

Depot buprenorphine treatment in pregnancy

Presenting authors: MARCIA SEQUEIRA^{1,2,3}, HESTER WILSON^{3,4}, ADRIAN DUNLOP^{1,2,3}

¹ Hunter New England Local Health District, Newcastle, Australia

² University of Newcastle & Hunter Medical Research Institute, NSW Australia

³ Drug & Alcohol Clinical Research & Improvement Network, NSW Health, Australia

⁴ Drug & Alcohol Services, South East Sydney Local Health District, Sydney, Australia

Introduction and issues: With over two decades of clinical experience and >2,000 cases of buprenorphine exposed pregnancies reported in the literature, the safety of sublingual buprenorphine in pregnancy is well established, however noting a lack of data on breastfeeding. Buprenorphine holds possible advantages over methadone including a possible less severe and/or intensive neonatal opioid withdrawal syndrome. Most of the excipients in Buvidal weekly or monthly and Sublocade are unlikely to expose neonates to risk, with potential concerns regarding NMP noted. Whilst a clinical trial is underway in the USA, there is a lack of data on the safety of depot buprenorphine in pregnancy. All depot buprenorphine formulations can be used in pregnancy in Australia, with a pregnancy risk/benefit approach suggested.

Methods: This paper will describe case reports/series in the literature (n=3) and describe 3 cases where depot buprenorphine was used as a treatment in pregnancy, outlining clinical challenges in using a new medication in this setting. Patient response, substance use, pregnancy and neonatal outcomes will be described.

Key findings: Whilst there is a lack of robust safety data on the use of depot buprenorphine in pregnancy, this long acting formulation has advantages for selected patients.

Implications for practice or policy: A state-wide/national approach to data collection on depot-buprenorphine exposed would assist clinicians understanding the role of depot buprenorphine in the management of opioid dependence in pregnancy.

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