

PATIENT INFORMATION - Sublocade® Injections

WHAT IS SUBLOCADE®?

Sublocade is a brand name for a **long-acting injectable** form of buprenorphine used to treat opioid use disorder. Sublocade is given to those who started treatment taking a sublingual form of buprenorphine like Suboxone. Sublocade injections are meant to control symptoms of withdrawal and minimize the risk of return-to-use of illicit or dangerous opioids like heroin or fentanyl. Sublocade is generally **given monthly**.

What are the Benefits of Receiving Sublocade Injections?

- Injections replace the need to take daily medication.
- There is **no risk of forgetting to take your medication** or losing your medication.
- Taking buprenorphine sublingually is time-consuming and can be inconvenient. Monthly injections improve adherence to treatment plans.
- Injections reduce the risk of dental decay that is associated with sublingual buprenorphine.
- Injections may provide **higher blood buprenorphine levels** and improved blocking of drug-liking relative to sublingual buprenorphine.

What are the Risks of Receiving Sublocade Injections?

- You should have already started taking a sublingual form of buprenorphine and ruled out significant adverse effects before starting Sublocade since it cannot be removed easily from your body.
- In rare cases, Sublocade, as with any buprenorphine product, can harm your liver. You should receive periodic blood tests to **check your liver function**.
- Ask your provider before receiving Sublocade if you are pregnant or breastfeeding. Tell your provider if you notice drowsiness or slow breathing in the nursing baby.
- Sublocade cannot be immediately discontinued and may block the effect of opioid pain-relieving medications which could complicate management of acute pain.
- Your body will be **more sensitive to opioids** if you use them in the future. Using the same amount that you used previously could lead to overdose or death.

How is Sublocade Administered?

- Sublocade is **injected under the skin** of the abdomen once per month (at least 26 days between injections).
- After each injection, you may see or feel a small lump under your skin where the medicine was injected. This could last for several weeks, but the lump should gradually get smaller. Avoid rubbing or massaging the lump or wearing tight clothing over the area.





Nurse Care Team

If you have a reaction or a side effect you believe may be due to Sublocade, you can reach out to a nurse <u>at any time</u> (available 24/7) by calling 1-877-522-1275 (press #1, then #6).

WHAT TO WATCH FOR

We recommend that you call 911 or go to the nearest Emergency Department for any of the following symptoms while receiving Sublocade injections.

- Weak or shallow breathing, or breathing that stops during sleep
- Severe drowsiness or dizziness, or loss of coordination
- Pain, redness, itching, or skin changes where the injection was given
- Opioid withdrawal symptoms like shivering, goose bumps, increased sweating, diarrhea, or vomiting
- Indications of liver problems like stomach pain, dark urine, or jaundice (yellowing of the skin or eyes)
- Indications of low cortisol levels like nausea, loss of appetite, dizziness, or worsening tiredness or weakness
- Agitation, hallucinations, fever, shivering, fast heart rate, muscle stiffness, or twitching

REMINDERS

- Check before starting new medications. Speak with your provider before starting any new medication while receiving Sublocade injections.
- Avoid driving or hazardous activity until you know how this medicine will affect you.
- Use Narcan or Kloxxado in the event of an overdose. First, call 911. Then, gently insert the tip of the nozzle into one nostril until your fingers on either side of the nozzle are against the bottom of the person's nose. Press the plunger firmly to give the dose of the nasal spray. Remove the nasal spray from the nostril after giving the dose. Repeat every 2-3 minutes until the person responds.
- **Drug-drug interactions can be dangerous.** The use of opioids, including buprenorphine, with alcohol or sedatives such as benzodiazepines (Xanax, Ativan, Valium), nerve pain medications (Lyrica, Gabapentin), and prescription sleep medications (Ambien, Lunesta) may increase the risk of respiratory depression, which can be fatal.