CORRELATES OF NON-FATAL OPIOID OVERDOSE AMONG A COHORT OF PEOPLE WHO INJECT DRUGS IN MELBOURNE, AUSTRALIA

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Introduction and Aims: Many people who inject drugs (PWID) are at risk of non-fatal opioid overdose but few contemporary Australian studies have analysed this risk. In this study we use data from SuperMIX, a cohort study of PWID, to identify the correlates of ever and recent opioid overdose of PWID in Melbourne.

Design and Methods: The prevalence of reports of lifetime overdose and recent (past six months) were calculated from SuperMIX data (N=757). Associations between these outcomes and sociodemographic characteristics, drug and injecting related behaviours and self-reported health service use were examined using logistic regression.

Results: 42% of the cohort reported ever having experienced an opioid overdose and 23% reported overdosing in the past six months. Reports of recent overdose were positively associated with emergency department (ED) access in the last month (AOR 2.62, 95% CI 1.45-4.71; p=0.001) and past-month benzodiazepine use (AOR 2.37, 95% CI 1.20-4.67; p=0.012). Participants who reported ever having overdosed were more likely to report having ever been incarcerated (AOR 1.41, 95% CI 1.03-1.92; p=0.031), having accessed an ED (AOR 1.41, 95% CI 1.03-1.92; p=0.031) or psychologist or psychiatrist in the last month **(**AOR 1.54, 95% CI 1.02-2.33; p=0.041), or used benzodiazepines in the last month (AOR 1.91, 95% CI 1.33-2.73; p<0.001).

Discussions and Conclusions: We identified a range of factors related to opioid overdose experience in the SuperMIX cohort at baseline. Further research is needed to understand how these patterns vary over time in the cohort.

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