

# **STANDARD OF PRACTICE**

## Prescribing Buprenorphine/Naloxone (Suboxone®)

YMCS-3.10 Medical Practice

Standards of Practice of the Yukon Medical Council ("the Council") are the minimum standards of professional behavior and ethical conduct expected of all physicians registered in the Yukon. Standards of Practice will be referenced in the management of complaints and in discipline.

### 1. Council's position

Buprenorphine/naloxone, currently marketed as Suboxone®, is a partial opioid agonist used to treat opioid use disorder (OUD). Available evidence indicates that sublingual buprenorphine/naloxone is as effective as methadone in treating OUD. However, it presents a better safety profile than other opioid agonists. As a partial opioid agonist, it is less likely to result in overdose, has fewer and less severe side effects, and a lower risk of drug interactions compared to full opioid agonists such as methadone. Suboxone® is recognized in all Canadian jurisdictions as a preferred first-line option (in the absence of contraindications) due to its improved safety profile and efficacy in treating OUD.

The Council supports lowering access barriers to this treatment and does not require physicians to get an OAT authorization who wish to prescribe buprenorphine/naloxone for patients with OUD.

### 2. Expectations

- 2.1 Physicians do not need an OAT authorization to prescribe buprenorphine/naloxone for patients with OUD.
- 2.2 The Council expects that all physicians who wish to use buprenorphine/naloxone to treat patients with opioid use disorder will have the requisite knowledge about its intended impacts, side effects and role in addiction treatment.
- 2.3 Physicians who prescribe buprenorphine/naloxone must comply with all relevant standards of practice, including, but not limited to <u>Prescriptions</u>, and <u>Safe Prescribing of Drugs with Potential</u> <u>for Misuse/Diversion</u>
- 2.4 Physicians should refer to the following for additional guidance:
  - Yukon Guide to the Management of Opioid Use Disorder
  - Prescribing Suboxone in the outpatient setting: A quick reference guide to in-office induction
  - British Columbia Centre on Substance Use (BCCSU)'s <u>Guideline for the Clinical</u> <u>Management of Opioid Use Diorder</u>



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### 3. Recommended training

3.1 Completion of the Opioid Agonist Treatment Support Program for prescribing

buprenorphine/naloxone, available online through the BCCSU, is highly recommended. This

program is free and CME-accredited (MAINPRO and MOC).

### British Columbia Centre on Substance Use (BCCSU)

Title: Provincial Opioid Addiction Treatment Support Program

Type: Online training

Description: This comprehensive training program includes education and training for prescribing opioid agonist treatments, which includes buprenorphine/naloxone, methadone, slow-release oral morphine, and injectable opioid agonist treatments. Current streams available:

- Oral opioid agonist treatment in community settings 8-10 hours
- Oral opioid agonist treatment in acute care settings 5-6 hours
- Buprenorphine/naloxone only 4-5 hours
- Injectable opioid agonist treatment 2 hours
- 3.2 The Council also recommends the following online courses:

### Centre for Addiction and Mental Health (CAMH)

Title: Buprenorphine-naloxone Treatment for Opioid Use Disorder

Type: 6-week online course

Description: This course aims to present a framework for providing maintenance treatment for opioid use disorder with buprenorphine/naloxone, including its use in a primary care setting.

#### Indivior

Title: Suboxone® Education Program

Type: Online course



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Description: The Suboxone Education Program was developed to provide Canadian healthcare professionals with the prerequisite education required to treat opioid use disorder with Suboxone®.

3.3 Physicians may also consider the following training opportunities:

- A one-day clinical observership of an opioid use disorder practice and would be of great value for new prescribers.
- Ongoing continuing medical education in opioid use disorder treatment may be helpful as new approaches and research evolve to ensure the most appropriate care is being provided.

#### 4. Relevant Standards of Practice, Policies and Guidelines

YMCS-1.8 Prescriptions

YMCS-3.7 Opioid Agonist Treatment (OAT)

YMCS-3.8 Safe Prescribing of Drugs with the Potential of Misuse/Diversion

### 5. Standard of Practice History

Version	Description	YMC Meeting Minute Approval	In Force Date
Original	Creation of policy	2022.04.22	2022.05.01