

Reviewing the impacts of the Melbourne Supervised Injecting Room.

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Background:

Supervised injecting facilities have been operating in multiple countries since the 1980s. The Melbourne Supervised Injecting Room was established in North Richmond in 2018 with stated aims related to positive benefits seen in other such facilities around the world, including a reduction in overdose fatalities. The MSIR was originally set up as a three-year trial with continuation contingent upon a review of effectiveness. Positive initial findings across a range of measures including ambulance attendances involving naloxone administration led to the continuation of the MSIR operations and the proposal for the establishment of a second MSIR in Melbourne's Central Business District. In this presentation we detail some of the initial findings of the review along with plans for a new comprehensive review methodology to provide additional information on the effectiveness of the MSIRs.

Methods:

We used the SuperMIX prospective cohort study (N=1328) to provide an initial examination of the impact of the MSIR on key outcomes self-report and linked data such as ambulance attendances at non-fatal overdose. Here, outcome incidence rates for cohort participants who used the facility for the majority of their injections were compared with those who used the facility infrequently (>0% but <50% of their injections) and those who did not use the facility at all.

Results:

Incidence of non-fatal opioid overdoses attended by ambulance decreased after the MSIR opened for those who used the facility frequently (IRR=0.39, p<0.05), but not for those who used the facility infrequently (IRR=1.03, p>0.1) compared to cohort members who did not use the facility. There was no evidence of impacts of the facility on the remaining outcomes likely reflecting the relatively short time series available for examination.

Conclusion:

We observed positive effects of the MSIR on one primary outcome related to the stated objectives of the MSIR. We propose a new review framework, extending the prospective cohort design involving more extensive participant recruitment and longer data linkage to examine the effectiveness of supervised injecting facilities in the Melbourne context.

Disclosure of Interest Statement:

PD has received an investigator-driven grant from Gilead Sciences for unrelated work on hepatitis C and an untied educational grant from Reckitt Benckiser for unrelated work on the introduction of buprenorphine-naloxone into Australia. He has served as an unpaid member on an Advisory Board for an intranasal naloxone product.