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Transdermal buprenorphine in clinical practice: a multicenter, noninterventional postmarketing study in the Czech Republic.

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Abstract

SUMMARY

AIM: To evaluate the use of transdermal **buprenorphine** patches (Transtec®) in routine clinical practice.

PATIENTS & METHODS: A prospective, noninterventional, postmarketing study performed in the Czech Republic by 71 investigators in various clinical practice settings. Patients with chronic moderate-to-severe cancer pain, or chronic severe noncancer pain insufficiently controlled by nonopioids, were prescribed **buprenorphine** transdermal patch 35, 52.5 or 70 µg/h, and evaluated for 3 months. Additional analgesia and adjuvant/supportive treatments were allowed (physician discretion).

RESULTS: Data were evaluated for 630 patients (54% female, mean age 64 years). Most (>60%) patients had cancer-related pain. Noncancer pain was musculoskeletal (66.4%), neuropathic (25.9%) or nociceptive (6.0%). The mean dose of transdermal **buprenorphine** at study initiation was 40.6 µg/h. Compared with baseline (numerical rating scale [NRS]: 6.9), mean pain intensity (0-10 NRS) decreased significantly ($p < 0.01$) at 1 month (NRS: 2.9) and study end (NRS: 2.2). Most (>90%) patients rated pain relief as 'very good' or 'good', >97% of evaluable patients reported improvements in sleep quality and 87% of all evaluated patients were willing to continue transdermal **buprenorphine** after study completion. During the study, supplemental analgesic use remained unchanged; laxative/antiemetic use reduced (30.9% of patients [baseline] vs 23.3% [study end]). Twenty four nonserious adverse drug reactions (mainly local skin reactions) occurred in 19 (3%) patients.

CONCLUSION: In routine clinical practice in the Czech Republic, transdermal **buprenorphine** was efficacious and well tolerated in patients with chronic moderate-to-severe cancer pain or chronic severe noncancer pain insufficiently controlled by nonopioids.

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