

SARS-COV-2 VACCINE UPTAKE AND RISKS OF SEVERE COVID-19 DISEASE AMONG PEOPLE PRESCRIBED OPIOID AGONIST THERAPY IN SCOTLAND

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Background:

People who use drugs are at potentially increased risk of severe outcomes from COVID-19 due to their expected higher prevalence of comorbidities compared with the general population. We aimed to examine the uptake of vaccination for SARS-CoV-2 and risks of severe COVID-19 disease among people with a recent history of opioid agonist therapy (OAT) in Scotland.

Methods:

40,654 individuals prescribed OAT (either methadone, buprenorphine or buprenorphine-naloxone) between 2015-2020 were linked to other healthcare (including vaccination, hospital and deaths) data at Public Health Scotland up to 22nd February 2022. Vaccine-uptake in the OAT cohort was compared to general population controls matched for age, sex and deprivation profile. In each epidemic wave of the pandemic, the risk of a severe case of COVID-19 (defined as critical care or death and compared to general population matched controls) associated with prescription of OAT in the last five years was examined using conditional logistic regression.

Results:

By 22nd February 2022, vaccine uptake was lower in the surviving OAT cohort (67% first, 53% second and 29% third/booster dose) compared to matched controls (76%, 72% and 56%, respectively). Across all four waves of the pandemic, those prescribed OAT within the last 5 years were at increased risk of severe COVID-19 disease (relative risks in wave 1: 3.6, 95% CI 2.1-6.1; wave 2: 2.9, 2.0-4.2; wave 3: 3.8, 2.6-5.6; wave 4: 5.7, 3.3-10.0); additional adjustment for comorbidity and vaccination status attenuated the risk (wave 4: 2.7, 1.4-5.0).

Conclusion:

The gap in vaccine uptake for those prescribed OAT, compared to the general population, has widened with the roll-out of each additional recommended dose, and exacerbated the risk of severe COVID-19 disease in this group as the pandemic has evolved. Our data highlight the need for additional efforts to improve vaccine coverage among people who use drugs.

Disclosure of Interest Statement:

All authors have nothing to disclose.