

# **MORTALITY AMONG INDIVIDUALS PRESCRIBED OPIOID-AGONIST THERAPY IN SCOTLAND, 2011-2022: A NATIONAL RETROSPECTIVE COHORT STUDY**

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## **Background:**

Scotland's drug-related death (DRD) rate has increased rapidly to one of the highest in the world. Our aim was to examine the extent to which opioid-agonist therapy (OAT) in Scotland is protective against drug-related mortality and how this effect has varied over time.

## **Methods:**

We included individuals in Scotland with opioid use disorder who received at least one OAT prescription between 1 January 2011 and 31 December 2022. We calculated drug-related mortality rates and used quasi-Poisson regression models to estimate trends over time and by OAT exposure, adjusting for potential confounding.

## **Results:**

In a cohort of 49,435 individuals prescribed OAT with a total of 360,000 person years of follow-up, DRD rates more than trebled from 6.36 per 1,000 pys (95% CI: 5.73 to 7.01) in 2011-12 to 21.45 (95% CI: 20.31 to 22.63) in 2019-20. By 2021-22, there was evidence that this rapid rise had begun to plateau. DRD rates were around three and a half times higher (HR 3.62, 95% CI: 3.34 to 3.93) for those off OAT at time of death relative to those on OAT after adjustment for confounders. However, DRD risk increased over time after adjustment for both people off *and* on OAT.

## **Conclusion:**

Drug-related mortality rates among people with opioid use disorders in Scotland increased between 2011 and 2020, before levelling off during the Covid-19 pandemic. OAT remains protective but is insufficient on its own to slow the increase in DRD risk experienced by people who are opioid dependent in Scotland.

## **Disclosure of Interest Statement:**

All authors report no conflicts of interest relevant to this work.