

Upscale of long acting depot buprenorphine in custodial settings NSW – changes during Covid-19 and beyond

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Issues: Opioid agonist treatment is effective but resource intensive to administer safely in custodial settings, leading to significant under-treatment of opioid dependence in these settings worldwide. Following confirmation of safety during the 2018-2019 UNLOC-T trial, and introduction of COVID-19 measures in early 2020, long acting depot buprenorphine (LADB) had become the first-line treatment option for new commencement on opioid dependence treatment (ODT) in NSW custodial setting

Approach: We reviewed available data sources including NOPSAD and state data

Key findings:

- NOPSAD A higher proportion of clients in correctional facilities were prescribed LADB (13% or 731 clients) compared to clients of public (7% or 996 clients) or private prescribers (6% or 2,092 clients)
- During Covid-19 in NSW - patients on sublingual buprenorphine–naloxone were transferred to LADB, as monthly rather than daily dosing would reduce the resources required for ODT delivery and increase availability of staff for other clinical activities
- From April 2020 LADB became the predominant treatment in NSW Custodial centres, by Dec 2022 it accounted for 79% of all ODT in custody

Discussions and Conclusions: impact on community service provision has been significant with referrals to public clinics in NSW typically being for patients on LADB, however, retention in treatment has not yet been measured. Retention in treatment should be comparable to methadone for this treatment to continue to be scaled up.

Implications for Practice or Policy (optional): Changes in prisons-based prescribing has impacted community management of OUD patients transitioning back to the community – studies to elucidate best models of care for patients and services warranted

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