublingual Tablet: 200microg

Patch: 5microg/hr, 10microg/hr, 15microg/hr, 30microg/hr

Ampoule: 300microg/mL

### **Products for opioid dependence:**

Sublingual Tablet: 400microg, 2mg, 8mg

Sublingual Film (combination with naloxone): 2mg/0.5mg, 8mg/2mg

### Storage

Store at room temperature, below 25°C

**Schedule 8 Medication**

### Dose

**Moderate-to-severe pain**

### **Acute Pain**

Sublingual: 200 - 400microg every 6 to 8 hours

IM/IV: 300 - 600microg every 6 to 8 hours

### **Chronic Pain**

Patch: Seek specialist advice if the patient is already taking an opioid.

*Opioid-naive*, initially, apply a 5 micrograms/hour patch. Titrate dose to effect by adding a second patch or changing to a higher strength patch. Maximum 40 micrograms/hour.

Do not increase dose at intervals of <3 days.

Change each patch every 7 days.

### **Opioid Dependence**

Refer to KEMH Pharmaceutical and Medicines Management Guideline: [Community Programme for Opioid Pharmacotherapy \(CPOP\) Management in Hospital](#) For more information, please contact [KEMH Obstetric Medicines Information Service](#).

## **Administration**

### **Sublingual (analgesia)**

Place tablet under the tongue and keep in place until dissolved. Do not chew or swallow the tablet.

### **Sublingual (opioid dependence)**

Refer to KEMH Pharmaceutical and Medicines Management Guideline: [Community Programme for Opioid Pharmacotherapy \(CPOP\) Management in Hospital](#)

### **Patch**

Write the date and time of application on the patch with permanent marker, then apply to dry, non-irritated, hairless skin on upper torso. Check the patch is still attached on the days between patch changes.

Remove after 7 days and put a new patch on a different area (avoid re-using the same area for at least 3 weeks).

- Heat increases the release of buprenorphine from patch; avoid exposure to external heat sources (including electric blankets, heat pads, heat lamps, saunas, hot baths).

Do not cut or divide patches as this may affect drug release characteristics.

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### **IV injection**

Inject undiluted over at least 2 minutes

### **IM injection**

Suitable

## **Monitoring**

Tolerance and dependence, withdrawal effects, sedation and respiratory depression

## **Pregnancy**

**1<sup>st</sup> Trimester:** Considered safe to use

**2<sup>nd</sup> Trimester:** Considered safe to use

**3<sup>rd</sup> Trimester:** Considered safe to use

## **Breastfeeding**

Considered safe to use

## **Related Policies, Procedures & Guidelines**

### **KEMH Pharmaceutical & Medicines Management Guidelines:**

[Community Programme for Opioid Pharmacotherapy \(CPOP\): Management in Hospital](#)

[Restricted Schedule 4 \(S4R\) and Schedule 8 \(S8\) Medications](#)

### **KEMH Clinical Guidelines: O&G**

[WANDAS](#)

### **KEMH Clinical Guidelines: Neonatal**

[Maternal Medication/Substance Use](#)

[Neonatal Abstinence Syndrome \(NAS\)](#)

### **WA Health:**









[Guideline on continuation of opioid substitution treatment in hospitals](#)

## **References**

Australian Medicines Handbook. Buprenorphine. In: Australian Medicines Handbook [Internet]. Adelaide (South Australia): Australian Medicines Handbook; 2022 [cited 2022 Feb 28]. Available from: <https://amhonline.amh.net.au/>

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The Royal Women's Hospital. Buprenorphine. In: Pregnancy and Breastfeeding Medicines Guide [Internet]. Parkville (Victoria): The Royal Women's Hospital; 2022 [cited 2022 Feb 02]. Available from: <https://thewomenspbmg.org.au/>

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