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### Kim's Story

As a teenager, Kim never imagined that she could find working at a rehabilitation center to be a tremendously rewarding career. But, after struggling with her own dependence on opioid prescription painkillers for years before she made a choice to turn her life around, she's now helping others to do the same.

Kim started taking prescription painkillers recreationally in high school which led her to experiment with other drugs as well—which is common with painkillers as they are commonly a gateway to other drugs. She was able to maintain her job and continue with school, but both were impacted by her growing opioid dependence. As her addiction intensified, her mood swings and irritability made her difficult to be around. Kim's constant need to have prescription painkillers put her in serious debt and her relationships fell apart. As a result, she became alienated from family and friends.

While on the verge of being kicked out of her parents' house due to her behavior, Kim was involved in a major car accident during which she had a realization that like her car, her entire life was spinning out of control and headed for disaster. She finally recognized that she would never accomplish her career goals or get what she truly wanted out of life if she continued down the path she was on. It was a wakeup call. At that moment, Kim decided to reset her reality and transform her life.

Shortly after the accident, at just 19-years-old, Kim entered a rehabilitation center and began treatment with SUBOXONE® (buprenorphine and naloxone) and counseling. As she recovered, she took up a healthy, active lifestyle, pursued her college degree and began working at the same rehabilitation center she had attended to help others struggling with addiction.

As a Reset Reality ambassador, Kim hopes to inspire others to break free from the shackles of opioid dependence and encourages them to seek help as soon as possible as "rock bottom" is different for everyone, and it is easier to climb out of the hole when you aren't completely on the bottom. Kim has found a new appreciation for the world around her and believes that everyone has the right to a meaningful and joyful life.

#### Indication

SUBOXONE® (buprenorphine and naloxone) Sublingual Film is indicated for maintenance treatment of opioid dependence as part of a complete treatment plan to include counseling and psychosocial support.

Treatment should be initiated under the direction of physicians qualified under the Drug Addiction Treatment Act.

#### Important Safety Information

SUBOXONE® (buprenorphine and naloxone) Sublingual Film should not be used by patients hypersensitive to buprenorphine or naloxone, as serious adverse reactions, including anaphylactic shock, have been reported.

**Important Safety Information (cont'd)**

SUBOXONE (buprenorphine and naloxone) Sublingual Film can be abused in a manner similar to other opioids, legal or illicit. Clinical monitoring appropriate to the patient's level of stability is essential.

Chronic use of buprenorphine can cause physical dependence. A sudden or rapid decrease in dose may result in an opioid withdrawal syndrome that is typically milder than seen with full agonists and may be delayed in onset.

SUBOXONE Sublingual Film can cause serious life-threatening respiratory depression and death, particularly when taken by the intravenous (IV) route in combination with benzodiazepines or other central nervous system (CNS) depressants (ie, sedatives, tranquilizers, or alcohol). It is extremely dangerous to self-administer nonprescribed benzodiazepines or other CNS depressants while taking SUBOXONE Sublingual Film. Dose reduction of CNS depressants, SUBOXONE Sublingual Film, or both when both are being taken should be considered.

Liver function should be monitored before and during treatment.

Death has been reported in nontolerant, nondependent individuals, especially in the presence of CNS depressants.

Children who take SUBOXONE Sublingual Film can have severe, possibly fatal, respiratory depression. Emergency medical care is critical. Keep SUBOXONE Sublingual Film out of the sight and reach of children.

Intravenous misuse or taking SUBOXONE Sublingual Film before the effects of full-agonist opioids (eg, heroin, hydrocodone, methadone, morphine, oxycodone) have subsided is highly likely to cause opioid withdrawal symptoms.

Neonatal withdrawal has been reported.

Use of SUBOXONE Sublingual Film in pregnant women or during breast-feeding should only be considered if the potential benefit justifies the potential risk.

Caution should be exercised when driving vehicles or operating hazardous machinery, especially during dose adjustment.

Adverse events commonly observed with the sublingual administration of SUBOXONE Sublingual Film are oral hypoesthesia, glossodynia, oral mucosal erythema, headache, nausea, vomiting, hyperhidrosis, constipation, signs and symptoms of withdrawal, insomnia, pain, and peripheral edema.

Cytolytic hepatitis, jaundice, and allergic reactions, including anaphylactic shock, have been reported.

This is not a complete list of potential adverse events associated with SUBOXONE Sublingual Film. Please see full Prescribing Information for a complete list at [www.suboxone.com/pdfs/SuboxonePI.pdf](http://www.suboxone.com/pdfs/SuboxonePI.pdf).



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**Important Safety Information (cont'd)**

To report an adverse event associated with taking SUBOXONE (buprenorphine and naloxone) Sublingual Film, please call 1-877-782-6966. You are encouraged to report adverse events of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.

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