



EXTENDED-RELEASE BUPRENORPHINE FORMULATIONS

Extended-release (XR) buprenorphine provides long-acting opioid use disorder (OUD) treatment with consistent medication levels. This guide compares two formulations, focusing on dosing, administration, and logistics for informed decision-making.

Key Differences Between XR-Buprenorphine Formulations

The following table outlines key differences between XR-buprenorphine formulations to help clinicians assess which option best fits their patients' needs.

Feature	RBP-6000 ¹	CAM2038 ¹
Available Doses	100 mg 300 mg	Weekly: 8 mg, 16 mg, 24 mg, 32 mg Monthly: 64 mg, 96 mg, 128 mg
Administration	45-degree angle multiple sites ² 19-gauge needle, 0.5–1.5 mL	90-degree angle multiple sites ² 23-gauge needle, 0.16–0.64 mL
Serum Buprenorphine Levels (Cavg) ³	~6.3 ng/mL with 300 mg maintenance dose	~3.9 ng/mL with 128 mg maintenance dose
Storage Requirements ⁴	Refrigeration required; may remain at room temperature for up to 12 weeks once removed	No refrigeration required
Potential Advantages	Higher buprenorphine levels achieved with 300 mg	Flexible weekly/monthly dosing; smaller injection volume
Administration Considerations	Larger needle and volume → potential for injection pain ⁵	Smaller needle and volume → less injection discomfort ⁵
Insurance & Cost Considerations	<u>Copay Assistance Program</u>	<u>Copay Assistance Program</u>

¹ RBP-6000 and CAM2038 were the original names for Sublocade and Brixadi, respectively.

² Abdomen, thigh, buttock, or back of the upper arm.

³ Cavg = mean average buprenorphine plasma concentration after 4 months.

⁴ Packaging dimensions differ and may impact storage compatibility. Refer to manufacturer for current product dimensions.

⁵ No head-to-head randomized trials on injection site pain. Comparison based on clinical experience and published report.



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Key Considerations for Selecting the Right Formulation

Choosing the right XR-buprenorphine formulation involves balancing clinical needs with patient preferences. Consider the following factors:



Access & Storage

RBP-6000: Refrigeration required.
Stable at room temperature for up to
12 weeks once removed.
CAM2038: No refrigeration required.



Patient Health Status

Ongoing cravings or illicit opioid use,
especially late in the month?
RBP-6000 can help maintain higher,
sustained buprenorphine levels.



Lifestyle & Preference

Does the patient prefer fewer
visits with monthly dosing or more
flexibility with weekly dosing?



Insurance & Cost

What coverage and financial
assistance options are available?



Provider Experience

Does the clinician have experience
with each formulation?

Strategies to Reduce Injection Discomfort

Strategies to help minimize pain
during XR-buprenorphine injections:

- Pre-Procedure:** Apply an ice pack or topical spray (e.g., ethyl chloride) before injection.
- Local Anesthetic Use:** Inject subcutaneous lidocaine (1%) to numb the area.
- Technique:** Inject slowly to minimize discomfort, especially with larger doses.
- Post-Care:** Use an ice pack after injection to reduce swelling and soreness.

Both formulations are effective in treating OUD. The choice depends on individual needs, including dosing frequency, storage logistics, and insurance coverage. Patients and clinicians should discuss these factors collaboratively to determine the most suitable option.



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References

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