

# INTEGRATED CARE APPROACHES FOR ANABOLIC STEROID USE DISORDER: A SWISS PERSPECTIVE ON PUBLIC HEALTH AND HARM REDUCTION

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## Background:

Anabolic androgenic steroids (AAS), widely used for the enhancement of physical appearance, have emerged as a significant public health concern. Despite their popularity, AAS are associated with substantial health risks, including severe side effects, development of substance use disorder and injection-associated infections.

This study aimed to evaluate the feasibility of implementing evidence-based clinical practices and drug-checking services (DCS) for people with anabolic steroid use in a Swiss primary care-based addiction unit.

## Methods:

An interdisciplinary care for people with AAS use was established at the Arud Centre for Addiction Medicine in Zurich, Switzerland. Additionally, the preexisting DCS DIZ in Zurich expanded its services to AAS. Utilizing patient records, surveys, and interviews, the study combined qualitative and quantitative analyses, as well as chemical substance testing of AAS compounds, to assess the feasibility and impact of these integrated approaches.

## Results:

In the integrated medical care, 34 patients were seen in the first 6 months. Loyalty towards the service (Net Promoter Score(NPS): 100) and patient satisfaction (Customer Satisfaction Score: 100%) were high. Mean age was 38.5 years, all males, with educational level beyond compulsory school. The primary motivation for AAS use was for aesthetic purposes. Multiple physical as well as mental health complications were reported.

52 clients accessed the DCS. 71 samples were chemically assessed. Satisfaction was high(NPS: 97). Patterns of AAS use were complex, with frequent, extensive concomitant substance use. Most AAS were acquired from non-medical sources. The sample analysis revealed that 52% of the user-provided samples were fake.

## Conclusion:

Integration of best clinical practice and DCS in existing addiction units appears to be feasible with high acceptance for AAS users. Addiction medicine will be called upon to make its experience in clinical care and harm reduction available to the large number of people with problematic AAS use.

## Disclosure of Interest Statement:

The authors declare no conflicts of interest.