

# EXTENDED-RELEASE INJECTABLE BUPRENORPHINE FORMULATION SELECTION TOOL

BRIXADI®	Considerations	SUBLOCADE®
<p>Patient must tolerate at least one dose of 4 mg transmucosal buprenorphine without precipitated withdrawal.</p> <p><i>May provide a more efficient initiation pathway. 4 mg dose may appeal to those on lower doses or not currently taking TM buprenorphine.</i></p>	<p><b>Sublingual Buprenorphine Requirements Prior to Initiation</b></p>	<p>Patient must tolerate <math>\geq 8</math> mg transmucosal buprenorphine daily for a minimum of 7 days.</p> <p><i>Need for <math>\geq 8</math> mg daily dose and a minimum dosing period of 7 days may be a barrier to initiation.</i></p>
<ul style="list-style-type: none"> <li>• Weekly*: 8mg/0.16mL, 16mg/0.32mL, 24mg/0.48mL, 32mg/0.64mL</li> <li>• Monthly: 64mg/0.18mL, 96mg/0.27mL, 128mg/0.36mL</li> </ul> <p>*Weekly doses cannot be combined to yield an equivalent monthly dose.</p> <p><i>Greater dosing and frequency flexibility. Week 1 titration for BRIXADI® weekly in buprenorphine-naïve patients requires 2-3 injections.</i></p>	<p><b>Dosing</b></p>	<p>2 monthly dosing options available:</p> <ul style="list-style-type: none"> <li>• 100mg/0.5mL</li> <li>• 300mg/1.5mL</li> </ul> <p><i>Limited dosing options. Titration schedule is straightforward.</i></p>
<ul style="list-style-type: none"> <li>• Half-life: <ul style="list-style-type: none"> <li>◦ Weekly: 3-5 days</li> <li>◦ Monthly: 19-26 days</li> </ul> </li> <li>• Detectable levels after steady-state achieved: <ul style="list-style-type: none"> <li>◦ Weekly: 1 month</li> <li>◦ Monthly: 4 months</li> </ul> </li> </ul> <p><i>Shorter lasting and lower sustained plasma levels.</i></p>	<p><b>Pharmacokinetics</b></p>	<ul style="list-style-type: none"> <li>• Half-life: <ul style="list-style-type: none"> <li>◦ 43-60 days</li> </ul> </li> <li>• Detectable levels after steady-state achieved: <ul style="list-style-type: none"> <li>◦ <math>\geq 12</math> months in plasma and urine</li> </ul> </li> </ul> <p><i>Longer lasting and higher sustained plasma levels may be helpful if monthly adherence is a concern.</i></p>
<p>Subcutaneous injection into the abdomen, thigh, buttock, and upper arm*.</p> <p>*Upper arm site is associated with approximately 10% lower plasma levels than other sites.</p> <p><i>More injection site options beneficial for those with limited abdominal fat or seeking a less visible site than abdomen.</i></p>	<p><b>Site(s) of Administration</b></p>	<p>Subcutaneous injection into the abdomen only.</p> <p><i>Adequate adipose tissue required for abdominal administration.</i></p>
<p>23-gauge, 1/2-inch needle</p> <p><i>Smaller and thinner needle, along with less volume, may result in less painful injections.</i></p>	<p><b>Needle Size</b></p>	<p>19-gauge, 5/8-inch needle</p> <p><i>100 mg dose is typically better tolerated due to smaller needle and less volume vs 300 mg.</i></p>
<p>Depot cannot be removed once medication is administered.</p> <p><i>Depots are typically small and dissolve within a few weeks.</i></p>	<p><b>Depot Removal</b></p>	<p>Depot can be surgically removed within 14 days of administration.</p> <p><i>Removal option for depot in case of severe injection site reactions or intolerance.</i></p>
<ul style="list-style-type: none"> <li>• Latex allergy: BRIXADI® needle cap synthetically derived from natural rubber latex.</li> <li>• Soybean allergy: BRIXADI® contains soybean.</li> </ul>	<p><b>Allergy Considerations</b></p>	<p>No known allergies associated with SUBLOCADE® ingredients.</p>
<p>Use with caution; ongoing clinical trial (<a href="#">MOMs study</a>) evaluating use of BRIXADI® in pregnancy. Avoid injections in the abdomen during pregnancy.</p>	<p><b>Use in Pregnancy</b></p>	<p>Use with caution; SUBLOCADE® has not been studied for use in pregnancy.</p>