

PACKAGE LEAFLET: INFORMATION FOR THE USER

Subuphine 0.4, 2 and 8 mg sublingual tablets

buprenorphine

Read all of this leaflet carefully before you start taking this medicine because it contains important information for you.

- Keep this leaflet. You may need to read it again.
- If you have any further questions, ask your doctor or pharmacist.
- This medicine has been prescribed for you only. Do not pass it on to others. It may harm them, even if their signs of illness are the same as yours.
- If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. See section 4.

What is in this leaflet:

1. What Subuphine is and what it is used for
2. What you need to know before you take Subuphine
3. How to take Subuphine
4. Possible side effects
5. How to store Subuphine
6. Contents of the pack and other information.

1. What Subuphine is and what it is used for

Subuphine is a medicinal product used in opioid (narcotic) dependence.

Subuphine are used as part of a medical, social and psychological treatment programme for patients addicted to opiate (narcotic) drugs.

Treatment is prescribed and monitored by physicians who are specialists in the treatment of drug dependence.

Treatment with Subuphine is intended for use in adults and adolescents over 15 years of age.

2. What you need to know before you take Subuphine

Do not take Subuphine if you:

- are allergic to buprenorphine or any of the other ingredients of this medicine (listed in section 6)
- suffer from serious breathing difficulties
- suffer from a seriously reduced liver function
- suffer from alcoholism or delirium tremens (the “shakes” and hallucinations)

Warnings and precautions:

Talk to your doctor or pharmacist before taking Subuphine.

Tell your doctor if you have any of the following illnesses before treatment or develop them during treatment, as your doctor may need to reduce your dose of Subuphine or you may need extra treatment to control them:

- Depression or other conditions that are treated with antidepressants. The use of these medicines together with Subuphine can lead to serotonin syndrome, a potentially life-threatening condition (see “Other medicines and Subuphine”)
- have taken morphine or heroin (opioids) less than 6 hours ago, as withdrawal symptoms can occur

- have taken methadone less than 24 hours ago, as withdrawal symptoms can occur (if you use methadone your dose may have to be adjusted before you take buprenorphine, see section 3)
- suffer from asthma or other breathing difficulties
- suffer from reduced function of the kidneys or the liver. If you suffer from serious liver insufficiency you must not take buprenorphine
- low blood pressure
- difficulties passing urine (because of an enlarged prostate gland or urethral stricture)
- head injuries and have an increased intracranial pressure or brain disease

Misuse and abuse

Misuse, especially by injection and at a high dose is dangerous and could be fatal.

Some people have died from respiratory failure (inability to breathe) because they misused buprenorphine or took it in combination with other central nervous system depressants such as alcohol, benzodiazepines (medicines used to treat anxiety or sleep disorders) or other opioids.

Cases of acute hepatic injury (liver problems) have been reported in context of misuse, especially by intravenous route and at a high dose. These injuries could be due to special conditions such as viral infections (chronic C hepatitis), alcohol abuse, anorexia, or when taken with other medicines (for example: antiretroviral nucleoside analogues, acetylsalicylic acid (aspirin), amiodarone, isoniazid and valproate). If you have symptoms of severe tiredness, no appetite, itching or if your skin or eyes look yellow, tell your doctor immediately, so that you can receive the proper treatment.

This medicine can cause:

- withdrawal symptoms if you take it less than 6 hours after you use a narcotic (morphine, heroin or other related products) or less than 24 hours after you use methadone
- drowsiness, which may be made worse if you also drink alcohol or take tranquillisers or anti-anxiety drugs. If you are drowsy, do not drive or operate machinery
- drug dependency
- sudden drop in blood pressure, causing you to feel dizzy and unwell if you get up too quickly from sitting or lying down

Subuphine may mask pain reflecting some diseases. Do not forget to inform your physician if you take this medicine.

The risk of serious side effects is greater if you use opioids, alcohol, sedatives and hypnotics especially benzodiazepines.

Discontinuation of treatment may lead to withdrawal syndrome.

Children and adolescents

Subuphine is not recommended for use in children and adolescents under the age of 15 years, due to insufficient data on safety and efficacy.

Other medicines and Subuphine

Tell your doctor or pharmacist if you are taking, have recently taken or might take any other medicines.

Buprenorphine may influence the effect of other medicines and other medicines may influence the effect of buprenorphine. It is therefore important you tell your doctor if you use any of the following:

- anti-depressants such as moclobemide, tranylcypromine, citalopram, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline, duloxetine, venlafaxine, amitriptyline, doxepine, or trimipramine. These medicines may interact with Subuphine and you may experience symptoms such as involuntary, rhythmic contractions of muscles, including the muscles that control movement of the eye, agitation,

hallucinations, coma, excessive sweating, tremor, exaggeration of reflexes, increased muscle tension, body temperature above 38°C. Contact your doctor when experiencing such symptoms.

- medicines used in the treatment of anxiety and disquiet and sleeping difficulties (benzodiazepines and anxiolytics other than benzodiazepines). If your physician prescribes benzodiazepines, you must not take more than the prescribed dose. Taking Subuphine with benzodiazepines may cause death due to respiratory failure
- antifungal medicine used in the treatment of skin infection in the scalp (ketoconazole, itraconazole)
- antibiotic medicines used in the treatment of certain infections (rifampicin, erythromycin, troleandomycin)
- medicine used in the treatment of HIV/ AIDS (protease inhibitors including ritonavir, indinavir, nelfinavir and saquinavir)
- some types of medicine used in the treatment of allergy
- some types of medicine used in the treatment of depression (monoamine oxidase inhibitors)
- other medicines with sedative properties used in the treatment of migraine, high blood pressure, hot flushes and abstinences as a result of medicine abuse (sedating antihistamines, certain antidepressants and clonidine)
- strong pain killers (opioid analgesics) and cough medicines containing opioid-related substances (methadone, dextropropoxyphene, codeine, dextromethorphan, and noscapine)
- painkillers (morphine and morphine-like substances)
- medicine containing alcohol
- medicine used in the treatment of epilepsy (phenobarbital, phenytoin, carbamazepine)
- medicine used in the treatment of psychosis (neuroleptics)
- medicine used as sedatives and to relieve convulsions, sleep disorders and anxiety (barbiturates)
- medicines used for oral contraception (gestodene)

Subuphine with food, drink and alcohol

You can take Subuphine independently of a meal.

Do not drink alcohol when you are being treated with Subuphine. Alcohol increases the sedative effect of buprenorphine, which can make driving and operating machinery dangerous.

Pregnancy and breast-feeding

If you are pregnant or breast-feeding, think you may be pregnant or are planning to have a baby, ask your doctor or pharmacist for advice before taking this medicine.

Pregnancy

You should not use buprenorphine during your pregnancy. But if your doctor finds it appropriate an exception can be made for the first 3 months of your pregnancy.

Breast-feeding

Do not take buprenorphine if you are breast-feeding.

Driving and using machines

Subuphine can be sedating, cause fainting and dizziness, and therefore it can reduce the ability to drive and use machines.

Do not drive or use machines if you feel dizzy or drowsy. This usually occurs at the beginning of treatment and when the dose is increased.

Subuphine contains lactose

Subuphine contains lactose (a type of sugar). If you have been told by your doctor that you have intolerance to some sugars, contact your doctor before taking this medicinal product.

3. How to take Subuphine

Take the dose once a day, unless otherwise is prescribed by your doctor.

Your doctor will determine the best dose for you. During your treatment, the doctor may adjust the dose, depending upon your response. To get the greatest benefit from taking Subuphine, you must tell your doctor about all the medicines you are taking, including alcohol, medicines containing alcohol, street drugs, and any prescription medicine you are taking that have not been prescribed to you by your doctor.

After the first dose of Buprenorphine tablets, it is possible that you may have some opiate withdrawal symptoms, see section 4.

Reduced kidney or liver function:

If you have problems with your kidneys or liver your dose may have to be reduced. Talk to your doctor. If you suffer from serious liver insufficiency you must not take buprenorphine.

Concomitant methadone treatment

Your dose of methadone has to be reduced to a maximum of 30 mg daily before starting treatment with Subuphine. Contact your doctor if you experience withdrawal symptoms (sweating, disquiet or restlessness).

Use in children and adolescents (younger than 15 years):

Children and adolescents under the age of 15 must not use Subuphine, due to lack of data on safety and efficacy.

Method of Administration

Always take Subuphine exactly as your doctor has told you. You should check with your doctor or pharmacist if you are not sure.

The tablets are administered sublingually. This means that you must place the tablet under your tongue until it dissolves – normally it takes 5-10 minutes. This is the only way tablets should be taken. Do not swallow, crush or chew the tablet, as they will not work properly and you may get withdrawal symptoms.

Treatment duration

The length of treatment will be determined individually by your doctor.

After a time of successful treatment, the doctor may reduce the dose gradually to lower a maintenance dose. Depending on your condition, the dose of Subuphine may continue to be reduced under careful medical supervision, until eventually it may be stopped.

Do not change the treatment in any way or stop treatment without the agreement of the doctor who is treating you.

The effectiveness of this treatment depends on the dose, in combination with the associated medical, psychological and social treatment.

If you have the impression that the effect of Subuphine is too strong or too weak, talk to your doctor or pharmacist.

If you take more Subuphine than you should

In case of overdose of buprenorphine, you must go or be taken immediately to an emergency centre or hospital for treatment. Immediately advise your doctor or your pharmacist.

Symptoms of an overdose can include breathing difficulties, slowly breathing or heart symptoms. Toxic poisoning has been observed after misuse (overdose or wrong administration) and in worst case it can result in stop of breathing, heart failure and/or liver damage.

If you forget to take Subuphine

Contact your doctor if you forget to take Subuphine. Do not take a double dose to make up for a forgotten dose unless your doctor instructs you to do so.

If you stop taking Subuphine

Do not stop the treatment yourself, but ask your doctor how to end the treatment. A sudden interruption can cause withdrawal symptoms (sweating, disquiet and restlessness).

If you have any further questions on the use of this medicine, ask your doctor or pharmacist.

4. Possible side effects

Like all medicines, this medicine can cause side effects, although not everybody gets them.

If you develop symptoms of a severe allergic reactions (such as difficulty in breathing, wheezing and swelling of eyes, lips, throat, tongue or hands) seek medical help immediately.

Misusing this medicine by injecting it can cause withdrawal symptoms, infections, other skin reactions and potentially serious liver problems – see “Take care with Subuphine.

After the first dose of Subuphine, you may have some opiate withdrawal symptoms, see section 3 “How to take Subuphine”

Addiction to Subuphine

Please observe that Subuphine may cause dependence.

Very common side effects affects more than 1 user in 10:

Not being able to sleep, a general feeling of weakness, withdrawal syndrome.

Common side effects affects 1 to 10 users in 100:

Headache, fainting, dizziness, constipation, nausea, vomiting, insomnia, drowsiness, feeling of weakness, drop in blood pressure on changing position from sitting or lying down to standing, sweating, anxiety, nervousness, diarrhoea, stomach pain, tearing disorder, runny nose, back pain, chills, abnormal electrocardiogram.

In long term use of buprenorphine, the common undesirable effects diminish successively. However constipation and sweating often remain.

Uncommon side effects affects 1 to 10 users in 1,000:

Hallucinations, severe difficulty in breathing (respiratory depression), liver problem with or without jaundice, death of the cells of the liver (necrosis of the liver).

Rare side effects (occurring in more than 1 but less than 10 in 10,000 patients):

Hallucinations, respiratory depression, bronchial spasm, damage of the liver, hepatitis, anaphylactic shock, angioneurotic oedema, urine retention.

Very rare side effects affects less than 1 user in 10,000:

hypersensitivity (allergic reactions have been reported. Symptoms may include skin rash, hives and itching.

Reporting of side effects

If you get any side effects, talk to your doctor or pharmacist. This includes any possible side effects not listed in this leaflet. You can also report side effects directly via the HPRA Pharmacovigilance Earlsfort Terrace, IRL – Dublin 2, Tel: +353 1 6764971, Fax: +353 1 6762517, Website: www.hpra.ie, e-mail: medsafety@hpra.ie. By reporting side effects you can help provide more information on the safety of this medicine.

5. How to store Subuphine

Keep this medicine out of the sight and reach of children.

Do not use this medicine after the expiry date which is stated on the carton and on the blister after Exp. The expiry date refers to the last day of that month.

Does not require any special storage conditions.

Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.

6. Contents of the pack and other information

What Subuphine contains

- The active substance is buprenorphine as buprenorphine hydrochloride. Each sublingual tablet contains 0.4 mg, 2 mg and 8 mg buprenorphine respectively.
- The other ingredients are lactose monohydrate, mannitol (E421), maize starch, citric acid (E330), sodium citrate (E331), povidone (E1201), magnesium stearate (E470b).
- The 0.4 mg sublingual tablets also contain: Talc (E553b) and colloidal anhydrous silica.

What Subuphine looks like and contents of the pack

Subuphine 0.4 mg is a round, biconvex and white sublingual tablet.

Subuphine 2 mg is an oval, biconvex and white sublingual tablet with “2” embossed on one side.

Subuphine 8 mg is an oval, biconvex and white sublingual tablet with “8” embossed on one side.

Subuphine is packed in blister packs of 7, 14 and 28 sublingual tablets. Not all pack sizes may be marketed.

Marketing Authorisation Holder and Manufacturer

Marketing Authorisation Holder

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