

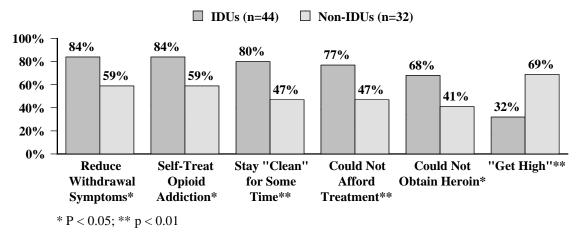
A Weekly FAX from the Center for Substance Abuse Research

University of Maryland, College Park

Small Rhode Island Study Finds IDUs More Likely to Use Diverted Buprenorphine/Naloxone to Self-Medicate; Non-IDUs More Likely to Use to Get High

The motivation for using diverted buprenorphine/naloxone varies significantly between injecting drug users (IDUs) and non-IDUs, according to data from a study of self-reported adult opioid users in Providence, Rhode Island. Overall, approximately three-fourths (76%) of opioid users reported obtaining buprenorphine/naloxone illicitly. IDUs were significantly more likely than non-IDUs to report using diverted buprenorphine/naloxone for self-medication reasons, such as to reduce withdrawal symptoms or to self-treat opioid addiction (see figure below). In contrast, non-IDUs were significantly more likely than IDUs to report using diverted buprenorphine/naloxone to get high (69% vs. 32%). The authors suggest that these differences may be because IDUs have a greater severity of dependence—they were more likely to report high frequency opioid use, a history of enrollment in methadone maintenance treatment, and utilization of detoxification services. The authors also note that "The number of opioid users in our sample who reported having ever used buprenorphine/naloxone to 'get high' is surprising, given that buprenorphine/naloxone is a partial opioid agonist that is not expected to produce euphoria in regular users with a tolerance to opioids. It is possible that some participants, particularly noninjecting opioid users, did not use opioids regularly enough to develop significant tolerance" (p. 5).

Motivation for Using Diverted Buprenorphine/Naloxone Among Opioid Users, Rhode Island, 2009



EDITOR'S NOTE: While these findings are limited by the fact that this study used a small convenience sample of opioid users from one area of Providence, we believe the results are noteworthy because they are the first to suggest that individual drug use patterns and the severity of opioid dependence may be related to an individual's motivation for using diverted buprenorphine.

NOTE: Adults who self-reported opioid use in the previous 30 days were recruited in Providence between August and November 2009 from a fixed-site syringe exchange program and by outreach workers recruiting from areas they identified to have high concentrations of active opioid users.

SOURCE: Adapted by CESAR from data from Bazazi, A.R., Yokell, M., Fu, J.J., Rich, J.D., Zaller, N.D., "Illicit Use of Buprenorphine/Naloxone Among Injecting and Noninjecting Opioid Users," *Journal of Addiction Medicine*, Published Ahead-of-Print, 2011. For more information, contact Dr. Nickolas Zaller at nzaller@lifespan.org.