Drug treatment for opioid dependence 2013

Dependence on opioid drugs such as heroin or morphine is associated with a range of health and social problems that affect individual drug users, their family and friends, and the wider public. Treatment with an opioid pharmacotherapy drug such as methadone or buprenorphine can reduce drug cravings, improve physical and mental health and reduce drug-related crime.

The National opioid pharmacotherapy statistics 2013 report provides information on clients receiving opioid pharmacotherapy treatment on a snapshot day in June 2013, the doctors prescribing opioid pharmacotherapy drugs and the dosing points (such as pharmacies) that clients attend to receive their medication.

Fast facts

Clients
• Two in 3 clients were male.
• Median age of clients was 40.
• The average age of clients is increasing.
• One in 10 clients identified as being Aboriginal and/or Torres Strait Islander.
• Heroin was the most common opioid drug of dependence for which treatment was sought.
• Two in 3 clients were treated with methadone.

Prescribers
Of opioid pharmacotherapy prescribers:
• 82% worked in the private sector
• 71% were authorised to prescribe more than 1 type of pharmacotherapy drug
• an average of 23 clients were treated by each prescriber.

Dosing points
Of the places dispensing opioid pharmacotherapy:
• 88% were pharmacies
• an average of 20 clients were dosed at each dosing point.
Numbers of people receiving pharmacotherapy treatment remained steady

Over 47,000 Australians were on a course of pharmacotherapy treatment for their opioid dependence on a snapshot day in June 2013. The number of people receiving opioid pharmacotherapy treatment almost doubled between 1998 (from around 25,000 people) and 2013, but growth in client numbers slowed in recent years (to less than 1% a year from 2010–2013). New South Wales had the highest rate of people receiving opioid pharmacotherapy (26 clients per 10,000 people), while the Northern Territory had the lowest (6 clients per 10,000 people).

Heroin was by far the most common opioid drug of dependence for clients

Clients receive pharmacotherapy treatment for a range of opioid drugs. These include illicit opioids (such as heroin), and pharmaceutical opioids, which are available illicitly, by prescription (such as oxycodone) or over-the-counter (such as codeine-paracetamol combinations). Clients were about twice as likely to report heroin as an opioid drug of dependence than they were for all pharmaceutical opioids, which are available illicitly, by prescription (such as oxycodone) or over-the-counter (such as codeine-paracetamol combinations). Clients were about twice as likely to report heroin as an opioid drug of dependence than they were for all opioid pharmaceuticals combined; however this varied by jurisdiction.

Methadone continued to be the most commonly prescribed drug

Around two-thirds (67%) of clients were treated with methadone in 2013, and the remaining third (33%) were treated with a form of buprenorphine. From 2008–2013, treatment with:

- methadone fell slightly (from 70% of clients to 67%)
- buprenorphine fell (from 15% to 13%)
- buprenorphine–naloxone rose (from 16% to 20%)

The naloxone is added to deter injection.

In 2013, treatment with methadone ranged from 31% of clients in the Northern Territory to 79% of clients in the Australian Capital Territory (Figure 1).

The average age of opioid pharmacotherapy clients increased

Around two-thirds (69%) of clients in 2013 were aged 30–49, and this proportion has been fairly consistent since 2006. However, from 2006–2013 the proportion of clients aged under 30 more than halved (from 28% to 11%), and the proportion of clients aged 50 and over more than doubled (from 8% to 19%). These trends suggest an ageing cohort of people in opioid pharmacotherapy treatment.

Clients in Victoria had the youngest median age (37 years) and clients in New South Wales and South Australia had the oldest median age (41 years).

Methadone was the mostly commonly prescribed pharmacotherapy across all age groups. Older clients were more likely to receive methadone and less likely to receive buprenorphine and buprenorphine-naloxone than younger clients (Figure 2).

Prescriber numbers increased and most prescribers worked in the private sector

Methadone and buprenorphine are controlled drugs, and health professionals need authorisation to prescribe them to clients. Nationally, there were 2,025 authorised prescribers of opioid pharmacotherapy drugs in 2013, an increase of 15% from 2012. The majority (71%) of these prescribers were authorised to prescribe more than one type of drug.

The majority of prescribers worked in the private sector (82%), with the remainder working in the public sector (13%), correctional facilities (3%), or a combination of sectors (2%). Each prescriber treated an average of 23 clients, but this varied widely by sector and state or territory.

- Prescribers working in the public sector had, on average, about 2 and a half times as many clients as prescribers in the private sector (49 clients per prescriber compared with 19).
- Western Australia had the highest number of clients per prescriber (34), while the Northern Territory had the lowest (12).

Most dosing points were located in pharmacies

Most clients need to attend a dosing point regularly to take their opioid pharmacotherapy drug under supervision. Nationally, there were 2,355 dosing points in Australia in 2013.

- The majority were located in pharmacies (88%), followed by hospitals, public clinics and correctional facilities such as prisons.

The proportion of clients taking each drug type varied between dosing points.

- Clients taking buprenorphine-naloxone were more likely to dose at a pharmacy (84%) than clients taking methadone (71%) or buprenorphine only (55%).
- Clients taking methadone were more likely to be dosing in a correctional facility (9%) than clients taking buprenorphine only (4%) or buprenorphine-naloxone only (3%) (Figure 3).

Males and Indigenous people were over-represented in pharmacotherapy treatment

Around two-thirds (65%) of clients receiving pharmacotherapy in June 2013 were male. This proportion was similar for each of the 3 pharmacotherapy types (methadone, buprenorphine and buprenorphine-naloxone), and has remained stable since 2006.

The analysis of the 2013 data that follows should be treated with caution due to the high proportion of clients (42%) for whom Indigenous status is either not reported or not stated.

Where reported, about 1 in 10 clients identified as Aboriginal and/or Torres Strait Islander. Indigenous people were around 3 times as likely to have received pharmacotherapy treatment as the non-Indigenous population. Indigenous clients were more likely to be treated with methadone (73%) than non-Indigenous pharmacotherapy clients (66%).
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(there naloxone is added to deter injection).

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Related data sets
In addition to the National opioid pharmacotherapy statistics 2013 report, the AIHW also reports information on tobacco, alcohol and other drug use and treatment from the following data sets:
- Alcohol and Other Drug Treatment Services National Minimum Data Set
- National Drug Strategy Household Survey
- National Hospital Morbidity Database
- National Prisoner Health Data Collection.

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