The transition for prison to community: A period of heightened overdose risk in a cohort of men with injecting drug use histories in Victoria, Australia

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Introduction: The transition from prison to community for people with injecting drug use (IDU) histories presents a period of elevated overdose risk. The investigation of pre-release risk factors for overdose among Australian PWID is not well understood. We describe self-reported overdose events in the first three months following release among a cohort of men with histories of IDU recruited in Victorian prisons and identify pre-release risk and protective factors.

Design and Methods: Baseline data from interviews conducted in the weeks prior to prison release and data on self-reported post-release overdose events reported at three-month follow-up interviews were collected as part of the Prison and Transition Health (PATH) Cohort Study.

Results: Of the 400 men recruited from baseline, 279 (70%; M_{age} =36.1, SD = 8.0) were followed-up three months post-release. Twenty-six men (9%) reported at least one post-release overdose, with a total of 43 overdose events. Heroin was involved in 25 of participants’ last reported overdose; naloxone was administered at 13 of these events, 12 instances of which naloxone was administered by paramedics. Univariate logistic regression indicate self-reported history of acquired brain injury (OR = 2.90, 95%CI 1.24-6.74) recent overdose (OR = 3.79, 95%CI 1.00-14.30) and heroin use in the month prior to their current incarceration (OR = 7.11, 95%CI 1.38-36.64) are associated with increased overdose risk.

Conclusions: Consistent with previous studies, release from prison represented a period of high risk of overdose among study participants. Despite recent initiatives to expand naloxone among PWID in Victoria, naloxone administration by peers has been limited in this group.

Implications for Practice: In-prison overdose prevention training and naloxone distribution at release for people detained in prison with IDU histories has the potential to reduce overdose mortality during the high-risk post-release period and provide a mechanism to expand naloxone reach among PWID in Victoria.

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