8TH INTERNATIONAL CONGRESS
53ª JORNADAS NACIONALES
SEVILLA 15/17 OCTUBRE 2026
SOCIDROGALCOHOL
Sociedad Científica Española de Estudios sobre el Alcohol, el Alcoholismo y las otras Toxicomanías

Long-acting Injectable Buprenorphine (Buvidal)

A three months evaluation in a Addictive Behavior Treatment Unit in Barreiro, Portugal.

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INTRODUCTION

Long-acting injectable buprenorphine (LAI-BPN; Buvidal) is a treatment for Opioid Use Disorder that was recently introduced in Portugal. The Polo Arco Ribeirinho unit was one of the first units in Portugal to initiate the treatment with LAI-BPN..

OBJECTIVES

To describe the clinical evolution of patients with OUD enrolled in a LAI-BPN programme after three months of treatment.

METHODS

Patients were selected according to the following criteria: opioid dependence with ongoing opioid use, either untreated or receiving Methadone or sublingual Buprenorphine (SL-BPN), with or without concomitant use of other psychoactive substances.

Patients were divided into three groups according to their previous treatment: Methadone treatment, SL-BPN treatment, or no pharmacological treatment.

The treatment protocol consisted of three phases: pre-induction, induction, and follow-up.

During the pre-induction phase, patients underwent an admission interview and signed a therapeutic agreement. Screening for infectious diseases, electrocardiography, chest X-ray, and laboratory tests were also performed.

On day one of induction, urine screening for opioids, cocaine, methadone, buprenorphine, and cannabinoids was performed, together with alcohol testing, assessment of substance use patterns, vital signs, and withdrawal symptoms.

The following data were collected: employment status, medical and psychiatric history, maintenance dose, supplemental/rescue dose, and adverse side effects.

Two scales were applied in the begining and after three months of treatment: the Consequences of Dependence of Substances Scale (CDS) and the Alcohol, Smoking and Substance Involvement Screening Test (ASSIST). After three months in the programme we ask the patients how satisfied they were with the treatment in a 0 to 100 scale.

RESULTS

Long-acting injectable buprenorphine was introduced in March 2026. By June 2026, 14 patients were enrolled in the LAI-BPN programme, with a mean age of 50.7 years; the majority were male (85% - Table 1).

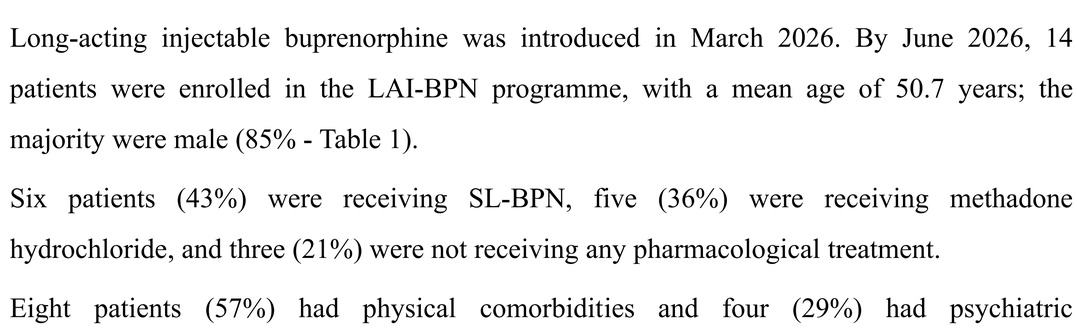
Six patients (43%) were receiving SL-BPN, five (36%) were receiving methadone hydrochloride, and three (21%) were not receiving any pharmacological treatment.

Eight patients (57%) had physical comorbidities and four (29%) had psychiatric comorbidities.

On day one, seven patients (50%) reported cocaine use, four (29%) reported THC use, and three patients (21%) reported opiates use (graphic 1). After three months cocaine use dropped to four patients (29%) and no patient reported opiates use. The number of THC users remained constant (21%). The frequency of use also decreased (Graph 1).

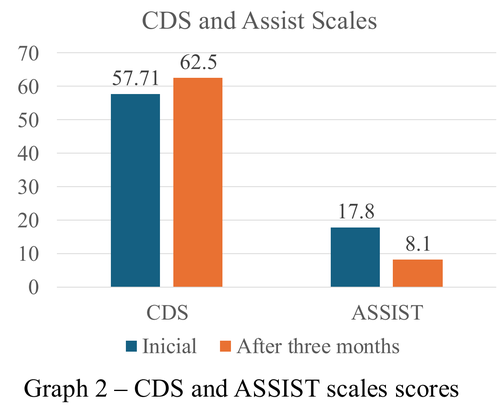
Table 1 - Population characteristics

Age (years)	Gender	Medical History	Psychiatric History	Pharmacological Treatment	Average Dose
Average: 50,7	Male - 12	8	4	BPN treatment - 6	9,3 mg (8 - 12 mg)
(41 - 62 years)	Female - 2			Methadone treatment - 5	19 mg (5 - 25 mg)
				No pharmacologiacal treatment - 3	



Graph 1 – Drug use: inicital and afther tree months

The ASSIST and the CDS scores show better results after tree months of tretament. The CDS score increased to 62,5 and the ASSSIST score decreased to 8,1 reveling a highly significant and positive clinical impact of the treatment (Graph 2).



Graph 2 – CDS and ASSIST scales scores

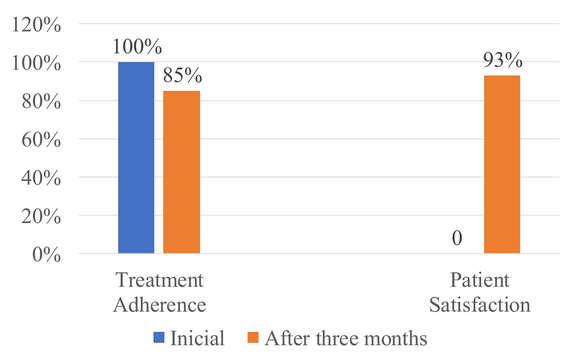
Nine patients (64%) were stabilised with a monthly dose of 96 mg, four (29%) with 64 mg, and one (7%) with 128 mg (Table 2).

Table 2 – Monthly Buvidal dose

Buvidal Dose	n	%
64 mg	4	29%
96 mg	9	64%
128 mg	1	7%

During the induction process, three patients (21%) required a rescue dose of 8 mg of injectable buprenorphine. Four patients (29%) experienced pain at the injection site, while two (14%) reported constipation and diurnal somnolence. Two patients (15%) discontinued the programme voluntarily during the second month of treatment (Graph 3).

The average patient satisfaction with treatment was 93% (0-100%, Graph 3).



Graph 3 – Treatment adherence and Satisfaction

CONCLUSION

We described the first three months of implementation of LAI-BPN treatment programme among patients with OUD at the Polo Arco Ribeirinho Unit. Although the follow-up period was only three months, the results suggest good tretament tolerability and highly significant and positive clinical impact of LAI-BPN.

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