



Please note an emerging shift in the clinical guidance regarding the use of buprenorphine for pregnant women with opioid use disorder from ***Project RESPECT, Substance Use Disorder in Pregnancy Treatment Clinic at Boston Medical Center***

Historically, for women with opioid use disorder who become pregnant while undergoing treatment with buprenorphine/naloxone, the recommendation has been to transition the woman from the combination product (i.e. Suboxone) to the buprenorphine monotherapy (i.e. Subutex) product during pregnancy. Reasons for this transition were to protect the fetus from any unnecessary exposure to naloxone and concern that if a woman were to inject the combination product she could experience precipitated withdrawal, due to the parenteral bioavailability of naloxone (1).

“Evidence is now building that newborn outcomes are not negatively affected by using the combination product during gestation and that pregnant women may not need to transition to the buprenorphine-only product during pregnancy to protect the fetus.” – SAMHSA, 2018 (2)

The Project RESPECT team at Boston Medical Center has recently announced a practice-wide clinical decision to switch from the buprenorphine monotherapy treatment to the buprenorphine/naloxone film formulation throughout the peri-partum period. This decision was based upon a growing body of evidence supporting the safety of the combination product to both the mother and fetus during pregnancy (3,4), along with recent shortages of buprenorphine monotherapy, increased risk of diversion with the monotherapy product (5),

Healthcare providers and pregnant women should come to a patient-centered decision with regard to the use of the buprenorphine/naloxone combination product during pregnancy. This clinical decision of choosing a formulation of buprenorphine should be based upon the benefit vs. the risk to the dyad.

- 1) Park, Meltzer-Brody, & Suzuki. (2012). Evaluation and management of opioid dependence in pregnancy. *Psychosomatics*, 53(5), 424-432.
- 2) SAMHSA. (2018). Clinical Guidance for Treating Pregnant and Parenting Women with Opioid Use Disorders and Their Infants. <https://store.samhsa.gov/shin/content//SMA18-5054c/SMA18-5054.pdf>
- 3) L. I. al et, "A Comparison of Buprenorphine + Naloxone to Buprenorphine and Methadone in the Treatment of Opioid Dependence during Pregnancy: Maternal and Neonat... - PubMed - NCBI." [Online]. Available: <https://www.ncbi.nlm.nih.gov/pubmed/23531704>. [Accessed: 30-May-2018].
- 4) W. S. al et, "Buprenorphine and naloxone compared with methadone treatment in pregnancy. - PubMed - NCBI." [Online]. Available: <https://www.ncbi.nlm.nih.gov/pubmed/25569005>. [Accessed: 30-May-2018].
- 5) J. H. al et, "Neonatal abstinence syndrome after methadone or buprenorphine exposure. - PubMed - NCBI." [Online]. Available: <https://www.ncbi.nlm.nih.gov/pubmed/21142534>. [Accessed: 30-May-2018].
- 6) Project Respect. (2018). Clinical Statement: Buprenorphine formulations and RESPECT's decision to switch from buprenorphine monotherapy (*Subutex*) to buprenorphine/naloxone formulation (*Suboxone*). June 2018.