

COMPARISON OF OPIOID TREATMENT PROGRAM OUTPATIENT REFERRALS AT CENTRE FOR ADDICTION MEDICINE WESTERN SYDNEY LOCAL HEALTH DISTRICT, PRIOR AND AFTER “UP-SCHEDULING CODEINE” POLICY, 20TH OCTOBER 2014- 20TH FEBRUARY 2019

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Introduction and Aims: After “codeine up-scheduling” policy implementation in 1st February 2018, codeine containing analgesics are only dispensed with prescription. (1-3) There has been a general conception that drug and alcohol services demand would be increased after implementation of this policy in Australia.(4)

As there has been no study done on Western Sydney Local Health District (WSLHD) Drug Health services demand after the policy implementation, we aimed to compare the sociodemographic, clinical indicators and the number of codeine dependent patients starting Opioid Treatment Program (OTP), prior and after policy implementation.

Design and Methods: This is a cross-sectional retrospective study. Codeine dependent patients who started OTP in outpatient services between 20th October 2014 and 20th February 2019 were included. The sociodemographic, clinical indicators and the number of patients starting OTP were compared. The data was analysed using descriptive statistics.

Results: The patients were mostly Australians (72%) with mean age of 37 years. Post policy implementation, all of the patients reported to primarily used codeine for pain, were started on buprenorphine-naloxone film and retained more on OTP (86% versus 53%). Interestingly, two years after policy announcement and implementation, the number of codeine dependent patients starting OTP reduced (85.5% versus 14.5%, $p < 0.05$).

Discussions and Conclusions: This study demonstrated a decrease in WSLHD Drug Health service demand post policy implementation. However, all of the patients suffering from the pain mostly retained on the program. This study addressed one of the outcome indicators for evaluation of the new policy at district level in Australia.

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