

## SUBOXONE FAQ's

### **I took an opiate this morning, what should I do?**

If you are going to start Suboxone you must wait until you are in opioid withdrawal before taking your first Suboxone. Review the instructions, wait until you are extremely uncomfortable before taking your first dose, depending on how much and what type of opioid you last used this will likely be at least 48 hours since your last use. It is VERY important that you wait until you are in FULL withdrawal; if you do not wait you will be at risk for PRECIPITATED WITHDRAWAL when you take Suboxone. This is a severe opioid withdrawal which is extremely uncomfortable and may cause you to lose control of your bowels or have other severe symptoms.

### **What side effects could I have from Suboxone?**

The most common side effect is headache. If you experience any side effects, let me know right away.

### **What would happen if I use opioids with Suboxone? Alcohol?**

If you use opioids and you are taking your full dose of Suboxone, the opioids will have little or no effect. This is because the Suboxone will be “sticking” on the opioid receptor, when the Suboxone leaves the receptor then opioids would have effect once again.

There is no direct interaction between alcohol and Suboxone. In some cases Suboxone may reduce your cravings to use alcohol; however, I recommend you use alcohol with caution until you know how Suboxone will affect you.

### **Will Suboxone interfere with other medications?**

There is an interaction between Suboxone and benzos like Ativan, Valium, Xanax, and Klonopin. For this reason you should avoid all benzos while taking Suboxone.

### **What if I continue to use marijuana while taking Suboxone?**

You will be required to come to office appointments every 2 weeks if you are using marijuana. Even though marijuana is legalized in some states, it is illegal in North Carolina and considered a substance of abuse. Your safety is our top concern so we recommend you stop using marijuana while you are on the Suboxone program.

### **I am prescribed a benzo from another doctor , what should I do?**

Since there are dangerous interactions with benzos and Suboxone it is VERY IMPORTANT that you give me this information. Tell me exactly how long and how much of the benzo you are prescribed and I will help you decide whether to continue taking it or not. If we decide that the benefits of taking the benzo outweigh the risks you will need to come to office appointments weekly for monitoring.

**I am prescribed a stimulant from another doctor , what should I do?**

Tell me exactly how long and how much of the stimulant you are prescribed and I will help you decide whether to continue taking it or not. If we decide that the benefits of taking the stimulant outweigh the risks, it will not affect your Suboxone program schedule.

**How much does Suboxone cost?**

If you are paying out of pocket, one film of Suboxone generally costs between \$7-10. If you are using insurance to pay for Suboxone there will likely be a co-pay for the prescription, the co-pay cards can help with some of this cost.

**What should I do if I continue to have withdrawal symptoms after taking the Suboxone?**

You should monitor your withdrawal symptoms – what is happening? when are they occurring? If the symptoms are mild and you are not having strong cravings to use opioids then wait until next week and we can discuss further. If you are having moderate to severe withdrawal symptoms then call me to discuss.

**What if I don' t want to go to NA or AA?**

You will not be mandated to go to NA or AA. However, I believe strongly that you need some kind of support in addition to Suboxone; this can be psychotherapy, counseling, community support, etc. Think about what options might work best for you and we can discuss further.

**Why can't I get subutex instead since it is much cheaper?**

Subutex is the brand name for the buprenorphine medication which does not include naloxone. There are more safety issues with subutex so as a rule I do not prescribe it. If you try Suboxone and it does not work for you we can discuss other treatment options.

**Buprenorphine Maintenance**

**Suboxone** is the combination of buprenorphine (partial opioid agonist) and naloxone (opioid antagonist – Narcan). The combination is either 2 mg/0.5 mg or 8 mg/2 mg. Subutex and Buprenex are other forms of buprenorphine, which I don' t prescribe.

Suboxone is a sublingual film (it dissolves under the tongue). The only FDA indication for Suboxone is for maintenance therapy for Opioid Dependence. The usual dose range is 8 – 16 mg a day. I prescribe the 8 mg film until the end of the detox phase, when the 2 mg film may become helpful. At 16 mg, 93% of the opioid receptors are blocked in the average person. Studies have shown that best results with Suboxone maintenance occur after 1 year clean/sober /stable. After that time, we should start a gradual detox.

The most common side effect of Suboxone is headache. You can take Ibuprofen or Tylenol. You may not want to work on your first day on Suboxone. You do have the choice of opioid maintenance treatment in a methadone clinic instead of Suboxone..

**You cannot take opiates (Oxycodone, Hydrocodone) or benzos (Xanax, Klonopin, Ativan, Valium) while taking Suboxone.** You should keep something in your wallet that says you are on Suboxone in case you are in an accident. You should read the package insert (PI) that comes with your first pill bottle and bring any questions with you to our next appointment. The PI is always available on [www.Suboxone.com](http://www.Suboxone.com)

**Cost:** If you have insurance, your co-pay would be the same of any trade medication. Out of pocket, an 8 mg film costs about \$7 (cost at pharmacies varies) and a 2 mg film costs about \$4. Methadone clinics cost \$11-13 a day.

**Induction phase of treatment:**

- Do not take your first dose of Suboxone until you are in significant withdrawal from your previous opiate or at least 24 hours to avoid precipitated withdrawal (very uncomfortable).
- I suggest taking your first dose while you are in the comfort of your own home. Take a film (4 mg) or half of the 8 mg under your tongue and if you do not experience precipitated withdrawal within the first 15 minutes, you can then take the second half.
- I then recommend that you take at least one film (8 mg) once a day and symptoms persist take one film twice a day for the first week.
- In one week we will meet to discuss what to do next.
- Suboxone has a 37 hour half-life. Most of my patients take two films (16 mg) once a day.
- THERE IS NO EVIDENCE TO SUPPORT taking 3 films per day and I DO NOT PRESCRIBE THIS DOSE.

**Suggestions on how to take Suboxone:**

- The film will dissolve faster if your mouth is moist prior to placing the film under your tongue. So drink something prior to the dose.
- **Do NOT swallow Suboxone.** It is not absorbed in the gut and will only cause constipation or nausea.
- After about a minute, most of it will dissolve. You will have some chalky residue left over (mostly the naloxone), spit it out, then you may want to rinse and spit.
- To avoid swallowing the Suboxone, keep your head up, chin down, and if necessary, spit out the extra saliva into a cup. If you do not like the taste of the medication, try a mint or mouthwash before or after the dose.

**It is your responsibility to:**

1. Meet with me weekly until we establish the proper dose. So long as you are stable, we'll add a week to each subsequent appointment up to 6 weeks. The right dose means that you are comfortable (not having withdrawal symptoms), not having cravings, and if you try using on top of the Suboxone you should not feel the effects (a blocking dose).
2. Be honest. Relapse is part of the recovery process if we learn from the relapse.
3. Keep your appointments. You will be billed for no-shows or cancellations with less than 24 hour notice (my previous office day).
4. Pay my fees. It is part of treatment compliance. Lack of payment may result in an administrative detox of 21 days (7 days of 4 mg, 7 days of 2 mg, and 7 days of 1 mg, #25- 2 mg film). I do not call in prescriptions without an appointment (we can do phone appointments on occasion). I charge \$100 to call in Suboxone during a regular business hours and \$150 after hours and on weekends.
5. Try a self-help group for long-term recovery (AA, NA, SMART, or Rational Recovery). Try [www.na.org](http://www.na.org) for NA, click on "Find a Meeting" and type in your zip code or [www.nctriaa.org](http://www.nctriaa.org) for AA, or [www.suboxone.com](http://www.suboxone.com).)
6. Do not give away or sell your Suboxone. Diversion is against the law and puts my ability to prescribe Suboxone to my other patients in jeopardy with the DEA. The DEA and I check the NC Controlled Substance Reporting System. Filling prescriptions for controlled meds will jeopardize your treatment.
7. Bring all of your Suboxone Film with you for each appointment for film counts to document compliance and lack of diversion. Protect your supply with a lock-box or safe.
8. Call Poison Control (800-222-1222) and/or 911 if you or another person especially a minor accidentally ingests Suboxone.
9. Submit urine regularly for testing upon my request. I also urine test you if there's something unusual (examples include "lost medication," appearance of intoxication, reports from third parties)
10. Follow all of the policies outlined in the Intake Packet, Utox FAQs, Suboxone Clinic Policy and Suboxone FAQs that you have read and signed.
11. If you have any questions or concerns please call the office at 1-888-312-0127 ext. 1