

FREQUENTLY ASKED QUESTIONS—FAMILY

SUBOXONE[®] (buprenorphine HCl/naloxone HCl dihydrate) sublingual tablet

1. What is an opioid?

Opioids and opiates are synthetic and natural drugs that are related to drugs found in opium; many, such as heroin, are addictive narcotics. Many prescription pain medications are opioids, such as codeine, Vicodin[®]* (hydrocodone bitartrate and acetaminophen), Demerol[®]† (meperidine hydrochloride, USP), Dilaudid[®]* (hydromorphone), morphine, OxyContin[®]‡ (oxycodone hydrochloride controlled-release), and Percodan[®]§ (oxycodone and aspirin tablets, USP). Methadone and buprenorphine are also opioids.

A small amount of naloxone is in SUBOXONE. Naloxone is added to discourage misuse of SUBOXONE. If SUBOXONE were to be crushed and injected, the naloxone would cause the person to go into withdrawal.

2. Why are opioids used to treat opioid dependence?

Many family members wonder why doctors use buprenorphine to treat opioid dependence, since it is in the same family as heroin. Some of them ask, “Isn’t this substituting one addiction for another?” But the two medications used to treat opioid dependence—methadone and buprenorphine—are not “just substitution.” Many medical studies since 1965 show that maintenance treatment helps keep patients healthier, keeps them from getting into legal troubles, and reduces the risk of getting diseases and infections that are transferred when needles are shared.

3. What is the right dose of SUBOXONE?

Dependence is a developed need to have the opioid receptors in the brain occupied by an opioid. Finding just the right amount of SUBOXONE to fill the receptors at the right rate is an important part of the induction process.

Every opioid can have stimulating or sedating effects, especially in the first weeks of treatment. The right dose of SUBOXONE is the one that allows the patient to feel and act normally. It can sometimes take a few weeks to find the right dose. During the first few weeks, the dose may be too high, or too low, which can lead to sickness, daytime sleepiness, or trouble sleeping at night. The patient may ask that family members help keep track of the timing of these symptoms, and write them down. Then the doctor can use all these clues to adjust the amount and time of day for buprenorphine doses.

Once the right dose is found, it is important to take it on time in a regular way, so the patient’s body can maintain consistent medication levels to avoid experiencing withdrawal symptoms.

4. How can the family support good treatment?

Even though maintenance treatment for opioid dependence works very well, it is not a cure. This means that the patient will continue to need the stable dose of SUBOXONE, with regular monitoring by the doctor. This is similar to other chronic diseases, such as diabetes or asthma. These illnesses can be treated, but there is no permanent cure, so patients often stay on the same medication for a long time. The best way to help and support the patient is to encourage regular medical care, encourage the patient not to skip or forget to take the medication and most importantly, encourage the patient to partake in regular counseling sessions or support groups.

- Regular medical care

Most patients will be required to see the physician for ongoing SUBOXONE[®] treatment every two to four weeks, once they are stable. If they miss an appointment, they may not be able to refill the medication on time, and may even go into withdrawal, which could be dangerous.

- Counseling

Most patients who have become dependent on opioids will need formal counseling at some point in their care. The patient may have regular appointments with an individual counselor, or for group therapy. These appointments are key parts of treatment, and work together with the SUBOXONE to improve success. Sometimes family members may be asked to join in family therapy sessions to provide additional support to the patient and information to the health care provider.

- Support Groups

Most patients use some kind of support group to maintain their healthy lifestyle. It sometimes takes several visits to different groups to find a comfortable environment. In the first year of recovery from opioid dependence, some patients go to meetings every day, or several times per week. These meetings work with SUBOXONE to improve the likelihood of a patient's treatment success. Family members may have their own meetings, such as Al-Anon, or Adult Children of Alcoholics (ACA), to support them in adjusting to life with a patient who has become dependent on opioids.

- Taking the medication

SUBOXONE is an unusual medication because it is best absorbed into the bloodstream when taken "sublingually" meaning the patient must hold the tablet under his or her tongue while the medicine dissolves (swallowing SUBOXONE actually reduces its effectiveness). Please be aware that **this process takes about 5-10 minutes**. While the medication is dissolving, the patient should not speak. It is very important that the family support the patient by understanding that s/he will be "out of commission" for those 5-10 minutes intervals surrounding regular daily dosing times.

One way to support new SUBOXONE patients is by helping them to make a habit of taking their dose at the same time every day. Tying dosing to a routine, everyday activity (eg, getting dressed in the morning) is often one of the best ways to do this, because then the activity itself begins to serve as a reminder.

- Storing the medication

If SUBOXONE is lost or misplaced, the patient may skip doses or become ill, so it is very important to find a good place to keep the medication safely at home—away from children or pets, and always in the same location, so it can be easily found. The doctor may give the patient a few "backup" pills, in a separate bottle, in case an appointment has to be rescheduled, or there is an emergency of some kind. It is best if the location of the SUBOXONE is not next to the vitamins, or the aspirin, or other over-the-counter medications, to avoid confusion. If a family member or visitor takes SUBOXONE by mistake, a physician should be contacted immediately.

5. **What does SUBOXONE treatment mean to the family?**

It is hard for any family when a member finds out s/he has a chronic medical condition. This is true for opioid dependence as well. When chronic conditions go untreated, they often have severe complications which could lead to permanent disability or even death. Fortunately, SUBOXONE maintenance can be a successful treatment, especially if it is integrated with counseling and support for life changes.

Chronic disease means the disease is there every day, and must be treated every day. This takes time and attention away from other things, and family members may resent the effort and time and money that it takes for SUBOXONE[®] treatment and counseling. It might help to compare opioid dependence to other chronic diseases, like diabetes or high blood pressure. After all, it takes time to make appointments to go to the doctor for blood pressure checks, and it may annoy the family if the food has to be low in cholesterol, or unsalted. But most families can adjust to these changes, when they consider that it may prevent a heart attack or a stroke for their loved one.

It is common for people to think of substance dependence as a weakness in character, instead of a disease. Perhaps the first few times the person used drugs it was poor judgment. However, by the time the patient became dependent, taking drugs every day, and needing medical treatment, it can be considered to be a “brain disease” rather than a problem with willpower.

In summary:

Family support can be very helpful to patients on SUBOXONE treatment. It helps if the family members understand how dependence is a chronic disease that requires ongoing care. It also helps if the family gets to know a little about how treatment with SUBOXONE works, and how it should be stored at home to keep it safe. Family life might have to change to allow time and effort for the patient to become healthy again. Sometimes family members themselves can benefit from therapy.

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