



What is Buprenorphine/Naloxone or Suboxone®?

Suboxone is the brand of buprenorphine that is now registered in NZ which means it can be prescribed. It contains buprenorphine: naloxone in a 4:1 ratio. The preparation is a tablet that is placed under the tongue and it dissolves in up to 10 minutes depending on the dose size. It has no/little effect if it is swallowed.

The naloxone has been added to deter injecting. It has no effect when Suboxone is used as prescribed (i.e. under the tongue) but if Suboxone is injected the naloxone puts you into withdrawal as it overrides the buprenorphine.

Subutex (buprenorphine alone) is not registered for use in New Zealand.

Advantages of Suboxone include:

- The physical effects of withdrawal are easier to cope with
- You can be dosed on alternate days e.g. you might get double doses to take on Monday, a double dose to take on Wednesday and a triple dose to take on Friday. There's no need for takeaway doses.
- An alternative to methadone as not everyone likes taking methadone
- A feeling of being more clear-headed, less 'cloudy' than with methadone (though not everyone likes that clear-headed feeling)
- It is less dangerous than methadone in overdose if it's the only drug taken

Side Effects

Buprenorphine does have some side effects and these include nausea, vomiting, drowsiness, dizziness, headache, itch, dry mouth, meiosis, and orthostatic hypotension, difficulty with ejaculation, decreased libido, urinary retention, and constipation. Rare cases of liver necrosis and hepatitis with jaundice have been reported with the use of buprenorphine. For those who receive buprenorphine, the liver function is regular monitored.

The Most severe and serious adverse reaction associated with Buprenorphine use is respiratory depression which can be fatal. This is particularly problematic with buprenorphine because unlike morphine, there is no effective antidote. Taking Buprenorphine and central nervous system depressants (such as alcohol or benzodiazepines) may lead to fatal respiratory depression.



Transferring to Suboxone

If you are already on methadone, you need to reduce to a methadone dose of about 20-30mg to make the transfer less difficult/uncomfortable.

If you are taking street opiates like homebake, poppy seed tea, turned morphine tablets etc then transfer to Suboxone can occur from these drugs without being prescribed methadone first.

The tablet sizes are buprenorphine: naloxone 8mg/2mg and 2mg/0.5mg and are lemon-lime flavoured.

The typical duration of detoxification using Buprenorphine is between 4-8 days but can be tailored to individual needs.



Suboxone has not been granted a subsidy by Pharmac as yet which means there is a cost. Talk to your case manager, doctor or the recovery practitioner about financial help.