

## **Clients entering New South Wales (nsw) alcohol and other drug (aod) treatment services: characteristics by principal drug of concern (pdoc), July 2016-June 2019**

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### **Introduction and Aims:**

Use of electronic medical records (eMR) in AOD treatment services allows us to characterise the treatment population on a large scale. We describe the client population according to the main substance (PDOC) they sought treatment for.

### **Design and Methods:**

Routinely collected measures of demographics, substance use, social functioning, health and wellbeing were extracted by six local health districts between 2016-2019. A multivariate multinomial logistic regression (n=10,978) examined client profiles across five PDOCs: alcohol, amphetamine-type substances (ATS), cannabis, cocaine and opioids.

### **Key Findings:**

Compared to the reference category of alcohol (n=4975), clients with ATS as PDOC (n=1715) had lower odds of engaging in work and/or study (alcohol PDOC=44%, ATS PDOC=23%, OR=0.51, 95% confidence interval [CI] 0.42-0.61). Clients with cannabis as PDOC (n=1646) had lower odds of work/study (alcohol PDOC=44%, cannabis PDOC=36%, OR=0.78, CI 0.65-0.93) and arrest (alcohol 10%, cannabis PDOC=8%, OR=0.52, CI 0.38-0.715). Clients with cocaine as PDOC (n=144) had greater odds of reporting work/study (cocaine PDOC=69%, OR=2.1, CI 1.37-3.35). Clients with opioids as PDOC (n=2498) had lower odds of reporting work/study (opioids PDOC=14%, OR=0.29, CI 0.24-0.35), arrest (opioids PDOC=7%, OR=0.39, CI 0.28-0.55) and violence (alcohol PDOC=11% opioids PDOC=7%, OR=0.51, CI 0.37-0.70) and greater odds of reporting housing stress (alcohol PDOC=10%, opioids PDOC=18%, OR=1.73, CI 1.37-2.20). Significant differences in demographics, substance use and wellbeing were also identified.

### **Discussions and Conclusions:**

The PDOC reported by clients seeking AOD treatment was associated with different characteristics, social conditions, substance use and wellbeing.

### **Implications for Practice or Policy:**

Findings support the use of comprehensive assessment that discusses the broader context of clients' lives and other substance use at entry to treatment. These data can assist services to understand the different patterns of social, risk and health issues across different PDOCs, contributing to holistic and client-centred care.

**Implications for Translational Research:**

Consistent with the NSW Clinical Care Standards, routinely collected data can be used for service planning, evaluation and development.

**Disclosure of Interest Statement:**

Two of the investigators (KJS and NE) work for the National Centre for Clinical Research on Emerging Drugs (NCCRED), the organisation funding the study. Investigators AD and NL sit on the board of NCCRED and investigators AS and MF are employees of the National Drug and Alcohol Research Centre (NDARC, UNSW) which is a member of the NCCRED consortium group. NL has received funding from Camurus and Indivior for unrelated research.

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