

Evaluation of the Buprenorphine Waiver Program

Results from SAMHSA/CSAT's Evaluation of the
Buprenorphine Waiver Program
The College on Problems of Drug Dependence
June 20, 2005

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Key Goals of the Evaluation

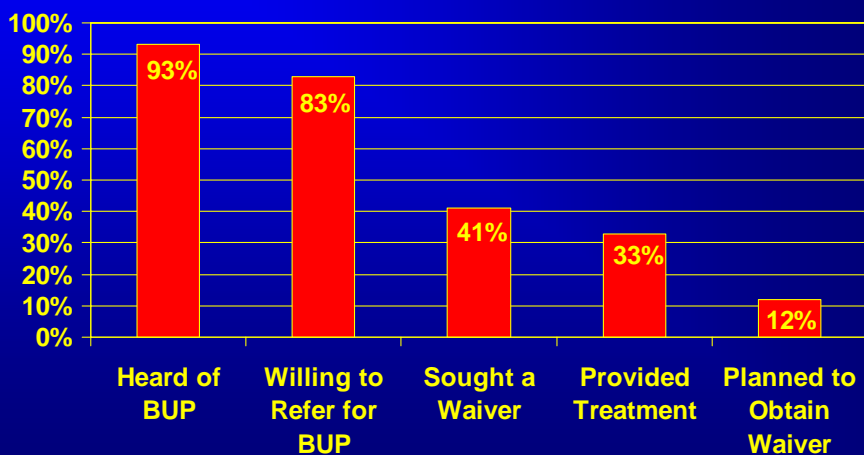
Per the supporting legislation, describe the impact of the Waiver program upon:

- **AVAILABILITY** of detoxification and maintenance treatments;
- **EFFECTIVENESS** of these treatments; and
- Potential adverse **PUBLIC HEALTH CONSEQUENCES**, including **DIVERSION** activities.

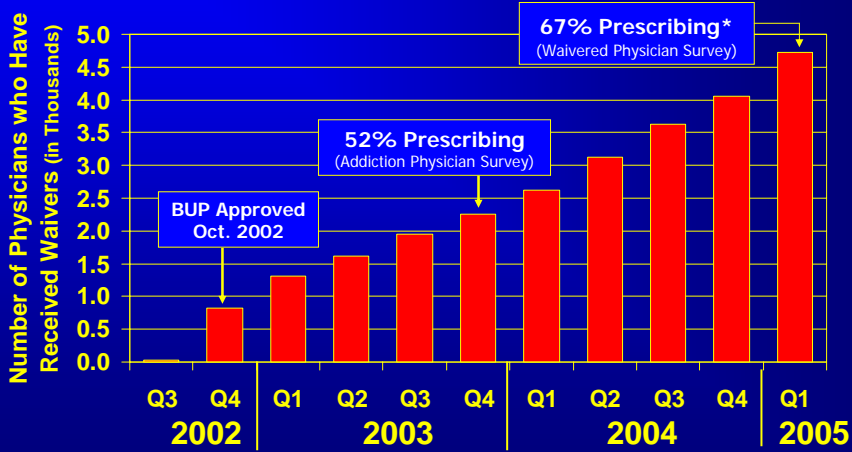
Data Collection Activities

- **Addiction Physician Survey**
(Fall 2003)
- **Longitudinal Patient Study**
(April 2004 – June 2005)
- **Waivered Physician Survey**
(Winter 2005)

Addiction Physicians are Aware of Buprenorphine (2003)

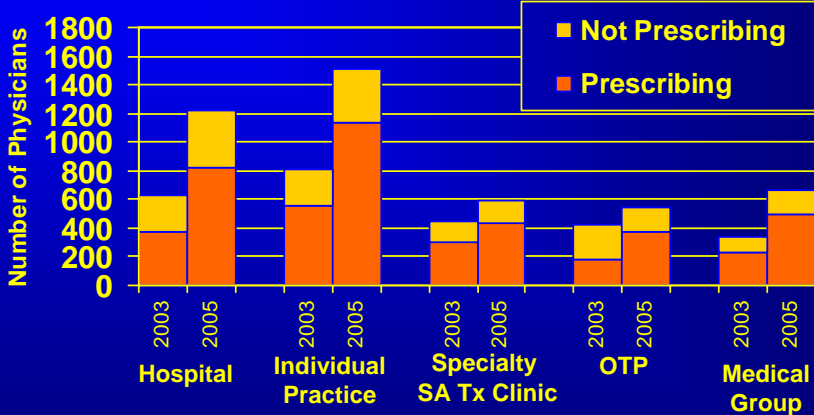


Number of Waivered Physicians Estimated Number Prescribing



* An estimated 2,353 physicians were providing treatment under the Waiver Program in early 2005

Practice Setting of Waivered Physicians

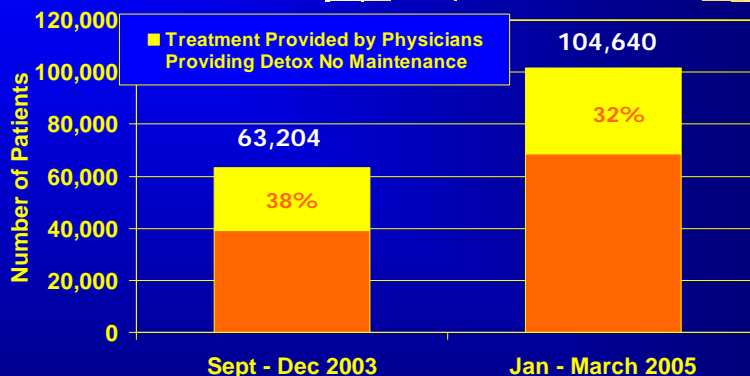


40% and 43% of the sample work in more than one practice setting in 2003 and 2005 respectively

Practice Setting

2003 data are from the Addiction Physician Survey, 2005 data are from the Waivered Physician Survey

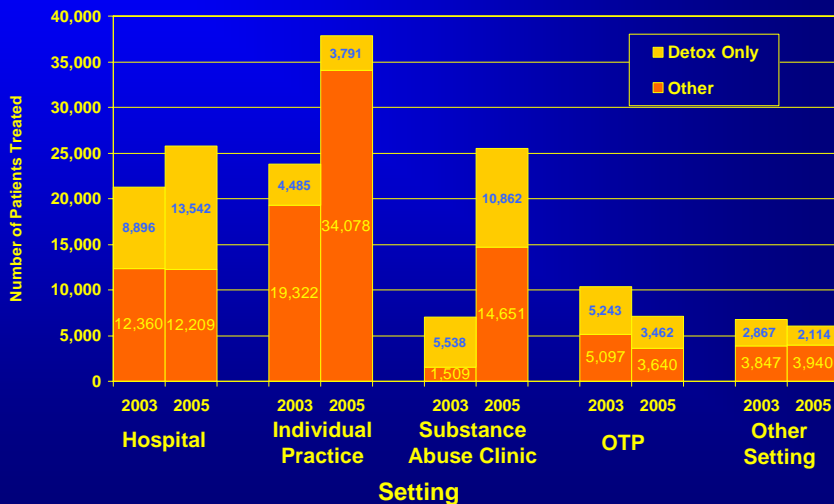
Cumulative Estimate of Number of Patients Inducted



Mean # of Patients/Physician	57	46
SD	6	147
Range	1-800	1-1011

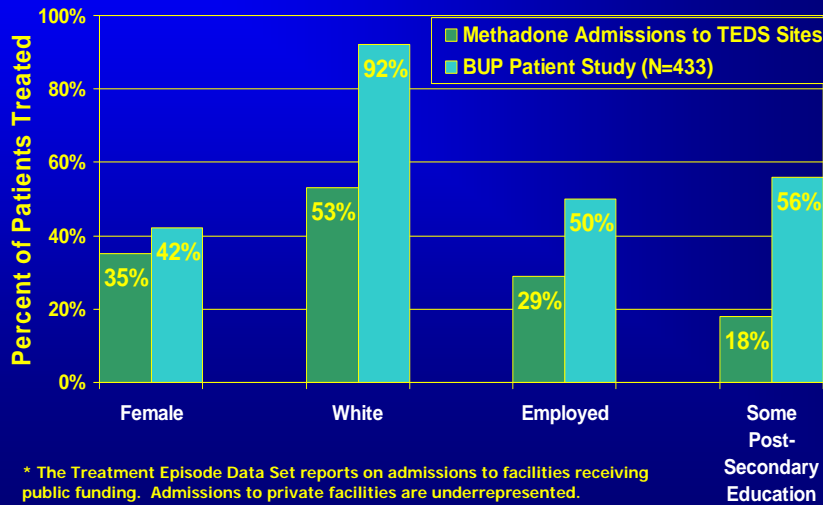
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Patients Inducted by Setting & Treatment Offered

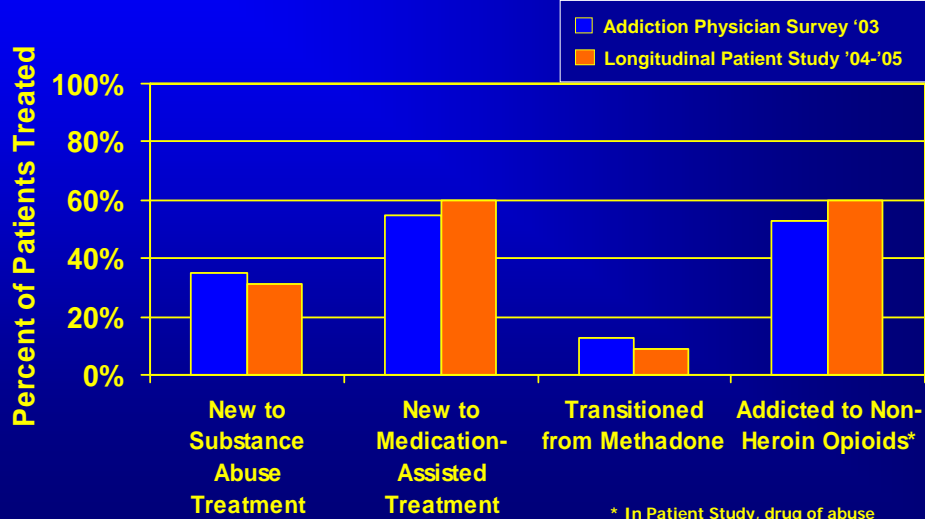


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Methadone Patients* & BUP Patient Study Sample: Demographic Differences

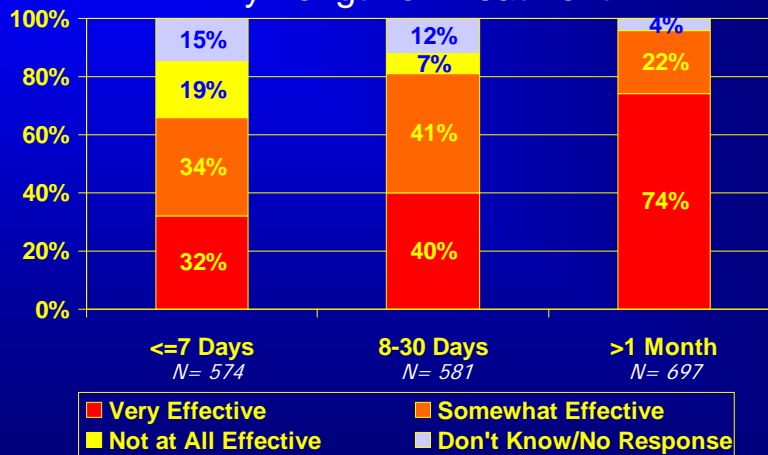


Characteristics of Patients Treated Under the Waiver Program



Prescribing Physicians* Perceptions of BUP Effectiveness

By Length of Treatment



*Views reported by physicians who also reported experience treating for that length of time

Top Challenges Reported by BUP PRESCRIBERS

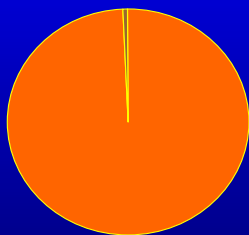
- Most challenging aspects of providing BUP treatment:
 - Patients' inability to pay for treatment/medication (49%)
 - Patients' resistance to required substance abuse counseling (42%)
 - Treating concurrent nonopioid substance abuse (35%)
- Factors that prescribers say decreases the number of patients treated:
 - 30-patient limit (32%)
 - Few referrals or appropriate patients (27%)
 - Patients' resistance to required substance abuse counseling (24%)
 - Poor patient compliance/retention (20%)

Top Barriers Reported by NON-PRESCRIBERS

- **Reasons for not prescribing:**
 - Difficult logistics (e.g., office setup, recordkeeping) (39%)
 - Few referrals or appropriate patients (30%)
 - Patients' inability to pay for treatment/medication (23%)
- **Why seemingly appropriate patients refused BUP treatment:**
 - Medication too expensive (42%)
 - Office visits too expensive (26%)
 - Unknown as patient did not follow through (23%)
 - Chose methadone program instead (20%)

Severe Adverse Reactions to BUP Treatment Relatively Rare

**Physicians Report .5%
of Patients
Experienced Severe
Adverse Rx**



- **Specific reactions reported (unweighted):**
 - Withdrawal: 103
 - Allergic reactions: 12
 - Respiratory depression: 9
 - Drug interactions: 9
 - Liver problems: 2
 - Renal insufficiency (or aggravation of it): 2
 - Unspecified: 80

Physicians reported 217 patients with adverse reactions, out of a total 47,664 patients inducted (unweighted).

Summary of Findings

- Proportion of Waivered physicians who prescribe is increasing
- Modest increase in number of patients inducted
- Patients treated with BUP at this time may represent a subpopulation different from that treated in OTPs, perhaps due to cost factors
- Physicians report BUP treatment more effective when prescribed longer than one month
- Few adverse reactions
- Physicians attempting to provide BUP treatment face multiple challenges, with cost remaining an ongoing issue

Evaluation of the Buprenorphine Waiver Program: Contacts

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Evaluation overview available at www.buprenorphine.samhsa.gov