

## RESOLUTION

Subject: Buprenorphine for Pain  
Submitted by: Greater Louisville Medical Society  
Referred to: Reference Committee

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WHEREAS, chronic pain affects approximately 20% of U.S. adults and remains a significant public health concern, with many patients requiring long-term pharmacologic management<sup>1</sup>; and

WHEREAS, buprenorphine is a partial  $\mu$ -opioid receptor agonist with analgesic properties, approved by the U.S. Food and Drug Administration for both chronic pain (transdermal and buccal formulations) and opioid use disorder, and is available in other formulations that are used off-label for pain management<sup>2</sup>; and

WHEREAS, buprenorphine demonstrates a ceiling effect for respiratory depression and euphoria, further reducing the risk of fatal overdose and misuse, and is less likely to cause euphoriant effects in nondependent individuals<sup>3</sup>; and

WHEREAS, the U.S. Department of Veterans Affairs and Department of Defense Clinical Practice Guideline (2022) specifically recommends considering buprenorphine instead of full agonist opioids for patients receiving daily opioids for chronic pain, due to its superior safety profile<sup>4</sup>; and

WHEREAS, buprenorphine/naloxone, while not FDA-approved for pain, is used off-label for chronic pain management, particularly in patients with comorbid opioid use disorder, with evidence supporting its analgesic efficacy and safety<sup>5</sup>; and

WHEREAS, the off-label use of buprenorphine for pain management is limited in Kentucky by regulatory, insurance, and educational barriers, despite its evidence-based benefits and endorsement by major U.S. clinical guidelines<sup>6,7</sup>; now, therefore, be it

RESOLVED, that KMA supports evidence-based use of buprenorphine (including buprenorphine/naloxone) for the management of pain in appropriate patients, including off-label use when clinically appropriated.

**References:**

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1. Buprenorphine for Pain: A Narrative Review and Practical Applications. Spinella S, McCarthy R. The American Journal of Medicine. 2024;137(5):406-413. doi:10.1016/j.amjmed.2024.01.022.
2. Buprenorphine for Chronic Pain Management: A Narrative Review. Vu PD, Bansal V, Chitneni A, et al. Current Pain and Headache Reports. 2023;. doi:10.1007/s11916-023-01185-4
3. Prevention of Opioid Overdose. Babu KM, Brent J, Juurlink DN. The New England Journal of Medicine. 2019;380(23):2246-2255 doi:10.1056/NEJMra1807054.
4. The Use of Opioids in the Management of Chronic Pain: Synopsis of the 2022 Updated U.S. Department of Veterans Affairs and U.S. Department of Defense Clinical Practice Guideline. Sandbrink F, Murphy JL, Johansson M, et al. Annals of Internal Medicine. 2023;176(3):388-397. doi:10.7326/M22-2917
5. Treatment of Acute Pain in Patients Receiving Buprenorphine/Naloxone. David Fiellin MD, A Benjamin Srivastava MD
6. 201 KAR 9:270 <https://apps.legislature.ky.gov/law/kar/titles/201/009/270/>
7. 201 KAR 9:260 <https://apps.legislature.ky.gov/law/kar/titles/201/009/260/>