Extended-release monthly buprenorphine injection

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Extended-release buprenorphine (BUP-XR) is a subcutaneous monthly depot injection used to treat opioid use disorder In 2018, Health Canada approved the only BUP-XR treatment available in Canada, under the brand name Sublocade. It is covered by all provinces and territories as part of their public drug plans, primarily for treating

moderate-to-severe opioid use disorder. All prescribers across Canada must complete online training, which is required by Health Canada.

Patients should be stabilized on sublingual buprenorphine before BUP-XR is initiated

Patients can receive BUP-XR if they are stabilized on 8-24 mg of sublingual buprenorphine for at least 7 days. They can then receive BUP-XR 300 mg monthly for the first 2 months, followed by 100 mg monthly as maintenance. Therapeutic effect first occurs within 24 hours. 1 Specialist consultation is suggested for patients who require greater expediency. Given the reduced risk of diversion or misuse, BUP-XR does not need to be combined with naloxone.2

For maintaining abstinence from illicit opioids, BUP-XR has been shown to be superior to placebo

A randomized, double-blind, placebo-controlled trial showed mean abstinence rates were 42.7% for participants taking BUP-XR, compared with 5.0% for placebo over a 24-week study period. BUP-XR has also been associated with higher treatment satisfaction, lower treatment burden and greater convenience than sublingual buprenorphine, with the main adverse effect reported being injection-site irritation.3

Safe and effective use of BUP-XR depends on patient factors BUP-XR can be recommended for patients with challenges adhering to daily-dosing treatments.4 A comparative effectiveness study showed that people who were incarcerated and maintained on BUP-XR had greater treatment retention after release from incarceration than with sublingual buprenorphine. 5 For patients who anticipate becoming or are pregnant,

BUP-XR should be used with caution, owing to teratogenicity risk shown in animal models. As yet, BUP-XR has not been studied in the management of chronic pain.

Psychosocial support remains a crucial aspect of treatment

Patients receiving BUP-XR benefit from regular contact with health care providers and should be offered interventions that reinforce harm reduction and engagement, such as addiction counselling, peer support, contingency management, affordable housing and income support.6

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