

## **S8 authority explanation**

<https://www.health.nsw.gov.au/pharmaceutical/doctors/Pages/section28-requirements.aspx>

### **Any drug of addiction for a drug dependent person**

To prescribe or supply a drug of addiction to a drug dependent person, including a cannabis medicine or an opioid in Schedule 8, a NSW authority is required.

A drug dependent person defined under section 27 of the *Poisons and Therapeutic Goods Act 1966* (NSW) means a person who has acquired, as a result of repeated administration of:

- a drug of addiction, or
- a prohibited drug within the meaning of the *Drug Misuse and Trafficking Act 1985*,

an overpowering desire for the continued administration of such a drug.

### **Drugs of addiction for more than two months**

An authority from the NSW Ministry of Health is required to prescribe or supply drugs of addiction for non drug dependent persons for continuous or ongoing treatment of more than two months for any of the following:

- any drug of addiction intended for administration by injection
- any drug of addiction for inhalation, or for spray or application to mucous membranes
- alprazolam
- flunitrazepam
- buprenorphine (except transdermal preparations)
- dextromoramide
- hydromorphone
- methadone

#### **Interpretation**

If someone is taking opioids for more than 2months for chronic pain opioid dependence and pain management are closely interspersed and hard to differentiate. It was under this premise that ongoing use of opioids would have qualified for an authority, but on the same note one could argue that this is pain management and get away without an authority. This is a grey zone.

If the patient is deemed drug dependent and commenced on Suboxone, then prescribing any S8 will require authority as you prescribing a drug dependent patient.

In addition, authority for non-drug dependent patients is required in:

- buprenorphine (except transdermal preparations)
- hydromorphone
- methadone

The information on opioid prescribing was involved to highlight the impending change from an authority based system to a notification based system.

NOTE: **Dextromoramide** (included in the authority list) is a powerful opioid analgesic approximately three times more potent than morphine but shorter acting. As per my understanding, is not available in Australia and it is not to be confused with **Dextromethorphan**, a synthetically produced substance that is chemically related to codeine and is an ingredient in over the counter cough medications.

### **Final takeaway**

In a drug dependent person, authority is required for all S8 prescriptions. Caveat: If it is opioid dependence in a chronic pain patient it can be easily labelled as pain management and be managed without formal authority- GREY AREA.

In a drug dependent person, authority is required to prescribe any S8 eg if someone in community is on Suboxone as part of opioid replacement therapy and if they need Endone, Oxycontin or Targin for **more than 2 months** they will need authority.

Keep an eye out for the imminent change to a notification only system.