

# ASSOCIATIONS WITH CHILDHOOD TRAUMA AND COMORBID MENTAL DISORDERS AMONG PEOPLE WITH OPIOID DEPENDENCE

## Authors:

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## Introduction:

Childhood trauma and mental disorders increase risk of opioid dependence. We examined if childhood trauma and mental disorders were associated with outcomes related to opioid agonist treatment (OAT), crime, and mortality among people with opioid dependence.

## Method:

The sample included 1,482 people receiving OAT. Exposure variables of interest were four latent classes of childhood trauma and five different mental disorders. We used discrete-time analysis with odds ratios (ORs) to examine time from opioid dependence onset to OAT entry. We used Poisson regressions with Incident Rate Ratios (IRRs) to analyse time in OAT and criminal offending. Logistic regression was used to examine mortality risk. All analyses used 95% Confidence Intervals (95% CIs).

## Results:

Experience of multiple childhood trauma types (OR 0.78, 95%CI 0.66-0.92;  $p=0.004$ ), anti-social personality disorder (ASPD; OR 0.39, 95%CI 0.28-0.55,  $p<0.001$ ), and depression OAT (OR 1.98, 95%CI 1.31-2.95;  $p=0.001$ ) were associated with OAT receipt in any given year after opioid dependence onset. Panic disorder (IRR 0.52, 95%CI 0.51-0.53;  $p<0.001$ ), PTSD (IRR 0.52, 95%CI 0.51-0.53;  $p<0.001$ ) and borderline personality disorder (IRR 0.52, 95%CI 0.51-0.53;  $p<0.001$ ) were associated with less time in OAT. Multiple childhood trauma experiences (IRR 1.29, 1.01-1.65;  $p=0.043$ ), ASPD (IRR 1.44, 1.18-1.76;  $p<0.001$ ) and borderline personality disorder (IRR 1.47, 1.34-1.62;  $p<0.001$ ) increased risk of criminal offending. There were no significant associations between exposure variables and mortality.

## Discussions and Conclusions:

Interventions that aim to reduce harm among people with opioid dependence may consider the effect of childhood trauma and mental disorders on OAT engagement and crime.

## Disclosure of Interest Statement:

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