

Patient-reported outcomes of subcutaneous depot buprenorphine treatment in Australian correctional centres

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Introduction and Aims: Treatment perspectives of people with opioid use disorder (OUD), particularly those in custodial settings, are not well documented. A trial of subcutaneous modified-release depot buprenorphine (depot-BPN) compared to methadone in NSW correctional centres (the UNLOC-T study) provided an opportunity to document patient reported treatment outcomes in this setting.

Design and Methods: UNLOC-T was a 16-week non-randomised open-label trial. Men and women aged ≥ 18 years with moderate to severe DSM-5 OUD currently serving a custodial sentence of ≥ 6 months were recruited. Patients not in opioid agonist treatment commenced depot-BPN ($n=67$); patients already stable on oral methadone treatment were recruited to the comparison arm ($n=62$). The Treatment Satisfaction Questionnaire for Medication (TSQM, v1.4), Treatment Burden Questionnaire (TBQ) and Australian Treatment Outcomes Profile (ATOP) were administered.

Results: While the mean TSQM global satisfaction score was similar among the depot buprenorphine group compared to the methadone group at week 16 (mean [SE] score, 78.3[2.3] vs 72.8[2.3], $p=0.19$), patients receiving depot buprenorphine scored significantly higher on the convenience sub-scale (65.1[3.0] vs 54.3[2.5], $p=0.04$). Improved outcomes were also observed for treatment burden assessed by the TBQ, where lower scores indicate lower burden: 8.15[22.1] vs 20.1[19.5], ($p<0.01$). At week 16, depot-BPN ATOP physical health ($p<0.001$), quality of life ($p=0.002$) and psychological health ($p=0.029$) scores were significantly higher than for methadone.

Discussions and Conclusions: Patients inducted and stabilised on depot-BPN reported high levels of treatment satisfaction, lower treatment burden and increased health and wellbeing compared to patients already receiving methadone. Our results are consistent with an Australian community-based randomised trial where depot-BPN patients scored higher on PROs than patients receiving sublingual-BPN. The results further highlight the importance of PROs in addiction treatment outcome studies.

Implications for Practice or Policy (optional): The study supported the roll out of depot buprenorphine across the state, increasing capacity for opioid treatment in custody and the availability of other clinical services.

Implications for Translational Research (optional): Findings illustrate the importance of patient reported outcomes in evaluating new medications and demonstrated that depot buprenorphine was acceptable to patients in custodial settings.

Disclosure of Interest Statement: *No pharmaceutical grants were received in the development of this study. This work was funded by NSW Ministry of Health. Camurus AB provided Buvidal (CAM2038) with no right of veto of publication or dissemination of results. A.J.D. reports grants from Braeburn/Camurus AB, to conduct clinical studies with buprenorphine products and travel support to Hunter New England Local Health District, which employs A.J.D. He is an honorary investigator on an Indivior-funded study of buprenorphine products and has served on an advisory board for Mundipharma. P.S.H. reports grants from Braeburn/Camurus AB, to conduct clinical studies with buprenorphine products and has served on advisory boards for Lundbeck, Indivior, AbbVie and Gilead. N.L. reports grants from Braeburn and Camurus AB to conduct sponsored and investigator-led clinical studies with CAM2038. N.L. served on Advisory Boards for Mundipharma, Indivior and Chiesi Pharmaceuticals. All other authors declare no competing interests.*