PATIENT INFORMATION LEAFLET

SCHEDULING STATUS **S6**

NARBUP 2 mg Sublingual Tablets

NARBUP 8 mg Sublingual Tablets

The active substances are buprenorphine and naloxone.

Contains sugar:

Each 2 mg tablet contains 44,08 mg lactose monohydrate and 30 mg mannitol.

Each 8 mg tablet contains 176,32 mg lactose monohydrate and 120 mg mannitol.

Read all of this leaflet carefully before you start taking this medicine

- Keep this leaflet. You may need to read it again.
- If you have further questions, please ask your doctor or your pharmacist.
- This medicine has been prescribed for you personally and you should not share your medicine with other people. It may harm them, even if their symptoms are the same as yours

What is in this leaflet

1. What NARBUP is and what it is used for

NARBUP is a medicinal product used in opioid dependence.

NARBUP is part of a medical, social and psychological treatment programme for patients addicted to opiate (narcotic) drugs. Treatment is prescribed and monitored by doctors who are specialists in the treatment of drug dependence.

Treatment for NARBUP sublingual tablets is intended for use in adults and adolescents over 15 years of age.

2. What you need to know before you take NARBUP:

Do not take NARBUP

- If you are allergic (hypersensitive) to buprenorphine, naloxone or any of the other ingredients of NARBUP.
- If you have serious breathing problems,
- If you have serious problems with your liver,
- If you are intoxicated due to alcohol or have *delirium tremens*.

Warnings and precautions

Take special care with NARBUP:

Some people have died from respiratory failure (inability to breathe) because they misused buprenorphine or took it while in combination with other Central Nervous System depressants, such as alcohol, benzodiazepines (tranquilisers), or other opioids.

NARBUP can cause sleep-related breathing disorders such as sleep apnoea (breathing pauses during sleep) and sleep related hypoxemia (low oxygen level in the blood). The symptoms can include breathing pauses during sleep, night awakening due to shortness of breath, difficulties to maintain sleep or excessive drowsiness during the day. If you or another person observe these symptoms, contact your doctor. A dose reduction may be considered by your doctor.

Cases of acute hepatic injury (liver problems) have been reported in a context of misuse, especially by intravenous route and at high dose. These injuries could be due to special

conditions such as viral infections (chronic C hepatitis), alcohol abuse, anorexia, or medicines association (for example: antiretroviral nucleoside analogues, acetylsalicylic acid, amiodarone, isoniazid, valproate). If you have symptoms of severe fatigue, itching, or if your skin or eyes look yellow, tell your doctor immediately, so that you can receive the proper treatment.

This medicine can cause withdrawal symptoms if you take it less than six hours after you use a narcotic (e.g. morphine, heroin) or less than 24 hours after you use methadone.

This medicine can cause sleepiness which may be increased by alcohol or anti-anxiety medicines.

Advise your doctor in case of:

- recent head injury or brain disease,
- decrease of blood pressure,
- in men: urinary disorders (especially linked to enlarged prostate)
- depression or other conditions that are treated with antidepressants. The use of these medicines together with NARBUP can lead to serotonin syndrome, a potentially life-threatening condition (see “Other medicines and NARBUP”).

This medicine may mask pain reflecting some diseases. Do not forget to advise your doctor if you take this medicine.

This medicine may cause your blood pressure to drop suddenly, causing you to feel dizzy if you get up too quickly from sitting or lying down.

This medicine can cause dependence.

Athletes should be aware that this medicine, due to its active substance, may cause a positive reaction to "anti-doping tests".

Advise your doctor in case of:

- asthma or other breathing problems
- kidney disease
- liver disease

Other medicines and NARBUP

Always tell your health care provider if you are taking any other medicine. (This includes all complementary or traditional medicines.)

Using other medicines may increase the undesirable effects of buprenorphine and use of these medicines should be carefully monitored:

- tranquilisers
- anti-anxiety medicines
- anti-depressants
- benzodiazepines
- some medicines used to treat high blood pressure

Anti-depressants such as moclobemide, tranylcypromine, citalopram, escitalopram, fluoxetine, fluvoxamine, paroxetine, sertraline, duloxetine, venlafaxine, amitriptyline, doxepine, or trimipramine may interact with NARBUP and you may experience symptoms such as involuntary, rhythmic contractions of muscles, including the muscles that control movement of the eye, agitation, hallucinations, coma, excessive sweating, tremor, exaggeration of reflexes, increased muscle tension, body temperature above 38 °C. Contact your doctor when experiencing such symptoms.

Taking NARBUP with sedative medicines such as benzodiazepines (medicines used to treat anxiety or sleep disorders) or related medicines increases the risk of drowsiness, difficulties in breathing (respiratory depression), coma and may be life-threatening. Because of this, concomitant use should only be considered when other treatment options are not possible.
However, if your doctor does prescribe NARBUP together with sedative medicines, the dose and duration of concomitant treatment should be limited by your doctor.
Please tell your doctor about all sedative medicines you are taking, and follow your doctor's dose recommendation closely. It could be helpful to inform friends or relatives to be aware of the signs and symptoms stated above. Contact your doctor when experiencing such symptoms.

The following medicines may increase the buprenorphine blood concentrations, so concomitant use of these medicines together with NARBUP should be closely monitored and could require in some cases a dose reduction by your doctor:

- antiretrovirals (ritonavir, nelfinavir, indinavir)
- azole antifungals (ketoconazole, itraconazole)
- macrolide antibiotics

Naltrexone (medicine used to treat addictive disorders) may prevent the therapeutic effects of NARBUP. They should not be taken at the same time as NARBUP treatment because you may experience a sudden onset of prolonged and intense withdrawal.

If you are taking other medicines on a regular basis, including complementary or traditional medicines, the use of NARBUP with these medicines may cause undesirable interactions. Please consult your doctor, pharmacist or other healthcare provider for advice.

NARBUP with food, drink and alcohol

Do not take NARBUP together with alcoholic beverages as alcohol may possibly increase drowsiness induced by NARBUP.

Pregnancy and breastfeeding

If you are pregnant or breastfeeding, think you may be pregnant or are planning to have a baby, please consult your doctor, pharmacist or other health care provider for advice before taking this medicine.

Do not take NARBUP during pregnancy. Tell your doctor if you are pregnant or intend to become pregnant. He will decide if your treatment should be continued with an alternative medication.

Since this medicine will pass into your milk and may adversely affect the breast-fed child, you should discontinue breast-feeding while taking NARBUP.

Driving and using machines

NARBUP may cause drowsiness. If you feel tired, do not drive a motor vehicle or operate machinery.

If you have been told by your doctor that you have intolerance to some sugars, contact your doctor before taking this medicine.

This medicine contains less than 1 mmol sodium (23 mg) per tablet, that is to say essentially 'sodium-free'.

3. How to take NARBUP

Do not share medicines prescribed for you with any other person.

Always take NARBUP exactly as your doctor or pharmacist has told you. Check with your doctor or pharmacist if you are not sure.

Sublingual route is the only efficacious administration route for this medicine. Do not swallow the tablets.

Keep the tablet dose under your tongue until it dissolves. This will take 5 – 10 minutes.

Take the dose once a day.

Your doctor will determine the best dose for you. During your treatment, the doctor may adjust the dose, depending on your response. To get the greatest benefit from taking NARBUP, you must tell your doctor about all the medicines you are taking, including alcohol, medicines containing alcohol, street drugs, and any prescription medicine you are taking that had not been prescribed to you by your doctor.

Treatment duration

The length of treatment will be determined individually by your doctor.

After a time of successful treatment, the doctor may reduce the dose gradually to a lower maintenance dose. Depending on your condition, the NARBUP dose may continue to be reduced under careful medical supervision, until eventually it may be stopped.

Do not change the treatment in any way or stop treatment without the agreement of the doctor who is treating you.

The effectiveness of this treatment depends:

- on the dose,
- in combination with the associated medical, psychological and social treatment.

If you have the impression that the effect of NARBUP is too strong or too weak, talk to your doctor or pharmacist.

Your doctor will tell you how long your treatment with NARBUP will last. Do not stop treatment early, unless instructed to do so by your doctor.

If you take more NARBUP than you should

In case of overdose of buprenorphine, you must go or be taken immediately to an emergency centre or hospital for treatment.

Immediately advise your doctor or pharmacist.

In the event of overdosage, contact the nearest hospital or poison control centre.

If you forget to take NARBUP

Contact your doctor.

Do not take a double dose to make up for a missed dose.

If you stop taking NARBUP

Stopping treatment early may cause withdrawal symptoms.

If you have any further questions on the use of this medicine ask your doctor or pharmacist.

4. Possible side effects

NARBUP can have side effects.

Not all side effects reported for NARBUP are included in this leaflet. Should your general health worsen or if you experience any untoward effects while taking NARBUP, please consult your health care provider for advice.

After the first dose of NARBUP you may have some opiate withdrawal symptoms. Very common side effects (occurring in at least 1 in 10 patients) that may occur with NARBUP are: insomnia, constipation, nausea, sweating, headache, withdrawal syndrome.

Common side effects (occurring in at least 1 in 100 patients) that may occur during treatment with NARBUP are: weight loss, swelling (hands and feet), tiredness, drowsiness, anxiety, nervousness, tingling, depression, decreased sexual drive, muscle spasms, abnormal thinking, tearing disorder, blurred vision, flushing, increased blood pressure, migraines, runny nose, sore throat and painful swallowing, increased cough, upset stomach, diarrhoea, abnormal liver function, loss of appetite, flatulence, vomiting, rash, itching, hives, pain, joint pain, muscle pain, leg cramps, impotence, urine abnormality, abdominal pain, back pain, weakness, infection, chills, chest pain, fever, flu

syndrome, feeling of general discomfort, accidental injury, faintness and dizziness, drop in blood pressure on changing position from sitting or lying down to standing.

Uncommon side-effects (occurring in at least 1 in 1,000 patients) with NARBUP are: swollen glands (lymph nodes), blood abnormalities, agitation, tremor, abnormal dreams, excessive muscle activity, depersonalisation (not feeling like yourself), medicine dependence, amnesia (memory disturbance), loss of interest, exaggerated feeling of wellbeing, convulsion (fits), speech disorder, small pupil size, problems with urination, conjunctivitis, rapid or slow heartbeat, low blood pressure, palpitations, myocardial infarction (heart attack), shortness of breath, asthma, yawning, pain and sores in mouth, tongue discolouration, acne, skin nodule, hair loss, dry or scaling skin, inflammation of joints, urinary tract infection, blood in urine, abnormal ejaculation, menstrual or vaginal problems, kidney stone, sensitivity to heat or cold, allergic reactions, feelings of hostility.

Uncommon side-effects (frequency unknown) with NARBUP are: abdominal pain that radiates to back, tenderness when touching the abdomen, fever, rapid pulse, nausea, vomiting, which may be symptoms of inflammation of the pancreas (acute pancreatitis).

Misusing this medicine by injecting it can cause withdrawal symptoms, infections, other skin reactions and potentially serious liver problems (see Take special care with NARBUP).

If any of the side-effects gets serious, or if you notice and side-effects not listed in this leaflet, please tell your doctor or pharmacist.

Reporting of side effects

If you get side effects, talk to your doctor or pharmacist or nurse. You can also report side effects to SAHPRA via the “6.04 Adverse Drug Reaction Reporting Form”, found online

under SAHPRA's publications: https://www.sahpra.org.za/Publications/Index/8. By reporting side effects, you can help provide more information on the safety of NARBUP.

For reporting of side effects directly to the HCR, contact +27 11 635 0134 or email Adcock.aereports@adcock.com.

5. How to store NARBUP

Store at or below 30 °C in a dry place protected from light.

Do not remove the tablets from the outer carton and blister pack until required for use.

Keep out of reach of children.

Do not use after the expiry date stated on the label. The expiry date refers to the last day of that month.

Return all unused medicine to your pharmacist.

Do not dispose of unused medicine in drains or sewerage systems (e.g. toilets).

6. Contents of the pack and other information

What NARBUP contains

NARBUP 2 mg Sublingual Tablets: The active substance in each tablet is buprenorphine 2 mg (as buprenorphine hydrochloride) and naloxone 0,5 mg (as naloxone hydrochloride dihydrate).

NARBUP 8 mg Sublingual Tablets: The active substance in each tablet is buprenorphine 8 mg (as buprenorphine hydrochloride) and naloxone 2 mg (as naloxone hydrochloride dihydrate).

The other ingredients are: Acesulfame potassium, citric acid anhydrous, maize starch, magnesium stearate, mannitol, natural lemon and lime flavour, povidone K30, sodium citrate.

What NARBUP looks like and contents of the pack

NARBUP 2 mg Sublingual Tablets: White hexagonal biconvex tablets with N2 debossed on one side.

NARBUP 8 mg Sublingual Tablets: White hexagonal biconvex tablets with N8 debossed on one side.

NARBUP 2 mg and 8 mg Tablets are packed in blister packs of cold form blister material constructed from 25 µm nylon/ 46 µm soft temper aluminium/ 60 µm uPVC and lidding foil constructed from 20-25 µm hard temper aluminium foil with 6-8 g/m 2 PVC/PVdC lacquer, heatsealed and placed in cardboard cartons containing 7 or 28 tablets.

Holder of Certificate of Registration

Adcock Ingram Critical Care (Pty) Ltd

1 Sabax Road,

Aeroton,

Johannesburg,

2013

Tel: +27 11 494 8000

This leaflet was last revised in

Date of registration: 27 January 2026

Registration number

NARBUP 2 mg: 60/32.16/0349

NARBUP 8 mg: 60/32.16/0350