The Use of Transdermal Buprenorphine Patches in Aiding in Opioid Withdrawal: Clinical Effectiveness and Guidelines
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Acknowledgments:

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About CADTH: CADTH is an independent, not-for-profit organization responsible for providing Canada’s health care decision-makers with objective evidence to help make informed decisions about the optimal use of drugs, medical devices, diagnostics, and procedures in our health care system.
Research Questions
1. What is the clinical effectiveness regarding the use of buprenorphine patches for aiding in opioid withdrawal prior to starting a patient on buprenorphine/naloxone?
2. What are the evidence-based guidelines regarding the use of buprenorphine patches for aiding in opioid withdrawal prior to starting a patient on buprenorphine/naloxone?

Key Findings
One non-randomized study and one evidence-based guideline were identified regarding the use of buprenorphine patches for aiding in opioid withdrawal prior to starting a patient on buprenorphine/naloxone.

Methods
A limited literature search was conducted on key resources including PubMed, The Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) databases, Canadian and major international health technology agencies, as well as a focused Internet search. No filters were applied to limit the retrieval by study type. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 1, 2012 and June 2, 2017. Internet links were provided, where available.

Selection Criteria
One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

Table 1: Selection Criteria

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<th>Table 1: Selection Criteria</th>
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<td>Population</td>
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<td>Intervention</td>
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<tr>
<td>Comparator</td>
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<tr>
<td>Q2: N/A</td>
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<td>Study Designs</td>
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Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

One non-randomized study and one evidence-based guideline were identified regarding the use of buprenorphine patches for aiding in opioid withdrawal prior to starting a patient on buprenorphine/naloxone. No health technology assessments, systematic reviews, meta-analyses, and randomized controlled trials were found.

Additional references of potential interest are provided in the appendix.

Health Technology Assessments

No literature identified.

Systematic Reviews and Meta-analyses

No literature identified.

Randomized Controlled Trials

No literature identified.

Non-Randomized Studies


Guidelines and Recommendations


See: 3.C, page 43
Appendix — Further Information

Non-Randomized Studies – Alternate Use


Case Series


Review Article