

## Buprenorphine for chronic pain

Buprenorphine is a semi-synthetic opiate analgesic medication approved for the treatment of moderate to severe chronic daily pain for patients that need around-the-clock management of their chronic pain. It was approved for the treatment of chronic pain in 1981 in the United States.

Buprenorphine is available as a transdermal patch or as buccal films in the United States. There are other formulations and combination medications that include buprenorphine, that are indicated for the treatment of addiction. That is not what we are treating you for. The transdermal patch (Butrans), and the buccal films (Belbuca) are indicated for the treatment of chronic daily pain in the moderate to severe range.

Buprenorphine is a very effective analgesic. It is effective in treating even neuropathic pain, such as pain due to neuropathy or chronic radiculopathy. It tends to work better than other narcotic medications on neuropathic pain. It has a unique mechanism of action compared to other narcotics such as Morphine, hydrocodone, oxycodone or hydromorphone.

Buprenorphine has less side effects and potential risks than other narcotics. It has much less side effects on the GI system including nausea and constipation.

Buprenorphine has much less sedation and impairment of cognitive function.

Buprenorphine has less suppression on the respiratory system. It is the safest opiate analgesic to use in individuals who are at risk for respiratory depression. However, as with other narcotics, Buprenorphine should not be used in combination with benzodiazepines (clonazepam, valium, diazepam, Xanax, etc.) due to a moderate to severe drug interaction which can result in death.

Buprenorphine has less development of tolerance and therefore making management of acute pain easier. For this reason, buprenorphine is a better option for young patients, because we want to avoid (decrease) the development of tolerance, dependence and addiction.

If patients abruptly discontinue buprenorphine, withdrawal symptoms are minor, compared to other narcotics.

Buprenorphine does not suppress immune function like other high-dose narcotics can.

Buprenorphine does not adversely affect adrenal hormones, or cause suppression of testosterone. Because of this, it has much less long-term affect on bone strength (osteoporosis).

Buprenorphine is not Methadone.

Buprenorphine is the safest option for use in the elderly, patients with respiratory conditions, or renal impairment.