Physicians who are certified to prescribe buprenorphine are increasingly likely to perceive diversion and abuse of the drug, according to a survey funded by the manufacturer as part of a national post-marketing surveillance program*. Nearly one-half (46%) of physicians certified to prescribe buprenorphine in 2009 knew of buprenorphine products being bought or sold on the street, compared to 27% in 2005. In addition, a majority (81%) of the physicians surveyed believed that buprenorphine was easier than methadone to buy on the street in their community in 2009, a 56% increase from 2005 (see figure below). Forty-four percent reported that they knew someone who used illegal buprenorphine/naloxone to manage opioid withdrawal, 34% for maintenance until entering treatment, 17% to try out its effect, and 7% to get high (data not shown). The authors suggest that “the increase in diversion may be driven by the increase in abuse” (p. 194), as evidenced by the increasing percentage of treatment applicants who said they knew of buprenorphine being used to get high (from 5% in 2005 to 21% in 2009; see CESAR FAX, Volume 21, Issue 25). However, the increase in diversion may also “be driven by therapeutic demand, suggesting treatment expansion may be necessary. Finding a balance between diversion and abuse of a medication versus expanded treatment remains a challenge” (p. 194).

*Conducted by an independent contractor for Reckitt Benckiser Pharmaceuticals, the Surveillance of Diversion and Abuse of Therapeutic Agents (SODATA) utilizes several national indicators of diversion and abuse combined with a survey of applicants to substance abuse treatment programs and a survey of CSAT-certified physicians. A total of 8,194 quarterly surveys were conducted with randomly-selected physicians federally-certified to prescribe buprenorphine from 2005 to 2009.
