A Tool for Buprenorphine Care

(A series of monthly newsletters about buprenorphine treatment)

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Buprenorphine and breastfeeding

For the relatively rare times you care for a lactating veteran, keep this in mind: Despite package insert advice against breastfeeding, consensus is building that the amount of buprenorphine and its metabolites secreted into breast milk is small enough to recommend breastfeeding over formula for neonates born to buprenorphine-maintained mothers. Once injested, the little buprenorphine that is in breast milk is subjected to extensive first-pass metabolism, thus decreasing its oral bioavailbility significantly. Babies born with neonatal abstinance syndrome do not get relief with breast milk containing buprenorphine, and abruptly discontinuing breastfeeding does not precipitate withdrawal.

See also the CSAT/SAMHSA Treatment Improvement Protocols (TIP) 40 and 43.

Buprenorphine and medication-assisted addiction treatment in the news

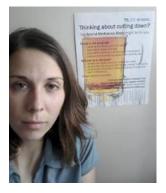
Good press and bad press.

"For Painkiller Addicts, Suboxone Means Freedom, Dependence." Mirjana Jojic. ABC News. Nov. 6, 2011.

"Newborns Hooked on Moms' Painkillers Go Through Agonizing Withdrawal." Jane E. Allen. ABC News. Nov. 14, 2011.

"Are we under-treating or over-medicating chronic pain patients?" Samantha Swindler. Tillamookheadlightherald.com Nov. 2, 2011.

Transition in the BIV



Me with a recruitment poster I made by channeling my high school desire to be a graphic designer.

I've had the pleasure of coordinating the Buprenorphine Initiative in the VA (BIV) with Dr. Adam Gordon since March 2008. During the next month, I'll be transitioning out of the position and handing it off to Dan Harding, a friend and colleague.

When I began, I knew very little about medication-assisted treatment of addiction, but I enjoyed learning about this fascinating part of pharmacology and found harm reduction addiction treatment compelling. In the meantime, I was trying to decide once and for all whether to pursue a career in medicine.

In December 2008, I received an acceptance letter from Chatham University's Physician Assistant program, and I happened to be setting a wedding date. Rather than beginning PA school and marriage at the same time, I asked for a deferral, and my training began the day after our first anniversary.

Now I'm halfway through my clinical year, looking forward to taking the boards in August, and imagining myself as a primary care provider. Already it's clear that my time at the BIV has had

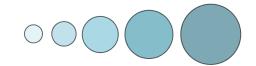
a part in shaping the clinician I am becoming. I sense that my reaction to "drug seekers" differs from that of many other providers, and I will discuss treatment options with patients who have opioid dependence with more confidence as a result of my time here.

During my time with the BIV, we have hosted 12 online inservices, published 41 newsletters, and responded to nearly 1000 inquiries. We have expanded access to effective care for a disorder that affects so many of our Veterans, and I am honored to have been a part of it.

Margaret

p.s. In next month's newsletter, meet my successor, Dan Harding!

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Research update

Mouse-over to see abstract. Click to access free full text (when available).

Statement of the American Society of Addiction Medicine Consensus Panel on the Use of Buprenorphine in Office-Based Treatment of Opioid Addiction. Kraus ML, Alford DP, Kotz MM, Levounis P, Mandell TW, Meyer M, Salsitz EA, Wetterau N, Wyatt SA. J Addict Med. 2011 Oct 28. [Epub ahead of print] PMID: 22042215.

Adjunctive Counseling During Brief and Extended Buprenorphine-Naloxone Treatment for Prescription Opioid Dependence: A 2-Phase Randomized Controlled Trial. Weiss RD, Potter JS, Fiellin DA, Byrne M, Connery HS, Dickinson W, Gardin J, Griffin ML, Gourevitch MN, Haller DL, Hasson AL, Huang Z, Jacobs P, Kosinski AS, Lindblad R, McCance-Katz EF, Provost SE, Selzer J, Somoza EC, Sonne SC, Ling W. Arch Gen Psychiatry. 2011 Nov 7. [Epub ahead of print] PMID: 22065255. CLICK FOR FULL TEXT.

Estimated Dose Exposure of the Neonate to Buprenorphine and Its Metabolite Norbuprenorphine via Breastmilk During Maternal Buprenorphine Substitution Treatment. Ilett KF, Hackett LP, Gower S, Doherty DA, Hamilton D, Bartu AE. Breastfeed Med. 2011 Oct 19. [Epub ahead of print] PMID: 22011128.

Psychosocial and pharmacological treatments versus pharmacological treatments for opioid detoxification. Amato L, Minozzi S, Davoli M, Vecchi S. Cochrane Database Syst Rev. 2011 Sep 7;9:CD005031. Review. PMID:21901695.

Breastfeeding citations. 1. Johnson R.E., Jones H.E., Fischer G. Use of buprenorphine in pregnancy: Patient management and effects on the neonate. Drug and Alcohol Dependence. 2003a;70(2 Suppl):S87–S101. 2. Lejeune C., Aubisson S., Simmat-Durand L., Cneude F., Piquet M., Gourarier L.; and le Groupe d'Etudes Grossesse et addictions. Withdrawal syndromes of newborns of pregnant drug abusers maintained under methadone or high-dose buprenorphine: 246 cases. Annales de Medecine Interne (Paris). 2001;152 Suppl 7:21–27. 3. Loustauneau, A.; Auriacombe, M.; Daulouede, J.P.; and Tignol, J. Is buprenorphine a potential alternative to methadone for treating pregnant drug users? Inventory of clinical data in the literature. Annales de Medecine Interne (Paris) 153(7 Suppl):2S31–2S36, 2002. 4. Marquet P., Chevrel J., Lavignasse P., Merle L., Lachatre G. Buprenorphine withdrawal syndrome in a newborn. Clinical Pharmacology and Therapeutics. 1997;62(5):569–571.