

FEASIBILITY AND EFFECTIVENESS OF EXTENDED-RELEASE BUPRENORPHINE (XR-BUP) AMONG CORRECTIONAL POPULATIONS: A SYSTEMATIC REVIEW

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Abstract (297/300 words)

Introduction:

Correctional populations experience elevated rates of opioid use disorder (OUD). Providing opioid agonist treatment (OAT) to individuals prior to community release reduces risks for relapse and overdose, yet numerous barriers hinder treatment retention, including daily OAT dosing requirements. Extended-release buprenorphine (XR-BUP), a long-acting injectable/implantable OAT formulation reduces frequency of clinic visits, which may be particularly beneficial for correctional populations. Due to the novelty of XR-BUP, limited evidence exists on its feasibility and effectiveness. The current systematic review aimed to close this knowledge gap.

Methods:

Systematic searches were carried out in Pubmed, Embase, and PsychINFO using relevant MeSH search terms. Article screening was completed in two stages: Titles and abstracts, and full texts. Data was extracted into a standardized Excel chart, and results were narratively reported under the following main outcomes: 1) Feasibility, including interest, preference, and viability, safety, and cost; 2) Effectiveness, including drug use, treatment retention, health care utilization, and re-incarceration; and 3) Barriers and facilitators.

Results:

A total of nine studies were included. Studies were heterogeneous in terms of setting, design, sample characteristics, analyses, and outcomes. Available data indicate that providing XR-BUP to correctional

populations is viable, safe, and cost-effective, and incarcerated individuals have a strong interest in and preference for this formulation. Results also highlighted the effectiveness of XR-BUP, particularly during the initial post-release period, as it can result in reduced drug use, overdoses and healthcare utilization, and increased treatment retention and community reintegration.

Conclusion:

The provision of XR-BUP to correctional populations is a feasible and effective alternative treatment option for OUD both within correctional settings and upon community release. XR-BUP can reduce many of the risks associated with community release, as well as barriers to treatment retention. Efforts to expand access to and uptake of this formulation among correctional populations are warranted.

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