

Information for Adult Patients who are Prescribed

# **Buprenorphine Patch**

(Also called Butec or Butrans Patch)

**For the Treatment of Pain**



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This information is not intended to replace your doctor's advice. We advise you to read the manufacturer's information for patients, which your pharmacist will supply with your medicine. Please keep all medicines away from children, vulnerable adults or pets.

## **What is a buprenorphine patch?**

A buprenorphine patch is a patch that contains a medicine called buprenorphine. Buprenorphine is a member of the morphine family of medications, which are also called opioids. Other names are opiates or narcotics. Heroin also belongs to this family.

## **How does it work?**

The opioid medication in the patch (buprenorphine) provides pain relief by acting on areas in the spinal cord and brain to block the transmission of pain signals.

## **What can I expect?**

It is rarely possible to help long-term pain completely by using opioids alone. In trials, most medicines for long-term pain provide on average a 30% reduction in pain. Some pains do not seem to respond to any painkilling medicines.

This is because long-term pain arises through many different mechanisms and most medicines only work for one of these. You can also get used to them, so that you need more and more to have the same effect. This is called building up tolerance. However, we know that taking high doses of opioid medicines for long periods is unlikely to give better pain relief and they are associated with a number of serious side effects.

The aim of treatment is to reduce your pain enough to help you get on with your life. Medicines work best if you combine them with other ways of managing symptoms, such as regular activity and exercise and doing things that are satisfying or enjoyable, such as work or study, and social activities. Setting goals to help improve your life is an important way to see if these medicines are helping. You should discuss, with your doctor, what you expect from the treatment.

## About buprenorphine patches

You wear a buprenorphine patch for a week. The opioid painkiller in the buprenorphine patch is released slowly into your body.

Your first buprenorphine patch may take up to two days to begin to have any noticeable effect but further patches will maintain this effect. This means that you can maintain the reduction in your pain as long as you remember to change your patch weekly.

Try to change your patch at the same time of day.

It is unusual to get complete pain relief from opioids (like buprenorphine patches). Your doctor, nurse or community pharmacist will find the best way to manage your pain and adjust the dose to give you pain relief most of the time. They will also try to minimise the side effects.

If you do not feel any improvement in your pain after 6-8 weeks from starting, or if the side effects interfere with your life, you should discuss this with your doctor, nurse or community pharmacist. **You should not stop applying the patches or change the dose without discussing this with them first.**

## When should I apply my buprenorphine patch?

You should only use each patch once and change your patch on the same day every week at the same time. If you are using more than one patch, you should change all your patches on the same day.

If you forget to change your patch, then change it as soon as you remember. Do not use the patch if it looks damaged and never divide or cut the patch.

## How do I apply the buprenorphine patch?

Remember to remove the previous patch. Before applying the new patch, make sure your skin is completely dry and clean. If you need to clean the skin, use only cold water.

Apply the patch to a flat part of your upper body or upper arm, taking care to avoid sensitive areas or areas that you move a lot. The skin must be free of cuts, spots or other skin blemishes, and should not be hairy. If there is hair, do not shave it as this will irritate the skin. Instead, cut the hair as close to the skin as possible.

Make sure that the patch will be stuck on a part of the body that will be covered by loose clothing. Other points to remember are:

- Do not stick a patch on the same place twice in a row. You should allow several weeks to pass before you put a new patch on the same area of skin.
- Do not stick a patch on straight after a hot bath or shower. Wait until the skin is completely dry and cool.
- Remove the patch from the pouch and peel off the protective liner. Try not to touch the sticky side of the patch.
- Press the patch onto the skin with the palm of the hand and hold for at least 30 seconds, making sure it sticks well, particularly at the edges.
- Wash your hands when you have finished applying your patch.
- Avoid using hot water bottles and electric blankets as they may increase the side effects.
- **We advise you to read the information sheet included with your medication. This will give you more information and tell you on how to dispose of the patches.**

## What are the possible side effects?

The side effects of a buprenorphine patch are the same as the side effects for all opioid medications and some of these side effects are shown in the table below.

Short Term Side Effects	Long Term Side Effects
Dizziness	Tolerance
Nausea and vomiting	Withdrawal
Sleepiness	Weight gain
Confusion	Reduced fertility
Itching	Erectile dysfunction
	Increased levels of pain
	Depression
	Breathing difficulty (see below)
	Dependence
	Addiction
	Lack of sex drive
	Irregular periods
	Reduced immunity
	Osteoporosis
	Constipation

When you first start taking opioids you can get some side effects, which usually stop after a few days. If these side effects last more than a few days, your GP may prescribe some other medicines to help, such as anti-sickness tablets. Constipation is a common side effect, which is unlikely to stop after a few days. You may need to try a laxative to treat the constipation.

Recent medical evidence suggests that the long-term risks to your health increase significantly when prescribed opioids at high doses for a long period of time. They can have many long term side effects that can affect your body in a number of ways (see above).

If you are overweight and snore heavily, opioids can make breathing difficult at night. If you have a condition called obstructive sleep apnoea, it may not be safe for you to take opioids.

Tolerance means that you get decreasing pain relief with time. This means that your body has become used to the pain-relieving effect of the medicine.

You can also become dependant on your opioid medication, in that you need to take the medicine to feel 'normal'. This means that if you stop taking the medication suddenly, or lower the dose too quickly, you can get symptoms of withdrawal.

Withdrawal symptoms include: tiredness, sweating, runny nose, stomach cramps, diarrhoea, aching muscles and increased pain. If you run out of medicine, you can experience the same symptoms.

It can be very difficult to know whether or not an opioid is actually relieving your pain, particularly when it is a slow release opioid, as the pain relief it provides is often gradual.

Some people conclude that, because they feel unwell if they miss a couple of doses or when they stop taking these medicines suddenly, that the medicine must have been working. However, because these medications can cause dependence, it may be that they are simply experiencing withdrawal.

If you want to stop taking any medicines that you currently are taking, please see the section below on stopping your medication.

If you are worried about any of these problems, please discuss these with your doctor, nurse or community pharmacist. They will be able to tell you whether you are at risk of developing these problems.

## **Can I take this medication long term?**

Buprenorphine patches can have a positive benefit for some people with long-term pain. They can also have serious side effects if they are not providing adequate pain relief or you are not taking them as prescribed. It is important to consider the risks (given above) and benefits of continued opioid medication with your community pharmacist on a regular basis. If this does not happen ask your GP.

If you want to try reducing your dose, you should discuss this with your doctor and bring the dose down slowly.

Many people find that after a few months they can reduce their Buprenorphine dose without their pain increasing. Many individuals are able to gradually reduce their dose and find that their pain is no worse. As fewer side effects are experienced, quality and enjoyment of life can improve. All of this contributes to greater physical fitness.

## **What about addiction?**

We do not know exactly how many people get addicted when they are taking this opioid medication for pain relief. People who are addicted to opioids can:

- Feel out of control about how much medicine they take or how often they take it.
- Crave the drug.
- Continue to take the drug even when it has a negative effect on their physical and/or mental health, social and work life.

It is more common if you have been addicted to opioids (including heroin) or to other drugs or alcohol before. Addiction may be more common in people with severe depression or anxiety.

This does not mean that if you have had an addiction problem before, or you are very depressed and anxious you will become addicted. It only means that you are more likely to become addicted than someone who has not had these problems.

Therefore for your own safety it is important that you highlight this to your GP or Pain Specialist.

## **What about work and activity?**

Once you are on a regular, steady dose, you should be able to live a normal life. If your medication makes you feel unsafe at work or at home, you should let your employer and your family know. You need to speak to your doctor, nurse or community pharmacist if your medication is causing you to have problems with every day activities.



## Can I drive if I am using buprenorphine patches?

The law in Scotland allows you to drive if you are taking prescribed opioid medicines, like buprenorphine patches, in accordance with the instructions from your doctor (including what they advise you about driving safely). Your ability to drive may be affected by tiredness, your pain and other medicines you are taking in addition to opioids.

- **You should never drive if you feel unsafe or your ability has been impaired.**
- **You are responsible for making sure you are safe each time you drive.**
- **It remains an offence to drive while impaired by your medications.**

The law on drugs and driving in England and Wales changed in 2015. This affects anyone crossing the border. If your driving is impaired for any reason, including taking medicines, it is illegal to drive. It is also now illegal to drive when you are taking opioid medicines without them being prescribed, **even if you are not impaired.**

If a person is taking more than 220mg of morphine a day they are likely to have a blood level of the medicine which impairs them nearly as much as someone who is over the legal limit of alcohol.

All opioid medicines have the potential to impair driving and your doctor will advise whether the dose of opioid you are taking is likely to impair you. If you are taking a high dose of opioid your doctor will advise you that you are probably not safe to drive and will document this in your medical notes.

## Can I drink alcohol?

Alcohol and buprenorphine patches together cause sleepiness and poor concentration. You should **avoid alcohol completely** when you first start using buprenorphine patches or when your dose has just been increased. You should also avoid alcohol if you are going to drive or operate machinery.

Once you are on a stable dose of buprenorphine patches, you should be able to drink modest amounts of alcohol, but only if the drowsiness has stopped. You must also take care with alcohol if you are also prescribed other medications that can cause sleepiness and poor concentration.

## What if I am pregnant?

If you become pregnant while you are taking this medicine, you should talk to your midwife or doctor. **You should not suddenly stop using this medicine.**

Buprenorphine patches may affect your unborn child, such as causing it to have breathing difficulties at birth or symptoms of withdrawal (please see above). These symptoms can vary from baby to baby. Your baby may need specialist help, usually only for a short time.

## What if I am planning a family?

You need to talk to your doctor before planning pregnancy. In some cases, you may need to stop taking this medication. In others, you can continue under medical supervision.

## **Will I need to use buprenorphine patches forever?**

Some people take buprenorphine patches for many years. While opioids can have a positive benefit for some people with long-term pain, they can also have serious side effects. You therefore should consider stopping taking them if they are not providing adequate pain relief.

## **What should I tell the doctor?**

- Your medical history
- Other prescribed medications or herbal medicines.
- Medicines you buy at the supermarket or chemist.
- If you have any allergies to any medicines.
- If you are pregnant or breast feeding, or if you are planning to become pregnant in the future.
- If you have a kidney problem.
- Your drinking and smoking habits.
- If you have, or have had, a history of excessive alcohol use, recreational drug use or addiction to prescribed or over-the-counter medication.
- If you are currently using, or have used heroin or other illegal drugs in the past.
- This information will not affect your treatment but will help the team treat you safely and effectively.

## Stopping Medications

If your GP, Community Pharmacist or NHS 24 decide that you should stop taking this medicine, do not suddenly stop taking it. You should gradually reduce the dose.

If you stop this drug suddenly you may experience withdrawal effects. These symptoms are more likely to occur if people have been on this medicine for more than a few months.

If you want to try reducing your dose, you should discuss this with your doctor and bring the dose down slowly.

### Remember!

- **Don't run out of medicine.**
- **Ask for a repeat prescription before your medicine is finished.**
- **If you have any questions about this medicine please contact your GP or community pharmacist.**

For more information about managing chronic pain, please see [www.paindata.org](http://www.paindata.org)

Much of the information in this document has been reproduced from the Faculty of Pain Medicine's web-based resource "Opioids Aware" which can be accessed here: <http://www.fpm.ac.uk/faculty-of-pain-medicine/opioids-aware>

Opioids Aware has been developed by UK healthcare professionals and policymakers.