

Transition to methadone take away dosing and perceived benefits at a high-capacity Temeke methadone clinic in Dar es Salaam, Tanzania

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Background:

Methadone is currently the only opioid agonist therapy provided in Tanzania and dispensed almost exclusively daily. The aim of this presentation is to present 12-month outcomes of weekly take away dosing (TAD) scale-up in 2024 to inform flexible and more person-centred models of care for methadone treatment in Tanzania and the region.

Methods:

Routine data between Jan1 and Dec31 2024 on TAD and daily dosing methadone dispensing at the Temeke Regional Referral Hospital methadone clinic, located in the City of Dar es Salaam, Tanzania, are presented. Temeke methadone clinic has more than 3500 registered clients, with about 1000 active beneficiaries being dispensed methadone daily.

Results:

143 clients were transitioned to TAD, with 124 (87%) retained in care, representing 124 of 1020 (12%) active clients at Dec31 2024. Among 1150 clients dispensed methadone daily at Jan1 (and not transitioned to TAD), 841 (73%) were retained in care by 31Dec. Most common reasons for cancellation of TAD among 19 TAD clients included missed appointment (n=12, 63%), methadone diversion (n=5, 26%), , and a treatment “supporter” no longer being available to the client (n=2, 11%). Among 53 beneficiaries interested in TAD but not transitioned, the most common barriers were concurrent use of other substances (n=23, 43%), lack of housing (n=12, 23%), not currently receiving a stable daily dose (n=10, 19%), not having a treatment “supporter” (n=5, 9%), and not being in MAT for more than six months (n=3, 6%).

Conclusion:

TAD at the Temeke MAT clinic increased retention among clients by overcoming key barriers to daily dispensing, including travel time and expenses and employment and care giving demands. TAD also reduced model of care costs and helped decongest a high-capacity clinic experiencing significant staff shortages. The service aims to increase TAD to 300 clients by reviewing current eligibility criteria.

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