

# CHALLENGES AND BEST PRACTICES IN BUPRENORPHINE IMPLEMENTATION FOR TREATMENT OF OPIOID USE DISORDER IN NEW YORK STATE

---



Sharon Stancliff, MD

Associate Medical Director for Harm Reduction in Health Care  
Office of the Medical Director, AIDS Institute  
New York State Department of Health (NYSDOH)

Robert Kent

General Counsel

New York State Office of  
Alcoholism and Substance Abuse Services (OASAS)



# CONFLICT OF INTEREST DISCLOSURE

## SHARON STANCLIFF, MD

No conflict of interest





# CONFLICT OF INTEREST DISCLOSURE

## ROBERT KENT

No conflict of interest





# INTRODUCTION

- In 2016, there were nearly 9 deaths/day associated with opioids in New York State
- Improved access to pharmacotherapy is essential for combatting this morbidity and improve lives
- Challenges and misconceptions with prescribing buprenorphine exist among clinicians



# INTRODUCTION

- The *Implementing Transmucosal Buprenorphine for Treatment of Opioid Use Disorder* best practice document was designed to fill information gaps and provide guidance
- It is endorsed by Commissioners of both OASAS and NYSDOH
- Find the Commissioners' letter and best practice document at [www.health.ny.gov/diseases/aids](http://www.health.ny.gov/diseases/aids)





## ***Implementing Transmucosal Buprenorphine for Treatment of Opioid Use Disorder***

- **Topics**
- **Key Points**
- **Best Practices**





# COUNSELING

## Key Points

- Federal regulations require waiver applicants attest to their capacity to refer patients for counseling and other ancillary services
- It does not obligate prescribers to ensure that patients participate in counseling
- Substance Abuse and Mental Health Services Administration acknowledges that medical management has an intrinsic psychosocial component

## NYS Best Practices

- Prescribers should ensure continued access to buprenorphine even in the absence of counseling
- Prescribers should ensure immediate and continued access to buprenorphine for patients who may be unwilling or unable to participate in counseling or other formal psychosocial services





# POLYSUBSTANCE USE

## Key Points

- Misconception → prescribing buprenorphine is contrary to standard of care when patients continue to use other opioids or other drugs
- In 2017, the FDA stated that buprenorphine should not be withheld from these patients as “the harm caused by untreated opioid addiction can outweigh these risks.”
- Maintenance with buprenorphine can reduce morbidity/mortality even when drugs other than opioids are being used and in the presence of relapse to opioid use

## NYS Best Practices

- Prescribers should not discharge patients due to use of prescribed or unprescribed substances including cannabis and benzodiazepines
- Prescribers should ensure continued access to buprenorphine in the presence of other drug use



# INITIAL ASSESSMENT

## **Key Point**

- An extensive assessment is not necessary

## **NYS Best Practices**

- Assess the patient's history to establish presence of OUD, other drug use, history of drug treatment and significant medical and psychiatric history
- Conduct a focused physical examination, refer for a physical exam, or get a record of a recent one
- Order relevant laboratory tests – but results are not required to initiate prescribing
- Check the state prescription drug monitoring program database for other controlled substances
- Initiate prescribing: SAMHSA guidance now supports both in-office and unsupervised induction



# DIVERSION

## **Key Point**

- An extensive assessment is not necessary

## **NYS Best Practices**

- Assess the patient's history to establish presence of OUD, other drug use, history of drug treatment and significant medical and psychiatric history
- Conduct a focused physical examination, refer for a physical exam, or get a record of a recent one
- Order relevant laboratory tests – but results are not required to initiate prescribing
- Check the state prescription drug monitoring program database
- Initiate prescribing: SAMHSA guidance now supports both in-office and unsupervised induction



# DURATION OF TREATMENT

## Key Point

- Treatment with buprenorphine should continue for as long as the patient is benefiting. Risk of return to illicit opioid use is high when treatment is discontinued

## NYS Best Practices

- If care is to be terminated for any reason, the prescriber should offer the patient a transfer to an alternative prescriber allowing the patient to continue medication without interruption
- Patients, particularly those opting to stop medication, should also be referred to harm reduction, peer, or other supportive services



## **Conclusions and Next Steps**



# CONCLUSIONS

- NYS has recognized through provider feedback that there are common challenges to prescribing buprenorphine.
- The collection of NYS best practices addresses these challenges by offering providers clear and concise information based on:
  - up-to-date science
  - regulation
  - experience
- NYS encourages waived buprenorphine prescribers to start prescribing buprenorphine and if already prescribing to increase the number of patients under care.



# NEXT STEPS

- The NYS DOH AIDS Institute Clinical Guidelines program is updating its opioid-related clinical guidelines to reflect the updated clinical evidence
- You will be able to find it at [www.hivguidelines.org](http://www.hivguidelines.org)

NEW YORK STATE DEPARTMENT OF HEALTH AIDS INSTITUTE HIV · HCV · STIs · SUBSTANCE USE · LGBT HEALTH QUALITY OF CARE

CLINICAL GUIDELINES PROGRAM

HOME | ABOUT US | MAIL LIST | POCKET GUIDES & SLIDES

Search...



- HIV Testing and Acute HIV
- ART
- Primary HIV Care
- Perinatal HIV Care
- PrEP
- PEP
- Hepatitis Care
- STIs
- Substance Use





# QUESTIONS?

## Thank You

Sharon Stancliff, MD  
Associate Medical Director for Harm  
Reduction in Health Care  
Office of the Medical Director, AIDS Institute  
New York State Department of Health  
[buprenorphine@health.ny.gov](mailto:buprenorphine@health.ny.gov)

Robert Kent  
General Counsel  
New York State Office of  
Alcoholism and Substance Abuse  
Services  
[legal@oasas.ny.gov](mailto:legal@oasas.ny.gov)

