

PERCEPTIONS OF INJECTABLE OPIOID AGONIST TREATMENT (IOAT) AMONG PEOPLE WHO REGULARLY USE OPIOIDS IN AUSTRALIA

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Background: Opioid agonist treatment is first line for preventing opioid mortality, yet many are not attracted, or do not experience good outcomes with current treatments. In the context of rising opioid-related mortality, there is an urgent need to explore new treatment options. The aim of this study was to explore perceptions of injectable opioid agonist treatment (iOAT) (e.g. supervised administration of heroin-assisted treatment) among people who regularly use opioids and explore how common eligibility criteria relate to those interested in iOAT treatment.

Methods: Cross-sectional survey of people who regularly use and inject opioids recruited between from needle and syringe programmes, OAT services, and word-of-mouth. Factors associated with participant perception that iOAT would be a good treatment option for them were assessed. Published eligibility criteria for iOAT were extracted from published trials and clinical guidelines.

Results: Among 344 enrolled participants, the mean age of 41.5 years (SD 8.5) and 36% were female). Overall, 53% (n=182) indicated that iOAT would be a good treatment option for them. Participants who believed that iOAT was a good treatment option for them were more likely to be male (aOR 1.75, 95%CI 1.11, 2.75), have engaged in criminal activity in the past 12 months (aOR 1.76, 95%CI 1.12, 2.78), used heroin in the past month (aOR 5.62, 95%CI 3.36, 9.42), currently regularly inject opioids (aOR 1.78, 95%CI 1.15, 2.78) and met ICD-10 criteria for opioid dependence (aOR 3.26, 95% CI 1.61, 6.62). Among those interested in iOAT (n=182), 26% (n=48) met common eligibility criteria for iOAT.

Conclusion: Interest in iOAT is not universal among people who regularly inject opioids. Most respondents supported existing criteria for iOAT. Among those who expressed an interest in iOAT, most did not meet eligibility criteria, indicating that iOAT may be an important option for a minority of service users.

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