



OSAM-O-GRAM



DATE: December 2005
DATELINE: Ohio

Wright State University
The University of Akron

First Indications of Buprenorphine Misuse in Ohio

The Food and Drug Administration (FDA) approved the use of Subutex® (buprenorphine) and Suboxone® (buprenorphine and naloxone) in late 2002 for the treatment of opioid (eg, heroin, pain medication, such as oxycodone, hydrocodone) addiction. Subutex® contains buprenorphine only, while Suboxone® contains buprenorphine and the opiate antagonist, naloxone. If injected by someone dependent on opioids, the naloxone in Suboxone® produces withdrawal and may diminish abuse among injectors. Both drugs, which are administered sublingually as prescribed, are available in 2 mg and 8 mg tablets.

Both Subutex® and Suboxone® are Schedule III narcotics under the Controlled Substances Act. Unlike methadone, a Schedule II drug that can be dispensed in clinics that specialize in opioid addiction treatment, Subutex® and Suboxone® can be prescribed for the treatment of opioid addiction in offices by physicians who have obtained certification. As such, these drugs provide a promising alternative form of treatment for opioid dependence.

In the late spring of 2005, the OSAM Network received the first indications of buprenorphine misuse in the Columbus area. Four participants in the MDMA/Club Drug and HIV/STD Risk Behavior Study in Ohio (Robert Carlson, Principal Investigator) who were screened said they knew people who had used "buprenorphine" to get high in the previous six months. All four were white men ranging in age from 20-23. Two participants had heard of "buprenorphine" being sold on the streets, and two had heard of Suboxone® being sold on the streets. Two participants had used "buprenorphine" to get high in the previous six months. Several of these individuals participated in OSAM interviews.

The tablets are referred to as "bupes" or orange "stop-signs" (Suboxone®). Although participants are probably referring to Suboxone®, they most commonly refer to the drug as "bupes." Participants felt the "high" was comparable to heroin. When asked to compare Vicodin® to "bupes," one participant said, "Well, they're [Suboxone®] definitely better in that you can eat a half of one and feel good all day long, and it's a lot stronger." This participant said he knew one or two people who had snorted "bupes" to get high. He said he knew of six to seven people who have used "bupes" to get high in Akron, Columbus, and Cleveland. The people he knows who have used "bupes" to get high in Columbus are heroin users. Participants said that "bupes" are often obtained from people who have them prescribed.

Participants indicated that buprenorphine was difficult to obtain and not readily available "on the streets." Although the misuse of buprenorphine appears to be very limited at this time, it is a potential new trend the OSAM network will continue to monitor. For more information on buprenorphine, see: <http://buprenorphine.samhsa.gov/>; and www.suboxone.com.

OSAM-O-GRAMS report key findings of the Ohio Substance Abuse Monitoring (OSAM) Network. Informants located throughout the state use qualitative and quantitative data to provide semiannual monitoring of substance abuse trends. The OSAM Network is funded by the Ohio Department of Alcohol and Drug Addiction Services by contract to Wright State University and by subcontract to the University of Akron. This OSAM-O-GRAM is based on a field report received June 2005.

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