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PSYCHIATRY

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PATIENT EDUCATION

Buprenorphine

Suboxone / Zubsolv / Sublocade / Brixadi / Other formulations

A guide for adults taking buprenorphine.
Follow the directions on your prescription and your provider's recommendations.

FOLLOW YOUR STARTING PLAN | KEEP OVERDOSE RESCUE MEDICINE NEARBY

Formulations: Treatment may use dissolving tablets or films, with or without naloxone, or long-acting clinician-administered injections. Brand strengths and injection regimens are not directly interchangeable.

What it is used for

Buprenorphine treats opioid use disorder by reducing withdrawal and cravings. Continued treatment helps reduce overdose risk. This sheet focuses on opioid use disorder.

Separate patch and buccal formulations are used for pain. They have different doses and instructions and are not substitutes for opioid-use-disorder treatment.

How it works

It partially activates opioid receptors and binds to them strongly. This can reduce withdrawal and limit effects of other opioids, but serious breathing problems are still possible, especially with other sedatives.

What to expect over time

The starting dose is adjusted to control withdrawal and cravings without excessive sedation. Ongoing treatment may last months or years; there is no universal deadline for stopping.

Taking your medication

- Follow the exact starting plan. Starting too soon after another opioid can trigger severe withdrawal; some situations require a specialized low-dose initiation plan.
- Let prescribed mouth-dissolving doses dissolve fully at the directed site. Do not chew or swallow them whole.
- After the dose dissolves, gently rinse the teeth and gums with water and swallow. Wait at least one hour before brushing.
- Do not double a missed dose. Contact your provider after several missed doses or a missed injection visit.

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Side effects and safety

Possible side effects

- Constipation, nausea, or headache
- Sweating, sleep changes, or drowsiness
- Mouth or dental problems with dissolving formulations
- Injection-site reactions with long-acting formulations

Keeping track of treatment

Some side effects resolve with time; others may require a change of medication. Discuss persistent or bothersome side effects with your provider.

Review cravings, withdrawal, sedation, constipation, and recovery goals. Liver tests and other monitoring are based on the formulation and clinical plan.

Keep dental appointments for mouth-dissolving treatment. Have an overdose-reversal medicine available and teach someone how to use it.

If you take too much

For a suspected overdose, call Poison Control at **1-800-222-1222** immediately, even if you feel well. Call 911 for a seizure, collapse, trouble breathing, or inability to wake.

Before you start

Discuss breathing problems, sleep apnea, liver disease, alcohol, sedatives, and all opioid use. Pregnancy is a reason to coordinate treatment promptly, not to stop on your own. Discuss breastfeeding with your provider.

Medicines and interactions

Review all your medications with your provider, including over-the-counter medicines and supplements. Have new medications checked before taking them.

Alcohol, benzodiazepines, sleep medicines, gabapentin, pregabalin, and other sedatives can dangerously slow breathing. Do not abruptly stop prescribed treatment; your providers should coordinate a safer plan.

Some antibiotics, antifungals, antivirals, and seizure medicines change buprenorphine levels. Tell surgical and dental teams before pain treatment.

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Living with your treatment

When to get help

Emergency symptoms. Call 911 for slow breathing or inability to wake. Give an available opioid-overdose reversal medicine according to its instructions and repeat if directed while waiting for help.

Prompt medical advice. Contact your provider for sudden severe withdrawal after a dose, jaundice, or excessive sedation. Do not manage a difficult induction by taking extra doses without instructions.

If you feel unsafe or have thoughts of self-harm, call 911 or go to an emergency department.

Your questions answered

Is the naloxone in Suboxone an overdose rescue?
No. It discourages misuse of that formulation; you still need a separate rescue medicine for an overdose.

Can I stop once cravings improve?
Consult with your provider. Stopping can bring back cravings and reduce opioid tolerance, increasing overdose risk if opioid use resumes.

Everyday tips

Keep every dose locked away; accidental exposure can be fatal to a child.

Discuss constipation early and maintain dental care.

Storage and safety

Keep medication in its labeled container, away from excess heat and moisture and out of reach of children and pets. Do not share it. Ask a pharmacy about disposal of unused medication.

Sources

FDA: Dental safety with mouth-dissolving buprenorphine (2022)
DailyMed: Buprenorphine/naloxone prescribing information

Educational handout; does not replace your prescription or provider's recommendations.