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## **Preventing buprenorphine misuse in prison: A strategy using extended-release buprenorphine**

**Introduction:** Opioid use disorder (OUD) is a significant concern in correctional settings, with buprenorphine being a common substitution treatment. However, misuse of oral buprenorphine is prevalent in prisons, leading to reduced treatment efficacy and increased risks. This study explores the potential of extended-release buprenorphine (Buvidal®) to mitigate misuse within a prison environment.

**Methods:** This study was conducted at the Uzerche detention center, focusing on inmates receiving buprenorphine for OUD. A mixed-methods approach was used, including a questionnaire administered to 20 patients to assess their substance use history, current buprenorphine treatment, and attitudes toward extended-release buprenorphine. Additionally, an interview was conducted with a patient receiving Buvidal® to gather insights on the advantages and disadvantages of this treatment.

**Results:** The questionnaire revealed that most patients had a history of heroin use and continued to experience withdrawal symptoms on oral buprenorphine. While 70% of patients were aware of Buvidal®, only 20% expressed willingness to switch, primarily due to fear of injections. The interviewed patient reported positive outcomes with Buvidal®, including reduced cravings and cessation of illicit drug use. However, the study identified challenges such as the high cost of extended-release buprenorphine and limited access to external support for continuity of care after release.

**Discussion:** extended-release buprenorphine shows promise in reducing buprenorphine misuse in prisons by eliminating the potential for diversion and improving treatment adherence. However, addressing patient concerns about injections and ensuring access to aftercare services are crucial for successful implementation.

**Conclusion:** Transitioning from oral buprenorphine to extended-release buprenorphine represents a promising strategy for preventing misuse and improving outcomes for inmates with OUD.