

A Tool for Buprenorphine Care

(A series of monthly newsletters about buprenorphine treatment)

Volume 3 Issue 7—January 2010

New Publication on Clinical Supervision for Substance Abuse Treatment

Clinical supervision has become the cornerstone of quality improvement in the substance abuse treatment field. In addition to providing a bridge between the classroom and the clinic, clinical supervision improves client care, develops the professionalism of clinical personnel, and imparts to and maintains ethical standards in the field.

Organized into three parts, Treatment Improvement Protocol (TIP) 52: Clinical Supervision and Professional Development of the Substance Abuse Counselor presents basic information about clinical supervision.

Part 1 (for clinical supervisors): Presents basic information about clinical supervision in the substance abuse treatment field and provides a “how to” of clinical supervision.

Part 2 (for program administrators): Helps administrators understand the benefits and rationale behind providing clinical supervision for their program’s substance abuse counselors.

Part 3 consists of three sections: An analysis of the available literature, an annotated bibliography of the literature most central to the topic, and a bibliography of other available literature. Part 3 is available only online at kap.samhsa.gov.

Download TIP 52 [here](#) [pdf].

Resource for Nurses

Reminder: The guide “Buprenorphine: A Guide for Nurses” provided by the Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA) is a great resource for nurses and mid-level practitioners working with physician prescribers to improve treatment outcomes for individuals receiving buprenorphine treatment for opioid addiction. Click [here](#) to download it.

In-Service Schedule

Mark your calendar for the next few buprenorphine cyber in-services.

Friday, March 19, 2pm ET — Friday, May 21, 2pm ET — Friday, July 16, 2pm ET

To hear audio during each presentation, call: 1-800-767-1750, then enter 13881#. Information about how to access slides will be disseminated closer to the respective date.

Slides from past in-services are available at the [SUD SharePoint site](#). (Use your current computer log-on username and password to log on; if this doesn’t work, email [Keith Cosgrove](#) for assistance.)

Tip of the Month

Buprenorphine undergoes hepatic metabolism, primarily by the P450 3A4 system. Patients with compromised hepatic function could have reduced metabolism of buprenorphine, with resultant higher blood levels of the medication. There have been no studies examining buprenorphine disposition in patients with compromised hepatic functioning, but patients with impairments in hepatic functioning should be monitored closely for the possibility that they may require lower maintenance doses of buprenorphine.

Source: AAAP DATA-2000 Training

Research Update

Mouse-over for abstract

Integrated Opioid Use Disorder and HIV Treatment: Rationale, Clinical Guidelines for Addiction Treatment and Review of Interactions of Antiretroviral Agents and Opioid Agonist Therapies. Batkis MF, Treisman GJ, Angelino AF. AIDS Patient Care STDS. 2010 Jan 24. [Epub ahead of print]. PMID: 20095910

A pilot study about the feasibility and cost-effectiveness of electronic compliance monitoring in substitution treatment with buprenorphine-naloxone combination. Tacke U, Uosukainen H, Kananen M, Kontra K, Pentikänen H. J Opioid Manag. 2009 Nov-Dec;5(6):321-9. PMID: 20073406