

Prevalence of Substance Use Disorders Among Individuals with Opioid Use Disorder: A Systematic Review and Meta-analysis

Thomas Santo Jr¹, Gabrielle Campbell^{1,2}, Natasa Gisev¹, Daniel Martino-Burke¹, Samantha Colledge-Frisby^{1,3}, Brodie Clark¹, Lucy Thi Tran¹, Louisa Degenhardt¹

¹National Drug and Alcohol Research Centre, UNSW Sydney, ²National Centre For Youth Substance Use Research, University of Queensland, ³National Drug Research Institute, Curtin University, ⁴Matilda Centre, The University of the Sydney

Presenter's email: t.santo@unsw.edu.au

Introduction: The co-occurrence of substance use disorders (SUDs) among individuals with opioid use disorder (OUD) has important implications for treatment and clinical management. Understanding the prevalence of specific SUDs in this population is crucial for developing targeted interventions and improving health outcomes.

Method: We conducted a systematic review and meta-analysis to estimate the prevalence of SUDs among individuals with OUD. A comprehensive search was performed, and eligible studies were selected based on predefined criteria. Pooled estimates were calculated using random-effects models, and subgroup analyses were conducted based on sample characteristics.

Results: Of the 36,971 publications identified, we included data from 193 studies and 76,916 participants with OUD in at least one pooled estimate. The current prevalence of any SUD was 62.6% (95% CI: 49.0–75.3%), alcohol use disorder was 26.6% (95% CI: 23.9–29.3%), cannabis use disorder was 20.5% (95% CI: 15.6–25.9%), cocaine use disorder was 27.4% (95% CI: 18.4–37.5%), methamphetamine use disorder was 11.2% (95% CI: 6.2–17.4%), and sedative use disorder was 15.6% (95% CI: 12.5–18.9%). Estimates varied significantly by sample characteristics and methodological factors, including sex, geographic region, and type of SUD assessment tool.

Discussions and Conclusions: The high prevalence of co-occurring SUDs among individuals with OUD highlights the need for non-opioid SUD treatment access. Healthcare providers should address the complex treatment needs of this population through comprehensive interventions targeting both OUD and co-occurring SUDs.

Implications for Practice or Policy: These findings highlight the importance of a comprehensive approach to address co-occurring OUD and non-opioid SUDs. Policies should enhance access to evidence-based treatments, including medication-assisted treatment, behavioural therapies, and harm-reduction strategies. This requires investing in specialised programs, training healthcare providers, and integrating substance use disorder treatment into primary care. Expanding overdose prevention and harm reduction initiatives is crucial to reduce risks and harms.

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