

Micro-dosing with buprenorphine to transfer from methadone to buprenorphine – a non-randomised open label clinical trial.

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Introduction: Micro-dosing, sometimes called the 'Bernese method', is gaining interest as a method of transitioning patients on full-agonist opioids to buprenorphine. However there is little consistency in key aspects, specifically up-titration of buprenorphine, or timing of cessation of methadone.

Method: This is a prospective, dual-arm, non-randomised clinical trial being undertaken at several sites across NSW. Participants on a stable dose of methadone wishing to transfer to buprenorphine will be invited to participate in the study. Participants will be able to choose either a micro-dose or standard of care transfer.

Results: Eight patients have so far been screened for the study. Six participants, three men and three women, have undergone transfer, all of which were in the micro-dosing arm. The mean age was 52 and the mean dose of methadone was 95mg (range: 45-120mg). Two participants completed transfer in the ambulatory setting – one on 120mg, the other on 45mg. The highest recorded COWS (16) was at day 6 for a participant on 120mg of methadone. The highest recorded SOWS (24) was at day 7 in a different participant on 120mg of methadone. All six participants reached the completion of the micro-dosing transfer protocol, and five of six remained on buprenorphine one week post transfer.

Discussion and Conclusions: Preliminary data suggests that patients can be transitioned safely from methadone to buprenorphine utilising the regimen outlined in our study. Participants may also be able to transfer in the ambulatory setting, but more data are required to assess for this.