

“I wouldn’t know what to do if they cut me off”: unique barriers to help-seeking in consumers with pharmaceutical opioid dependence.

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Introduction / Issues: Contemporary opioid dependent populations are known to be heterogeneous, yet only limited research focusses on people with a non-illicit aetiology of their opioid dependence. It is important that views and experiences of such consumers are explored to inform policies and treatment approaches.

Method / Approach: A longitudinal, qualitative approach was taken. Participants were recruited from two groups: people who had recently commenced treatment for pharmaceutical opioid dependence, and consumers of pharmaceutical opioids who met dependence criteria and were not receiving treatment. Interviews were conducted with each participant in three waves: at baseline, 3 months, and 6 months. This presentation relates to the thematic analysis of the baseline data.

Key Findings: Eighteen participants were recruited (eight to the in-treatment group and ten to the out-of-treatment group). Previously cited barriers to seeking treatment for opioid dependence such as stigma and negative perceptions were reported along with additional barriers. Participants described not wanting to tell their prescriber or anyone else about their dependence for fear of their opioid supply being stopped. They revealed self-management strategies such as controlling and avoiding interactions with prescribers. Attempts to seek help included conducting online research and transferring to a new prescriber.

Discussions and Conclusions: This consumer group has unique barriers to overcome in accessing help for opioid dependence, as their “opioid supplier” (the prescriber) is also the person to whom they might turn for help.

Implications for Practice or Policy: These findings represent opportunities to improve access to help for people with pharmaceutical opioid dependence. These could include prescriber education regarding the challenges such health consumers face and support in their management and increasing public awareness of the availability of help.

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