

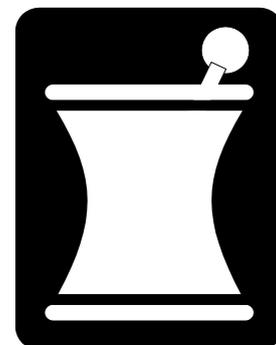
# Suboxone (buprenorphine & naloxone)

## Patient information - Hillmorton Hospital Pharmacy

[www.cdhb.health.nz](http://www.cdhb.health.nz)

### What is Suboxone?

Suboxone is a sublingual tablet (i.e. dissolves under the tongue) that contains two ingredients: *buprenorphine* and *naloxone*. Suboxone is a treatment for opioid dependence (e.g. heroin, morphine). *Buprenorphine* is the active ingredient that acts as a substitute for opiate drugs and reduces withdrawal symptoms from these drugs.



*Naloxone* blocks the effect of opiate drugs and can cause opioid withdrawal symptoms. This will not be a problem if the sublingual tablet (i.e. dissolves under the tongue) is taken orally as naloxone is not absorbed. *Naloxone* is active if it is injected and will result in opioid withdrawal symptoms.

### Why have I been prescribed Suboxone?

You have been prescribed Suboxone to help with an addiction to opioid drugs like heroin and morphine.

Suboxone can be used during the short term while withdrawing from opioid drugs, and for the long term as part of an opioid substitution treatment.

### Is Suboxone safe to take?

It is usually safe to take Suboxone regularly as prescribed by your doctor, but it does not always suit everyone. Let your doctor and case manager know if any of the following apply to you, as extra care may be needed:

- a) If you have serious problems with breathing, your liver, kidneys and prostate.
- b) If you have low blood pressure.
- c) If you are taking other medications, including herbal medications and those that you buy without a prescription. *Benzodiazepine, alcohol and other opioids should not be taken when you are on Suboxone unless prescribed by your doctor as these combinations can be lethal and result in death.*
- d) If you are planning to have surgery.
- e) If you are pregnant, breastfeeding, or wish to become pregnant.

## **How should I take Suboxone?**

Suboxone is a tablet that is placed and dissolved under the tongue. This usually takes 3 to 7 minutes. The medication will not work if it is chewed or swallowed whole. During this time, you will be observed in the pharmacy until the medication is dissolved.

How often you take your Suboxone depends on each individual's withdrawal symptoms. This will eventually reduce as treatment progresses. It is important to take your Suboxone at the time recommended by your doctor.

Suboxone must not be injected. Deaths have occurred when Suboxone has been injected while taking other drugs including benzodiazepines.

## **What should I do if I miss a dose?**

If you miss a dose, contact the Christchurch Methadone Programme for advice. Do not take the missed dose or double up your dose as this may pose a risk of accidental overdose.

## **What will happen to me when I start taking Suboxone?**

When you start taking Suboxone, you may or may not notice some withdrawal symptoms during the first few weeks of treatment. These withdrawal symptoms will eventually wear off and can be treated. The intensity of the withdrawal symptoms is dependent on the type and doses of opioid drugs you were taking previously. You will also notice a reduction in cravings of opioid drugs.

## **When I feel better can I stop taking Suboxone?**

No. You will experience withdrawal symptoms if you stop taking Suboxone abruptly. These effects may be delayed in onset and are similar to those experienced from withdrawal of other opioids.

Withdrawal symptoms vary from person to person but may include cold/flu like symptoms, sleeping difficulties, headaches, nausea, sweating, mood swings, aches and pains and loss of appetite.

These effects usually peak in the first 2 to 5 days after stopping and may last a number of weeks.

Eventual discontinuation of treatment requires gradual dose reduction which should be done under close supervision of your doctor. Discuss with your doctor and case manager when and how you should stop taking them.

## **What about alcohol?**

It is not recommended for people taking Suboxone to drink alcohol. Some people have died when taking Suboxone and alcohol at the same time. Discuss any concerns you may have with your doctor, case manager or pharmacist.

## **Is it addictive?**

People can develop dependency if Suboxone is abused or used inappropriately. If you stop taking Suboxone abruptly, you may experience some withdrawal symptoms which may be delayed in onset. Do not take another dose should this happen, but contact the Christchurch Methadone Programme for advice.

## **Can I do anything else to help myself?**

Yes. There are a number of outpatient and residential relapse prevention programmes in the community. Advocacy and peer support services are also available in Christchurch and are usually free of charge. Listening to, or reading about other people who have overcome addiction problems can often help us identify strategies for ourselves. Ask your doctor or case manager for advice.

## **Are there any medicines that I should avoid or take care with?**

You must not take benzodiazepines (medicines to treat anxiety or sleeping problems e.g. diazepam or clonazepam) unless prescribed by your doctor. Taking benzodiazepines with Suboxone without medical supervision can be life-threatening.

Medications like some antihistamines (used to treat allergies), pain killers, antidepressants (used to lift low mood) and antipsychotics may cause additional drowsiness when taken with Suboxone. This may impair your performance when driving or operating machinery. If you are on a stable dose of Suboxone, and using no other drugs, then it is medically safe to drive a motor vehicle.

Some medicines used to treat fungal infections, viral infections (e.g. HIV) seizures or fits will affect the amount of Suboxone in your body. Let your doctor, case manager and pharmacist know that you are taking Suboxone as dose adjustments may be required.

*Remember, leaflets like this only describe some effects of this medication. You may also find other books or leaflets useful. If you have access to the internet, you may find a lot of information there as well, but be careful as internet based information is not always accurate.*

Side Effect	What is it?	What should I do if this happens to me?
<b>Very Common</b>		
Drowsiness	Feeling sleepy or sluggish. This will last a few hours after your dose.	Don't drive or use machinery.
Headache	When your head is painful or pounding.	You can take aspirin or paracetamol for relief.
Insomnia	Unable to sleep.	This is a withdrawal symptom and will wear off after a few weeks. If this is intolerable, let your case manager or doctor know.
Nausea or vomiting	Feeling sick or being sick.	This is a withdrawal symptom and will wear off after a few weeks. If this is intolerable, let your pharmacist or doctor know.
Sweating	Sweating more than normal.	This is a withdrawal symptom and will wear off after a few weeks. You can use antiperspirant products which are available from your community pharmacy.
<b>Common</b>		
Constipation	Feeling "bunged up" inside. You cannot pass a motion or stool.	Eat more fibre e.g. bran, fruit and vegetables. Drink plenty of fluids. Do more walking. Your doctor or pharmacist can advise on an appropriate laxative if needed.
<b>Uncommon</b>		
Diarrhoea	Runny or loose stools	This should wear off with time. If this is intolerable, let your pharmacist or doctor know.
Dizziness	Feeling light headed	This should wear off with time. If it is intolerable, let your doctor know. Try not to stand up too quickly
<b>Rare</b>		
Tachycardia	A fast heart beat. You may feel palpitations.	Mention this to your doctor during the next visit.

**Hillmorton Hospital Pharmacy,  
42 Annex Road, Christchurch  
Telephone: (03) 339 1169**