# www.palliativedrugs.com survey

# Buprenorphine - What is your experience?

### May-October 2008

# Number of responses = 209

1) Do you use buprenorphine for cancer pain?		er pain? (yes_no)
answer	votes	% of vote
Yes	152	73%
No	57	27%

2) Do you use buprenorphine for non-cancer pain?		ancer pain? (yes_no)
answer	votes	% of vote
Yes	140	67%
No	68	33%

#### 3) Which routes do you administer buprenorphine for cancer pain? (many\_of)

answer	votes	% of voters
Sublingual	42	20
Transdermal	167	80
Subcutaneous	5	2
Intramuscular	4	2
Intravenous	1	0

#### 4) For patients with cancer pain, in what situations do you use buprenorphine? (many\_of)

answer	votes	% of voters
First line pain relief	28	13
Patients intolerant to other opioids (e.g. nausea, sedation, pruritus)	101	48
Opioid-induced hyperalgesia		13
Patients for whom a transdermal system has advantages (e.g. difficulty swallowing tablets)		63
Renal impairment or failure		33
Other (please give further details via e-mail)		5

One email response: Has appeared to improve cholestatic itch and pain.

#### 5) Have you ever observed a ceiling effect for analgesia with buprenorphine? (yes\_no)

answer	votes	% of vote
Yes	16	8%
No	168	80%

# 6) Have you seen respiratory depression with buprenorphine that has required naloxone? (yes\_no)

answer	votes	% of vote
Yes	6	3%
No	182	87%

Generally, respondents were divided on whether they found buprenorphine useful. Most of the comments were related to buprenorphine patches and the perceived advantages and disadvantages, the more common ones were:

# Advantages of buprenorphine patches Useful in:

- frail, elderly patients
- those with renal impairment
- opioid naïve patients requiring a lower dose of opioids than the 12microgram/h fentanyl patch
- those who cannot tolerate codeine or other weak opioids
- · those with poor compliance or large tablet load
- mild stable pain
- community because of once weekly patch change.

#### Disadvantages of buprenorphine patches

- local skin reaction very common and often severe enough to necessitate stopping therapy
- high incidence of nausea
- difficult to convert to alternative opioids
- difficult to calculate breakthrough analgesia.