

PEARLS Practical Evidence About Real Life Situations

## Buprenorphine is effective maintenance treatment for heroin dependence

Clinical question	How effective is buprenorphine in the maintenance treatment of heroin dependence?
Bottom line	Buprenorphine at medium (8-15mg) and high doses (16mg) can reduce heroin use compared with placebo, although it is less effective than methadone, especially if methadone is prescribed at adequate dose levels of between 60mg and 120mg per day.
Caveat	Buprenorphine given in flexible (variable) doses was statistically significantly less effective than methadone in retaining patients in treatment, but no different in suppression of opioid use for those who remained in treatment.
Context	Buprenorphine is a partial opioid agonist which is not as powerful as heroin or methadone. It has a longer half-life (24-37 hours) than methadone (22-25 hours), and can therefore be taken once every 2 days. Buprenorphine is offered alongside methadone for maintenance treatment of heroin dependence in programmes throughout the UK, Europe and Australia, but not yet in New Zealand.
Cochrane Systematic Review	Mattick RP et al. Buprenorphine maintenance versus placebo or methadone maintenance for opioid dependence. Cochrane Reviews 2008, Issue 2. Article No. CD002207. DOI: 10.1002/14651858. CD002207.pub3. This review contains 24 studies involving 4497 participants.
PEARLS 111, August 2008, written by Brian R McAvoy	
(first published in New Zealand Doctor, 29 December 2008)	

[References]

CARE FIELD

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are funded by the New Zealand Guidelines Group.

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