

# Successful management of opioid use disorder with buprenorphine-naloxone in a pregnant woman: A case report

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**Background:** Opioid use disorder (OUD) during pregnancy poses risks to both mother and foetus. Buprenorphine-naloxone is considered a safer treatment for pregnant women compared to methadone, but data on its efficacy are limited. This case reports the successful management of OUD in a pregnant woman using buprenorphine-naloxone. **Case presentation:** A 30-year-old pregnant woman, at 16 weeks gestation, presented to the addiction clinic with a history of heroin use for five years. She was experiencing withdrawal symptoms and sought assistance in managing her addiction. After thorough evaluation, a decision was made to initiate buprenorphine-naloxone therapy. The patient received prenatal care in conjunction with addiction treatment. Throughout the pregnancy, she experienced minimal withdrawal symptoms, and foetal development was normal. She delivered a healthy infant at term. **Discussion:** Opioid use during pregnancy increases the risk of preterm labour, neonatal abstinence syndrome, and other complications. Buprenorphine-naloxone, a partial agonist-antagonist, has been shown to reduce opioid cravings and withdrawal symptoms, making it an effective treatment for pregnant women with OUD. Unlike methadone, buprenorphine has a lower risk of respiratory depression in the neonate, which is critical in managing OUD during pregnancy. This case highlights the importance of individualized treatment planning, multidisciplinary care, and close monitoring to ensure the health of both mother and child. **Conclusion:** This case demonstrates the successful use of buprenorphine-naloxone as a safe and effective treatment for managing opioid use disorder during pregnancy. It emphasizes the need for integrated addiction and prenatal care to ensure positive outcomes for both mother and child.