

Fact sheets 2025

What is buprenorphine?

Buprenorphine is a prescription opioid with different formulations to treat opioid dependence and chronic pain. For the treatment of opioid dependence, it is taken as a regular dose to remove the need for other forms of the drug, including illicit opioids (e.g., heroin).

When used for opioid dependence, buprenorphine is often referred to as opioid agonist treatment (OAT) or opioid substitution treatment (OST). When used as OAT, it is prescribed as a sublingual film that is placed under the tongue to dissolve, or as a long-acting depot injection.

Those participating in a buprenorphine treatment program generally receive a daily dose of the drug, although for people who have been stable in treatment for a long time there is the option to collect medication weekly or even monthly.

Buprenorphine is prescribed by a doctor, and the size of the dose is determined according to the characteristics of the individual.

What are the effects?

People receiving OAT with buprenorphine are less likely to use additional or illicit opioids, have a reduced risk of infections, have better health overall, and are less likely to become involved in the criminal activities often associated with illicit drug use.

The side effects of buprenorphine may include:

- Constipation
- Headache
- Increased sweating
- Tiredness or drowsiness (especially immediately after a dose)
- Loss of appetite, nausea and vomiting
- Abdominal pain
- Skin rashes, itching or hives
- Tooth decay
- Changes to periods (menstruation)
- Lowered sex drive (men and women).

When taken as prescribed in an OAT program, buprenorphine generally has no severe long-term effects on health.

Buprenorphine

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New buprenorphine formulations

In sublingual film, buprenorphine is co-formulated with naloxone. If the contents of the film are injected, the naloxone is activated and triggers acute opioid withdrawal.

Depot buprenorphine is a new long-acting formulation that has recently become available. One injection lasts for anywhere between one week to one month depending on which injection is used. There are two depot buprenorphine products currently available in Australia: Buvidal® and Sublocade®. Both are available on the Pharmaceutical Benefits Scheme (PBS) under a \$100 opioid dependence listing.



Toxicity and overdose

As with other prescription opioids, buprenorphine can suppress respiration and potentially result in fatal overdose; however, buprenorphine is known to have less effect on respiration compared with other opioids. Buprenorphine can also cause sedation, although this effect is also thought to be weaker than that seen with other opioids such as methadone.

Dependence and withdrawal

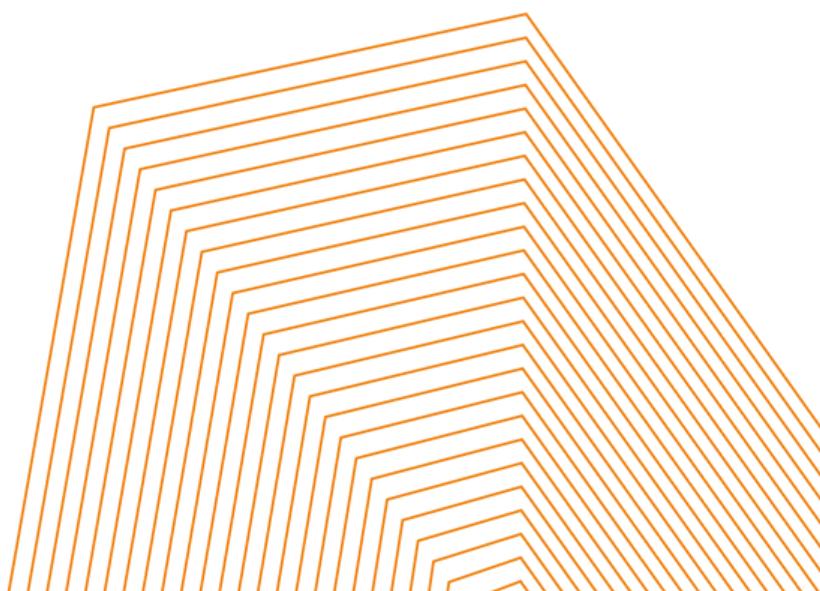
Withdrawal from long-term use of buprenorphine may produce some symptoms similar to those experienced through withdrawal from other opioids, such as heroin or morphine.

It is recommended that withdrawal from buprenorphine is achieved gradually under medical supervision to prevent discomfort and unpleasant effects for the person.

Withdrawal symptoms vary from person to person, but may include:

- Cold or flu-like symptoms
- Headache
- Sweating
- Aches and pains
- Difficulty sleeping
- Nausea
- Mood swings
- Loss of appetite.

These effects usually peak within two to five days but some may last a number of weeks.



Buprenorphine trends in Australia

According to the Australian Institute of Health and Welfare's National Opioid Pharmacotherapy Statistics Annual Data, approximately 53,300 people were receiving pharmacotherapy treatment on any given day across the country in 2023.

The median age of clients prescribed medicines such as buprenorphine in 2023 was 45 years (up from 38 years in 2011). This is consistent with the trend of an emergence of an ageing cohort of people who use drugs observed in drug treatment services and consequently, an ageing cohort in opioid pharmacotherapy treatment.

Non-medical use of buprenorphine was at its lowest point in 2022-23, according to the National Drug Strategy Household Survey, which recorded less than 10,000 people using it in this setting.

Emergency info

If you, or someone around you, is experiencing undesired or distressing psychological or physical symptoms from the intake of alcohol or other drugs please seek immediate medical attention.

If you need urgent help from ambulance services call Triple Zero (000). If a person has been mixing drugs with alcohol or other drugs, tell the paramedic exactly what has been taken.

Services

For free and confidential advice about alcohol and other drugs, call the National Alcohol and Other Drug hotline on 1800 250 015.

The hotline will automatically direct you to the Alcohol and Drug Information Service in your state or territory.

More resources

The Illicit Drug Reporting System (IDRS) is an Australian monitoring system run by the National Drug and Alcohol Research Centre (NDARC) at UNSW Sydney that identifies emerging trends of local and national concern in illicit drug markets. Visit unsw.to/IDRS

The Ecstasy and Related Drugs Reporting System (EDRS) is an Australian monitoring system run by NDARC that identifies emerging trends of local and national interest in ecstasy and related drug use, markets and harms. Visit unsw.to/EDRS

The Pocket Guide to Drugs and Health is a publication authored by experts from NDARC that provides information for health professionals on the impact of drug use. Visit silverbackpublishing.org/products/the-pocket-guide-to-drugs-and-health

The Australian Institute of Health and Welfare collects information on alcohol and tobacco consumption, and illicit drug use among the general population in Australia. Visit aihw.gov.au

The Australian Bureau of Statistics is Australia's national statistical agency, providing official statistics on a range of economic, social, population and environmental matters of importance to Australia. Visit abs.gov.au

Sources

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