

# FINDING HELP AND STARTING TREATMENT

## You're not alone.

Whether you're seeking help for yourself or someone you love, there are real paths to recovery, and buprenorphine is one of them.

## Here's how to begin:

- Talk to your doctor: Ask if buprenorphine is right for you or for a referral to a provider who can help.
- Find a treatment center: Look for facilities that offer medication-assisted treatment (MAT) with counseling and support services.
- Reach out to support groups: Many organizations like Narcotics Anonymous, SMART Recovery, and local peer support networks welcome those using buprenorphine.
- Don't be afraid to ask questions: Treatment works best when you feel informed, supported, and empowered.



# RESOURCES

## Recovery isn't a straight line, and you don't have to walk it alone.

- **SAMHSA National Helpline**  
1-800-662-HELP (4357): Free, confidential, 24/7
- Visit SAMHSA's Buprenorphine Practitioner Locator
- Talk to your doctor or local treatment center about medication-assisted treatment.

# TEST YOUR KNOWLEDGE

1. Buprenorphine is a full opioid agonist.  
A. True                      B. False
2. You can't get high on buprenorphine.  
A. True                      B. False
3. Buprenorphine can reduce opioid cravings.  
A. True                      B. False
4. You should always stop taking buprenorphine as quickly as possible.  
A. True                      B. False
5. Combining buprenorphine with alcohol can be dangerous.  
A. True                      B. False

Answers: B, A, B, A, B, A

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# BUPRENORPHINE



**STAY SAFE SERIES**

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# A MEDICATION-ASSISTED PATH TO RECOVERY

## What is BUPRENORPHINE?

Buprenorphine is a medication used to treat opioid use disorder (OUD). It is a partial opioid agonist, meaning it activates opioid receptors in the brain, but to a much lesser extent than drugs like heroin or oxycodone. It helps:

- Reduce cravings
- Prevent withdrawal symptoms
- Block the effects of stronger opioids

### Available as:

- Subutex (buprenorphine alone)
- Suboxone (buprenorphine + naloxone)
- Sublingual tablets, films, implants, & injections

## HOW DOES IT WORK?

### Buprenorphine:

- Binds tightly to opioid receptors, so other opioids can't easily take effect.
- Has a ceiling effect: after a certain dose, the effects level off. This reduces risk of overdose.
- Is long-acting: usually taken once daily, or even less frequently in some extended-release forms.

**This makes it safer than full opioids and ideal for long-term management of OUD.**



## COMMON MYTHS

**MYTH:** Buprenorphine is just substituting one addiction for another.

**FACT:** Buprenorphine is a treatment, not a substitute. It helps stabilize people and support recovery.

**MYTH:** You can't function normally while taking it.

**FACT:** Most people on buprenorphine live fully productive lives: working, parenting, and engaging in their communities.

**MYTH:** You should get off of it as soon as possible.

**FACT:** The length of treatment is different for everyone. Some may need it long-term.



## BENEFITS & RISKS

### Benefits:

- Reduced risk of overdose
- Decreased opioid cravings
- Improved quality of life
- Greater chance of staying in recovery

### Risks:

- Mild withdrawal if stopped suddenly
- Possible side effects: headache, nausea, constipation, sleep problems
- Can still be misused— should always be taken as prescribed

**Note: Combining buprenorphine with benzodiazepines or alcohol can be dangerous.**

## A NEW START Carlos's Story



Carlos was 29 when he decided something had to change. For nearly a decade, his life had been shaped by addiction. What began with prescription painkillers after a car accident slowly spiraled into heroin use. He lost his job, strained relationships with his family, and felt trapped in a cycle he couldn't break.

"I tried to quit more times than I can count," Carlos said. "But the withdrawals were unbearable, and the cravings always pulled me back."

It wasn't until a local outreach team visited his shelter with information about medication-assisted treatment (MAT) that Carlos heard about buprenorphine. At first, he was skeptical. "I thought it was just another drug, another crutch. But I was tired... tired of feeling sick, tired of disappointing my mom, tired of losing every chance I got."

Within a few weeks, the difference was undeniable. He wasn't experiencing the intense cravings anymore. He had energy again. For the first time in years, he could think clearly. "Buprenorphine gave me space to breathe," he explained. "It didn't make my problems disappear, but it gave me the strength to face them."

Carlos has now been in recovery for over a year. He attends a recovery support group every Tuesday and even volunteers at the same shelter where he first heard about buprenorphine.

"If you're where I was," he says, "don't wait. There is help. And there is life after addiction."

