

Public opioid dispensary clinic clients and their use of health services pre and post 2020 COVID-19 restrictions in Sydney, NSW

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Introduction: During Sydney's 2020 COVID-19 restrictions the implementation of depot-buprenorphine was upscaled rapidly. Opioid treatment programs (OTPs) changed the way opioid agonist treatment (OAT) clients interacted with these services. We explore the impact of these changes on public OTP clients during this time.

Method: One hundred and fifty-six clients of a Sydney inner-city OTP participated in a survey of their treatment experience post-COVID-19 restrictions, compared to receiving OAT in the 12-months prior, which included the restriction period. Participants received a \$20 shopping voucher for completing the survey. Experiences of receiving methadone vs. depot-buprenorphine were compared post restrictions; other treatments were excluded for this analysis.

Key Findings: At the time of interview, 90 patients received methadone (58%), 43(28%) depot-buprenorphine, and 23 other OTP (15%). Methadone patients were majority male (64%) and on average 44 years-old, depot-buprenorphine patients were also largely male (54%) and 44 years-old. Overall, methadone and depot-buprenorphine patients were satisfied with their treatment (80% vs 82%). In 12-months prior (during covid restrictions), 91% of current methadone patients had not changed their treatment, however, 64% of depot-buprenorphine patients had been on alternative treatment. In the 12-months post-restrictions, methadone and depot-buprenorphine patients had similar instances of reported overdose, GP attendance and counselling, however participants on methadone reported higher use of needle syringe programs (NSPs) (41% vs 19%, $p=0.01$) and hepatitis C treatment (16% vs 2%, $p=0.024$).

Discussions and Conclusions: OAT clients reported similar use of healthcare and satisfaction. Methadone patients appeared to have a slightly higher use of NSPs and hepatitis C treatment.

Implications for Translational Research (optional): Our research suggests that depot-buprenorphine clients remain engaged in healthcare despite less frequent attendance at public OTPs, suggesting more medically vulnerable clients could still be considered for depot-buprenorphine treatment.