

BUPRENORPHINE-NALOXONE (SUBOXONE)

FAQ FOR PATIENTS

The naloxone is not absorbed when taken properly. All prescriptions will be assumed buprenorphine-naloxone but for simplicity only buprenorphine is mentioned here.

1. Why do I have to feel sick to start the medication for it to work best?

Buprenorphine (Suboxone) will compete with the drug and will make your withdrawal symptoms worse, which is called "precipitated withdrawal." By already being in withdrawal when you take your first dose of Buprenorphine (Suboxone), the medication will make you feel better, not worse.

2. How does Buprenorphine (Suboxone) work?

Buprenorphine (Suboxone) binds to the same part of the brain as the opioid drugs you are currently taking. It helps to stop cravings and withdrawal symptoms. This will allow you to help focus on treatment and not the withdrawal symptoms. If you use when taking it, you will not get high.

3. When will I start to feel better?

Most patients feel better 30 minutes after they take Buprenorphine (Suboxone), with full effects after about 1 hour.

4. How long will Buprenorphine (Suboxone) last?

Everyone's response to Buprenorphine (Suboxone) is different but most feel good for the rest of the day after the first or second dose. Your doctor may increase or decrease your dose dependent on your response to the medication.

5. Can I go to work right after my first dose?

Buprenorphine (Suboxone) can cause drowsiness and slow reaction times. These will go away after a few weeks of treatment. Some people do go to work but many prefer to take the first few days off until they feel better.

6. Is it important to take my medication at the same time each day?

Yes, it is very important for you take your medication at the same time every day.

7. If I have more than 1 tablet, do I need to take them together at the same time?

You do need to take your dose in one "sitting," but you don't need to fit all the tablets under your tongue at the same time. Some prefer this method while others prefer taking their medication in divided doses. The important thing is to be sure to take the full daily dose to maintain constant levels of Buprenorphine (Suboxone).

8. Why does Buprenorphine (Suboxone) need to be placed under the tongue?

This allows Buprenorphine (Suboxone) to be absorbed quickly and safely. Chewing or swallowing the medication will not allow the medication to be absorbed. The tablet must be completely dissolved for the full effect.

9. Why can't I talk while the medication is dissolving under my tongue?

Moving the tongue lets the undissolved medication to leak out from underneath.

10. Why does it sometimes only take 5 minutes for Buprenorphine (Suboxone) to dissolve and other times it takes longer?

The moisture of your mouth can affect the time it takes to dissolve. Drinking something before taking Buprenorphine (Suboxone) is a good way to help it dissolve more quickly.

11. If I forget to take my Buprenorphine (Suboxone) for a day will I feel sick?

Buprenorphine (Suboxone) usually lasts longer than 24 hours but make sure you take it as soon as possible (unless it's close to the time of your next dose). Do not take 2 doses unless directed by your doctor.

12. What happens if I still feel sick after taking Buprenorphine (Suboxone) for a while?

Please be sure to discuss these effects with your doctor. Your doctor may need to either increase or decrease your dose.

13. What happens if I take drugs and then take Buprenorphine (Suboxone)?

It's possible you will experience strong withdrawal symptoms as the Buprenorphine (Suboxone) tries to compete with the drugs in your system, making you feel sick.

14. What happens if I take Buprenorphine (Suboxone) and then take drugs?

As long as Buprenorphine (Suboxone) is in your body, it will reduce the effects of any drug (or make them have no effect).

15. What are the side effects of this medication?

Some will have nausea, headache, constipation and body aches and pain. Most will go away after 1-2 weeks. If you are experiencing any side effects, let us know.

BUPRENORPHINE (SUBOXONE)

FAQ FOR FAMILIES

1. What is an opioid?

Opioids are drugs related to opium. These are commonly used to treat pain and prescribed as oxycodone (Percocet), hydrocodone (Norco, Vicodin), morphine, hydromorphone (Dilaudid), fentanyl or heroin, etc. These drugs can be extremely habit forming leading some people to become dependent. Methadone and buprenorphine are also opioids.

Buprenorphine/naloxone (Suboxone) has 2 components in which one of them is an opioid.

2. Why are opioids used to treat opioid dependence?

Many wonder why we use opioids to treat opioid dependence. Buprenorphine (Suboxone) is not just a substitution. These types of opioids help prevent patients from getting into legal troubles, reduce the risk of getting diseases and infections and help to stabilize their social settings.

3. What is the right dose of Buprenorphine (Suboxone)?

Finding the right dose is important when treating people with Buprenorphine (Suboxone). The right dose is the amount that allows patients to feel and act normally. It can take days to weeks to find the right dose. The doctor may ask family members to help measure these symptoms to adjust the timing and amount of Buprenorphine (Suboxone). Once the right dose is found, it is important to take it on time everyday.

4. How can the family support good treatment?

Buprenorphine (Suboxone) is a treatment and not a cure. The best way to help is to encourage regular medical care, encourage to not skip or forget to take the medication and, most importantly, encourage to partake in regular counseling sessions or support groups.

- **Regular Medical Care:** Regular appointments are vital in the treatment of opioid dependence with Buprenorphine (Suboxone). Missing appointments can lead to missed prescriptions and withdrawal symptoms.
- **Counseling:** These appointments are key parts of treatment and work with Buprenorphine (Suboxone) to improve success. Sometimes, family members may be asked to join in family therapy sessions to provide additional support.
- **Support Groups:** It is important to help find support groups as they help to improve success. It may take weeks to find the right group and the right environment. Family members may have their own meetings to support them in adjusting to life with a patient who has become dependent on opioids.
- **Taking the Medication:** Buprenorphine (Suboxone) is an unusual medication in that it must be

completely dissolved under the tongue. This process can take 5-10 minutes and the patient should not speak. It is important for family members to be aware of this and allow regular daily dosing times.

- **Storing the Medication:** It is very important to find a good and safe place for the medication. The doctor may give some "backup" pills in case an appointment cannot be easily scheduled. Please contact a physician should a family member mistakenly take Buprenorphine (Suboxone).

5. What does Buprenorphine (Suboxone) treatment mean to the family?

Chronic conditions can be difficult for the patient and his/her family. Buprenorphine (Suboxone) can be a successful treatment if it is integrated with counseling and support for life changes.

Family members may resent the time, effort and money it takes for Buprenorphine (Suboxone) treatment and counseling. Opioid dependence is just like other chronic diseases like diabetes or high blood pressure. Family counseling and support groups can help families adjust to these changes and make it a successful treatment for everyone involved.

Remember, opioid dependence is not a weakness in character but a chronic disease of the brain. Let's help these people succeed in treatment!

In Summary: Family support can be very helpful in patients taking Buprenorphine (Suboxone). It helps if family members understand how dependence is a chronic disease and requires ongoing care. It also helps the family to understand how Buprenorphine (Suboxone) works and how counseling/therapy will improve success.