

The Basic Building Blocks

Making buprenorphine available to pregnant women

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The Building Blocks

- Relationship with outpatient buprenorphine prescribers
- Outpatient pharmacy that will carry buprenorphine
- Protocol or plan for initiating buprenorphine
- Protocol for intrapartum management, C-section, and post-partum care
- Buprenorphine on hospital formulary



Relationship with outpatient buprenorphine prescribers



Outpatient prescriber will

- Manage addiction prior to and after labor
- Write discharge medication?

Models include:

- Integrated into prenatal care
- Opioid treatment program that offers prenatal care and wraparound
- Separate prenatal care and addiction care

[SAMHSA Buprenorphine Treatment Locator](#)

Outpatient pharmacy that carries buprenorphine



- May require a phone call to the pharmacy
 - Let them know that you plan to start prescribing
 - Educate about insurance coverage
 - Medi-Cal carve out
 - If not successful, reach out to the pharmacy Regional Manager

Protocol or plan for buprenorphine induction



- Inpatient vs outpatient inductions
- Monitoring guidelines
- Withdrawal assessment
 - Medications for withdrawal symptom management
- Dose selection and adjustment protocol
- Can be helpful to have a pager or phone to call for questions and support

Protocol for intrapartum management, C-section, and post-partum care



- Buprenorphine should be continued through labor, C-section, and post-partum course
- Pain can be managed with NSAIDs or opioids, as appropriate
- Higher doses of opioids may be required
- Epidural and spinal anesthesia are appropriate and effective

Buprenorphine on hospital formulary



- May require a champion to advocate with the hospital's pharmacy committee
- Helpful to provide key articles about the benefits of buprenorphine in pregnancy

Questions and Discussion

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