A Tool for Buprenorphine Care

(A series of monthly newsletters about buprenorphine treatment)

Volume 5 Issue 1—July 2011

Buprenorphine and Medication-Assisted Addiction Treatment in the News

Good press and bad press.


"Drug meant to treat heroin users being used to get high." Cristina Rodda. KOB News, Albuquerque, NM. July 15, 2011.

Research Update

Mouse-over to see abstract.


Frequently Asked Questions

Can tablets be split?

The tablet is not scored, so the two resulting doses may be unequal. Splitting tablets may also encourage diversion.

Outside of the VA where patients routinely pay for the entirety of their buprenorphine, splitting is more common. It also happens at VAs whose pharmacies charge double co-pays when a patient requires both the 8 mg tablet and the 2 mg tablet for one dose.

Aside from the lack of score line, there is no scientific evidence to discourage the practice.

What can physician assistants and nurse practitioners do?

The short answer is: Everything except actually sign the prescription.

Under the supervision of a physician who holds an x-designation, a PA or NP may give counsel, administer buprenorphine, and follow patients on through the maintenance phase. The physician must be the only prescriber at all points in the process (induction, maintenance, etc.). X numbers cannot be given to non-physicians even if the NP/PA has his or her own DEA license.

There are efforts underway in the American Academy of Physician Assistants to lobby congress to amend DATA-2000 so that physician assistants will be able to prescribe buprenorphine for opioid dependence.