

Buprenorphine Myths vs Facts

There are still a lot of myths about buprenorphine – and they continue to shape the way we care for patients, often without us realizing it. As clinicians, it's our responsibility to look closely at the evidence, and make sure misinformation isn't getting in the way of life-saving care.

Myth

Prescribing buprenorphine leads to harmful misuse.

Fact

When buprenorphine is diverted, it's usually to manage withdrawal or stay off riskier opioids – not to get high. Increased access to buprenorphine is actually linked to lower overdose rates.

Carroll, Rich & Green (2018), Journal of Addiction Medicine, 12: 459-465, https://journals.lww.com/journaladdictionmedicine/abstract/2018/10000/posttraumatic_stress_disorder_symptom_association.3.aspx

Adams et al. (2023), Harm Reduction Journal, 20: Article 150, https://rdcu.be/eNyg1

Myth

You can't prescribe buprenorphine unless the patient is abstinent from other drugs and in counseling.

Fact

Buprenorphine saves lives, even without abstinence or counseling. "Low-barrier" programs – that don't require patients to stop all substance use – improve treatment retention, reduce overdose risk, and often outperform abstinence-only care.

Heimer et al. (2024), Drug and Alcohol Dependence, 254: 111040, https://doi.org/10.1016/j.drugalcdep.2023.111040

Myth

Buprenorphine is just trading one addiction for another.

Fact

Buprenorphine is evidence-based medical treatment – no more of an addiction than daily insulin injections. It stabilizes brain chemistry, reduces cravings, and allows patients to focus on recovery.

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Myth

You need a special waiver or license to prescribe buprenorphine.

Fact

No special license is required. The X-waiver was eliminated in 2023. Now, any DEA-registered clinician who can prescribe Schedule III medications can prescribe buprenorphine.

SAMHSA (2023), Waiver Elimination (MAT Act), U.S. DHHS, https://www.samhsa.gov/substance-use/treatment/statutes-regulations-guidelines/mat-act

DEA (2023), "MATE Act Training Letter Final", https://www.deadiversion.usdoj.gov/pubs/docs/MATE_Training_Letter_Final.pdf

Myth

People who use drugs don't want help.

Fact

Most people do want to make a change. A Washington State survey showed that 68% of people who had used opioids in the past week wanted to reduce or stop their use.

 $Kingston, Newman, Banta-Green \& Glick (2024), WA State Syringe Services Program Health Survey, \\ \underline{https://adai.uw.edu/wordpress/wp-content/uploads/dlm_uploads/ssp-health-survey-2023.pdf}$