



Braeburn is dedicated to delivering solutions for people living with the serious, often fatal consequences of opioid use disorder.

Our mission is to develop a portfolio of next-generation therapies, with individualized dosing regimens and delivery options, to address the escalating disease burden of addiction faced by patients, healthcare providers (HCPs), payers and society. Each day 130 Americans die from opioid-related overdoses. An integrated approach to finding solutions must be accelerated in a way that will not leave anyone affected by the opioid crisis behind. Braeburn is committed to working with stakeholders and advocacy groups to increase access to all treatments for opioid use disorder and improve outcomes for patients and families.

Medication-based treatments for opioid use disorder have been found effective in reducing opioid overdose deaths. A recent study published in *Annals of Internal Medicine* showed that opioid overdose deaths were reduced by 38% in patients receiving buprenorphine as opposed to those not receiving medication-based treatment.ⁱ However, stigma and access create barriers to treatment that further exacerbate the arduous and relapsing journey for patients with OUD and their families. By design, Braeburn is solely focused on overcoming the limitations of current treatments with novel, integrated solutions that respond to the realities of those living with opioid use disorder.

Braeburn is developing long-acting buprenorphine for the treatment of opioid use disorder in a range of dosage strengths for once weekly and one monthly subcutaneous injection. CAM2038ⁱⁱ is designed to be administered by an HCP and never be in the hands of the patient. HCP-administration is believed to reduce the risk of diversion, misuse and pediatric exposure that can be associated with oral medication-based treatment.

Additionally, Braeburn is committed to working with the healthcare community to advance research and education on effective solutions to the opioid crisis. Braeburn contributes to the scientific exchange in support of evidence-based decision-making for HCPs who treat opioid use disorder with scientific publications in peer-reviewed journals and presentations. Recent presentations and publications have included: data on the efficacy and safety of long-acting buprenorphine compared to daily sublingual buprenorphine in patients new-to-treatment, analyses of difficult to treat populations, including patients using fentanyl, and the ability to maintain stability in patients converting from daily oral buprenorphine to long-acting injectable buprenorphine. We take a collaborative approach to our scientific research, working with academic institutions, individual providers and government agencies to design, monitor and evaluate studies with a focus on delivering real-world results and conclusions for application in medical practice and treatment.

Braeburn welcomes the opportunity to join the NAM Action Collaborative on Countering the U.S. Opioid Epidemic as a network organization committed to being part of the solution.

ⁱ Larochelle, et al. [Medication for opioid use disorder after nonfatal opioid overdose and association with mortality. A cohort study](#). *Annals of Internal Medicine*. June 19, 2018.

ⁱⁱ Braeburn. (2018, December 23). Braeburn Announces Tentative FDA Approval of BRIXADI™ (buprenorphine) Extended-Release Injection for the Treatment of Moderate to Severe Opioid Use Disorder [Press release]. Retrieved May 3, 2019, from <https://braeburnrx.com/braeburn-announces-tentative-fda-approval-of-brixadi-buprenorphine-extended-release-injection-for-the-treatment-of-moderate-to-severe-opioid-use-disorder/>