

Partial Agonist, Full Barrier: A Case-Based Discussion on Challenges with Buprenorphine in Chronic Pain Management

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PRESENTATION INFO

Keywords:

partial agonist
challenges with buprenorphine
chronic pain management
buprenorphine

DOI:10.5055/bupe.24.rpj.1030
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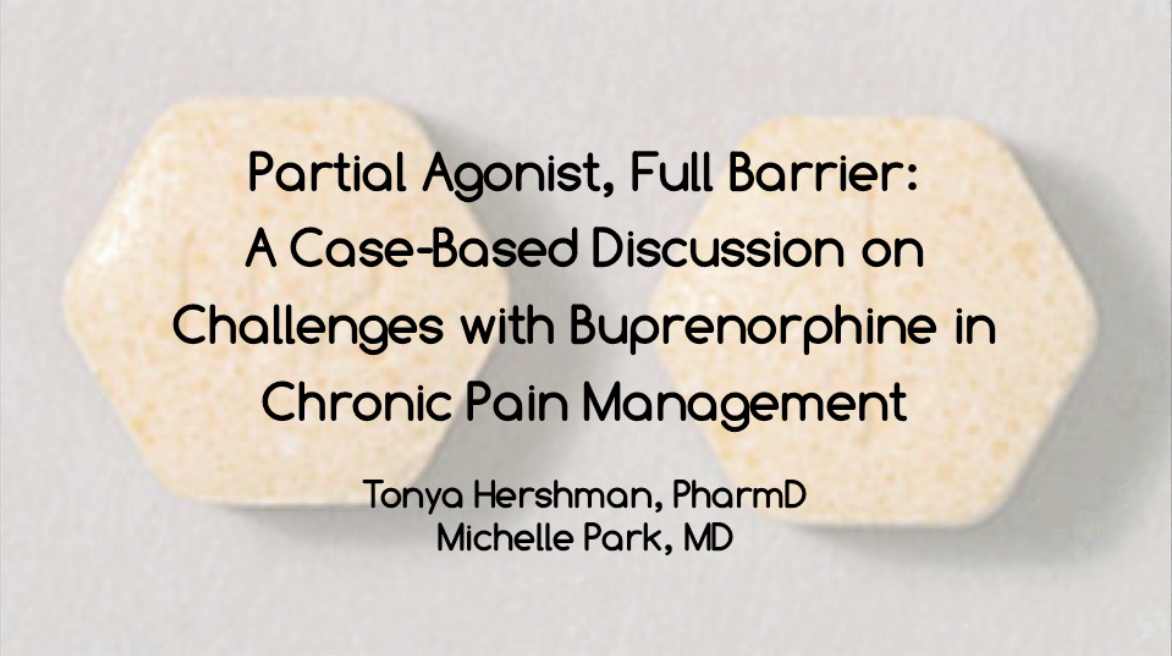
ABSTRACT

Background: More patients are on chronic opioids, as patients who were initially started on full agonist opioids for cancer-related pain are living longer. Despite doing well from the cancer standpoint, some patients have difficulty tapering off their opioids because they have been taking them for years. Given the potential complications of chronic full agonist opioids, it is important to manage these patients in a safer way. However, there are various challenges including lack of education for patients and healthcare professionals and lack of product availability. Many healthcare providers do not have much formal training on initiating, maintaining, and tapering the various buprenorphine products. These providers may not be able to effectively educate patients given the lack of education. Also, patients research these products on their own and are hesitant to try them because of misinformation. Even if patients are informed thoroughly about buprenorphine, there are barriers to obtaining them including insurance denial and lack of product availability at pharmacies. Given the above challenges, easily accessible best practices as well as avenues for healthcare professionals to educate and guide each other are needed.

Purpose/hypothesis: Given the potential complications of chronic full agonist opioids, it is important to manage these patients in a safer way. However, there are various challenges including lack of education for patients and healthcare professionals and lack of product availability.

Conclusions/applications: Given the above challenges, easily accessible best practices as well as avenues for healthcare professionals to educate and guide each other are needed.

Presentation link:
<https://bupe2021.com/10-5055-bupe-24-rp-1030>



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