



## A Tool for Buprenorphine Care

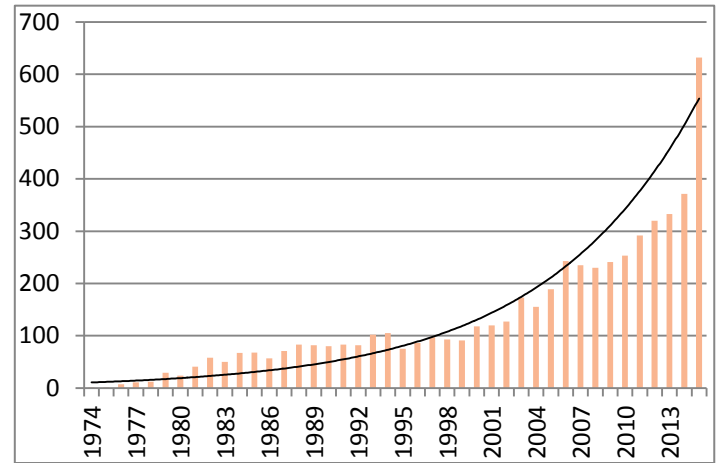
A series of monthly newsletters about buprenorphine treatment  
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### PATIENT-CENTRIC INTEREST IN SUPPORT GROUPS

A March 15<sup>th</sup> NPR article ([Amid Rising Concern About Addiction, Universities Focus On Recovery](#)) highlights [The Center for Students in Recovery](#) at the University of Texas and points to an expansion of the program throughout the university's satellite campuses. While the majority of our Veteran patients are not likely to be enrolled in college, many Veterans are indeed taking advantage of educational opportunities and perhaps this article will spur you on to commend to them such a program that may be offered at their school. Even broader, perhaps it will encourage you to look into alternative or newly-emerging support groups specific to your patient population or even specific patients.

### CHART OF INTEREST

In compiling this month's Research Update, the PubMed search offered this data as available for download. This chart depicts the number of articles by year shown for the search "buprenorphine" from first inception to present. No filters were used in the search, and the 2015 figure is projected based on current published articles thus far in 2015.



### BIV'S MONTHLY WEBINAR SERIES:

The BIV's monthly webinar series continues on Tuesday, May 12<sup>th</sup> at 1:00pm EST with the topic of *Latest Literature in Buprenorphine Care*. Please submit questions in advance that you would like to be addressed to [John.HardingJr@va.gov](mailto:John.HardingJr@va.gov). Look for a Microsoft Outlook calendar invite to the webinar.

Previous webinars (including slides and audio) can be found on the BIV Sharepoint site [here](#).

### MEDICATION-ASSISTED ADDICTION TREATMENT IN THE NEWS

1. [Government Announces Top Three Priorities to Combat Opioid Prescription Abuse](#)
2. [Targeting The Opioid Drug Crisis: A Health And Human Services Initiative](#)

### RESEARCH UPDATE

1. Schmidt-Hansen M, Bromham N, Taubert M, Arnold S, Hilgart JS. [Buprenorphine for treating cancer pain](#). Cochrane Database Syst Rev. 2015 Mar 31;3:CD009596. doi: 10.1002/14651858.CD009596.pub4. TAKE HOME POINT: "This Cochrane review did not find sufficient evidence to make buprenorphine a valid first-line choice alongside standard therapies like morphine, oxycodone and fentanyl. However it has a place as an analgesic and its different routes of administration may make it a practical option for limited types of cancer pain, for limited numbers of patients in limited types of clinical settings. Where its place is exactly, is still hard to say. It seems reasonable to suggest that it might be considered to rank as a fourth-line option compared to the more standard therapies like morphine, oxycodone and fentanyl, and even there it would only be suitable for some patients. Having said that, palliative care patients are often heterogeneous and complex, so having a number of analgesics available that can be given differently increases patient and prescriber choice. In particular, the [sublingual] and injectable routes seemed to have a more definable analgesic effect, whereas the [transdermal] route studies left more questions than they resolved."
2. Sullivan JG, Webster L. [Novel Buccal Film Formulation of Buprenorphine-Naloxone for the Maintenance Treatment of Opioid Dependence: A 12-Week Conversion Study](#). Clin Ther. 2015 Mar 27. pii: S0149-2918(15)00112-5. doi: 10.1016/j.clinthera.2015.02.027. [Epub ahead of print] TAKE HOME POINT: "While these results should be considered preliminary due to the open-label design, [the buccal film] was overall safe and well tolerated, and it appeared to provide adequate symptom control, in the treatment of opioid-dependent subjects previously controlled on [sublingual tablet or film] for a minimum of 30 days. [...] The [buccal to sublingual] conversion ratio was 2:1."

*BIV: Improving Implementation and Outcomes of Office-Based Treatment of Opioid Dependence in the VA*

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