Examination of Patient Reported Buprenorphine Dosing Regimens in patients with Opioid Use Disorder

Phoebe Dacha MD¹, Michelle Eglovitch, MPH² Bhushan Thakkar PT, MS³, Caitlin E. Martin MD, MPH².3

¹ Department of OBGYN, ²Virginia Commonwealth University School of Medicine, ³ Institute for Drug and Alcohol Studies email: phoebedacha@vcuhealth.org

INTRODUCTION

- Buprenorphine is a safe and effective medication for opioid use disorder (OUD). Sublingual buprenorphine is typically prescribed in concordance with FDA-approved instructions as a once-daily sublingual medication.
- However, clinical providers note that patients will often split their total daily dose to take it at multiple time points during the day.
- The association of buprenorphine dosing patterns with OUD treatment outcomes is unknown, leaving clinicians without evidence to guide their counseling and practices.
- As a critical first step to address this gap in knowledge, this study reports on the prevalence of patient-reported buprenorphine dosing patterns, and secondarily provider-documented regimens, among a sample of patients stabilized on buprenorphine in outpatient OUD treatment.

METHODS

- This is a secondary analysis using crosssectional data from an ongoing survey and medical record abstraction study being conducted at an outpatient addiction clinic.
- The parent study is currently enrolling nonpregnant females with OUD aged 18-45 who have been receiving buprenorphine for at least 6 weeks.
- Prior to survey completion, research staff conduct a verbal assessmed inquiring about participants' buprenorphine administration in the preceding 28 days.
- Provider documented dosing regimens are abstracted from the participants' medical record.
- Descriptive statistics report on the prevalence of patient and provider-reported buprenorphine dosing patterns.

RESULTS

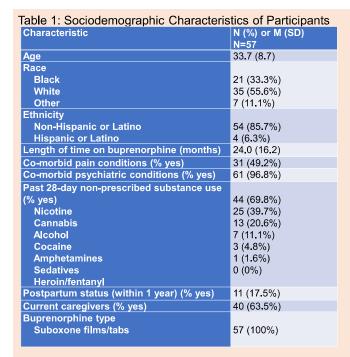
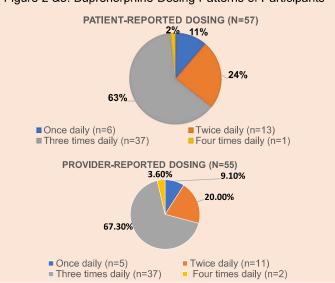


Figure 2 &3: Buprenorphine Dosing Patterns of Participants



CONCLUSION

- Among a sample of women in treatment for opioid use disorder, patient-reported and provider documented buprenorphine dosing regimens indicate a high prevalence of split dosing.
- Notably, this is inconsistent with the current FDAapproved buprenorphine instructions for once daily dosing.
- Future studies should evaluate correlations of these dosing patterns with OUD treatment outcomes, and qualitatively assess patient-reported reasons and satisfaction with various dosing patterns.
- Limitations: generalizability restricted to 1 program and inability to establish cause and effect

AUTHORS & DISCLOSURES

Phoebe Dacha MD¹, Michelle Eglovitch, MPH² Bhushan Thakkar PT, MS³, Caitlin E. Martin MD, MPH².³.

Affiliation: VCL Nothing to disclose

REFERENCES

Bonhomme J, Shim RS, Gooden R, Tyus D, Rust G. Opioid addiction and abuse in primary care practice: a comparison of methadone and buprenorphine as treatment options. *J Natl Med Assoc*. 2012;104(7-8):342-350. doi:10.1016/s0027-9684(15)30175-9

Martin CE, Shadowen C, Thakkar B, Oakes T, Gal TS, Moeller FG. Buprenorphine dosing for the treatment of opioid use disorder through pregnancy and postpartum. *Curr Treat Options Psychiatry*. 2020;7(3):375-399. doi:10.1007/s40501-020-00221-z

Kumar R, Viswanath O, Saadabadi A. Buprenorphine. [Updated 2022 May 2]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2022 Jan-. Available from: https://www.ncbi.nlm.nih.gov/books/NBK459126/

FUNDING

NIDA (PI: C. Martin; K23DA053507); CTSA award from the National Center for Advancing Translational Sciences (KL2TR002648 & UL1TR002649); VCU SOM VETAR grant; Training in the Pharmacology of Abused Drugs (PI: W. Dewey; T32DA007027)