

THE ASSOCIATION BETWEEN DELAYED RETURN AND TRANSFER EXPERIENCE AMONG METHADONE MAINTENANCE TREATMENT PARTICIPANTS IN GUANGDONG, CHINA: A RETROSPECTIVE COHORT STUDY

Cheng Gong^{1#}, Xia Zou^{1#}, Wen Chen¹, Yin Liu¹, Li Ling^{1*}

¹ Faculty of Medical Statistics and Epidemiology, School of Public Health, Sun Yat-sen University, Guangzhou, China

Background:

Transfer service were provided for participants who need short-term leaving in methadone maintenance treatment (MMT), and it is currently utilized in different countries. Despite the monitoring system of MMT were conducted to restrict the transferred participants, delayed returns are common phenomenon among transfer participants, which may lead to missing monitoring during this period, and increased the risks of relapse. But Few studies have focused on delayed return among MMT participants and assessed the associated factors. The objects of this study were to know the transfer experience of MMT participants and explore the association between delayed return and transfer experience.

Methods:

This study is a retrospective cohort study. We included a total of 632 participants from four MMT clinics in Guangdong province who utilized transfer services from January 1st, 2006 to December 31th, 2015. The participants were categorized as delayed return if participants were failed to be back to the local MMT clinic for at least one day after the due date of transfer duration. A logistic regression model was employed to identify the high risk characteristics of delayed return from transfer of participants.

Results:

Among 632 participants, 328 (51.90%) had delayed return experience. The average transfer times were 3.00 [IQR:1.00-7.00] for per participants. Per transfer participants had 16.00 days [IQR:6.50,32.00] days in one transfer. The delayed return related-risk including repeatedly admitted into MMT [odds ratio (OR) (95%CI):1.32(1.09,1.61), $P=0.005$], more transfer times [OR (95%CI):1.10 (1.07,1.14)], less methadone daily dose [OR (95%CI):0.99 (0.98,1.00)] and longer transfer duration [OR (95%CI):1.01 (1.01,1.02)], had a higher likelihood of delayed return after transfer than participants without delayed return situation.

Conclusion:

Delayed return among MMT participants are common. Those who were frequently and long-term transferred, and had worse compliance to MMT have high risk of delayed return to the local clinics. Strengthening the transfer management system and monitoring these high risk groups are urgently needed.

Keywords: Methadone maintenance treatment, transfer, delay