PSYCHOMETRIC VALIDATION OF THE TREATMENT EFFECTIVENESS ASSESSMENT IN PATIENTS WITH OPIOID USE DISORDER

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Background:
The Treatment Effectiveness Assessment (TEA) is an efficient, patient-centered instrument for evaluating progress in recovery from substance use disorders, including opioid use disorder (OUD).[1,2] This study evaluated the psychometric properties of the TEA in a moderate to severe OUD cohort and determined minimally important differences (MIDs) for total and subscale scores.

Approach:
Participants with moderate to severe OUD in a Phase III clinical trial for RBP-6000 completed the TEA at screening and before injections at 1 (baseline), 3, 6, 9 and 12 months. The TEA consists of 4 single-item domains (Substance Use, Health, Lifestyle, Community) measuring improvement from involvement in a treatment program; domain scores range from 1 ("not much") to 10 ("much better") and total scores range from 4 to 40. Floor and ceiling effects, internal consistency, test-retest reliability, known-groups validity, and MIDs (anchor and distribution-based methods) were evaluated.

Outcomes:
Within the 410 participants (mean age 38 years; 64% male), the mean±SD baseline TEA total score was 25.4±9.7. At baseline, <10% of patients were at the floor, and 10%-20% were at the ceiling of the measure across domains. Internal consistency was high (Chronbach's α =0.89), with reasonable test-retest reliability (intraclass correlation coefficient= 0.68). The TEA total score significantly demonstrated differentiation between known groups by current health status (SF-36 item 1; ANOVA-based $P<0.001$). MIDs ranged from 5-8 for the TEA total score.

Conclusions:
Within this moderate to severe OUD cohort, the TEA demonstrated acceptable evidence of reliability and validity.
The TEA is an easily completed measure that can help clinicians and patients benchmark and track recovery in clinical research and in real-world treatment settings.

Disclosure of Interest Statement: