latrogenic Opioid Overdose in an Opioid-Naïve Person Given High-Dose Long-Acting Injectable Buprenorphine

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Introduction / Issues: There are no published case reports of the management of iatrogenic opioid overdose due to the administration of long-acting injectable buprenorphine (LAIB) to an opioid-naïve person in the existing medical literature. Such a case is described here.

Method / Approach: A 49 year old, opioid-naïve, alcohol dependent woman was given a 128mg dose of subcutaneous LAIB in the community and subsequently developed profound respiratory depression. She was admitted to ICU for ventilatory support and treated with a naloxone infusion, and later commenced on oral naltrexone. The naloxone infusion was ceased 48 hours after commencing oral naltrexone, without re-emergence of respiratory depression.

Key Findings: The client was successfully managed with oral naltrexone without reemergence of respiratory depression or other features of narcotisation. She was followed up as an outpatient up to 162 days after the administration of LAIB. Trace amounts of buprenorphine and norbuprenorphine were still detectable in the patient's urine at 151 days after the administration of LAIB. Plans were made to facilitate safe discontinuation of oral naltrexone however the client opted to continue taking the naltrexone to aid with alcohol dependence.

Discussions and Conclusions: This case provides an example of how to manage iatrogenic opioid overdose with LAIB given to opioid-naïve people.

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