# bulletin 62

# National Opioid Pharmacotherapy Statistics Annual Data collection: 2007 report

# **Highlights**

The National Opioid Pharmacotherapy Statistics Annual Data (NOPSAD) collection provides national data on clients being treated with medication (pharmacotherapy) for their dependence on opioid drugs such as heroin. It also provides statistics on those prescribing the medication. The data are based on a 'snapshot' period—usually a day—in June.

This is the first bulletin featuring national data exclusively from the NOPSAD collection.

(highlights continued overleaf)

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# **Highlights**

- At 30 June 2007, there were about 39,000 clients. Of those clients, around 25,000 (64%) were male.
- More than seven in ten (72%) clients were receiving methadone and the remainder received buprenorphine or buprenorphine/naloxone.
- There were 1,295 registered prescribers.
- More than six in ten (64%) clients received treatment from a private prescriber.
- There were 2,173 pharmacotherapy dosing point sites.
- Most (87%) dosing point sites were located in pharmacies.

# **Background**

In Australia, people with opioid dependence have been treated using opioid pharmacotherapy for a number of decades (methadone since 1969 and buprenorphine since the 1980s). The Australian Government funds the provision of pharmacotherapy drugs via pharmaceutical benefits arrangements, through clinics and pharmacies approved by state and territory governments. Treatment of opioid dependence is administered according to the law of the relevant state or territory, and within a framework which includes not only medical treatment, but also social and psychological treatment.

In January 2007, the Australian Government Department of Health and Ageing released the report *National pharmacotherapy policy for people dependent on opioids* (DoHA 2007). This was prepared to provide a broad policy context and a framework for state and territory policies and guidelines that are concerned with the treatment of opioid dependence with methadone, buprenorphine and naltrexone.

The broad goal of treatment for opioid dependence is to reduce the health, social and economic harms to individuals and the community arising from illicit opioid use (DoHA 2007).

In 1985, methadone maintenance treatment was endorsed as Australian policy, and national information on the numbers of pharmacotherapy clients was first collated in 1986. In December 1999, the Commonwealth Government and state and territory governments, through the National Health Information Management Group, endorsed the Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS–NMDS) and collection commenced on 1 July 2000. However, due to particular complexities in collecting information about pharmacotherapies, agencies whose sole activity is to prescribe and/or dose for opioid pharmacotherapy treatment are excluded from the scope of the AODTS–NMDS collection. Instead, data on clients participating in opioid pharmacotherapy treatment have been routinely collected by state and territory health departments and provided each year to the Australian Government Department of Health and Ageing. In 2005, the Department of Health and Ageing commissioned the Australian Institute of Health and Welfare (AIHW) to manage the collection, including

the analysis and reporting of pharmacotherapy treatment data. A set of agreed standards for reporting were developed in consultation with states and territories, and the National Opioid Pharmacotherapy Statistics Annual Data (NOPSAD) collection was developed. While jurisdictions strive to report data consistent with agreed standards, the NOPSAD collection is not a national minimum data set and some discrepancies do exist between the ways various jurisdictions report data.

# What is the NOPSAD collection used for?

The main purpose of the current NOPSAD collection is to aggregate standardised jurisdictional data on clients accessing pharmacotherapy for the treatment of opioid dependence, information on prescribers participating in the delivery of pharmacotherapy treatment, and quantitative information about the prescribing sector.

The NOPSAD collection is one of a number of data sources that provide a picture of alcohol and other drug treatment services in Australia. Data from the NOPSAD collection can also be considered along with information from other sources (for instance, the AODTS-NMDS and the National Drug Strategy Household Survey) to inform debate, policy decisions and planning processes that occur within the broader alcohol and other drug treatment sector. More specifically, pharmacotherapy data are used in states and territories to:

- monitor resources required for pharmacotherapy treatment, such as the number of prescribers and dosing points
- monitor and plan services (e.g. monitoring prescriber patterns and capping number of clients)
- develop and refine policies relating to treatment of clients with opioid dependency
- track the number of clients moving between the public and private sectors
- · assist in monitoring deaths of clients of pharmacotherapy treatment programs
- monitor client access to treatment
- fill gaps in national treatment services data.

# **Scope of the NOPSAD collection**

The collection covers the provision of opioid pharmacotherapy treatment, the practitioners who prescribe the treatment, the dosing sites where the pharmacotherapy drugs are dispensed, and the clients receiving the opioid pharmacotherapy treatment.

The following pharmacotherapies are currently recommended for the treatment of opioid dependency (DoHA 2008):

- methadone hydrochloride—Methadone Syrup®, Biodone Forte®
- buprenorphine—Subutex<sup>®</sup>
- buprenorphine/naloxone—Suboxone®.

Methadone, buprenorphine and buprenorphine/naloxone can be used as short-term or long-term detoxification medications or indefinitely as maintenance medications. Maintenance programs allow clients to stay on methadone, buprenorphine or buprenorphine/naloxone indefinitely. These substances provide clients with an alternative to using illicit drugs.

# **Box 1: Pharmacotherapy—clinical descriptions**

#### Methadone

Methadone is a synthetic opioid agonist primarily used in maintenance therapy and may also be used as a withdrawal agent for those dependent on opioids. Methadone reduces the use of heroin through cross-tolerance which results in a reduction of heroin withdrawal symptoms, less desire to use heroin, and reduced euphoric effect when heroin is used. Methadone is taken orally on a daily basis (DoHA 2007).

# **Buprenorphine**

Buprenorphine is often called a partial opioid agonist with high receptor affinity. It has actions similar to the full agonist drugs but with less efficacy such that increases in dose have progressively less increase in effect. Two buprenorphine products are currently registered in Australia for the treatment of opioid dependence within a framework of medical, social and psychological treatment: the mono product (Subutex®) is a sublingual tablet containing buprenorphine hydrochloride in 0.4, 2 and 8 mg strengths; the combination product (Suboxone®) is a sublingual tablet containing buprenorphine hydrochloride and naloxone hydrochloride in a ratio of 4: 1. Suboxone® is available in two dosage strengths—2mg buprenorphine and 0.5mg naloxone, and 8mg buprenorphine and 2mg naloxone. The properties of buprenorphine and naloxone are such that, when taken sublingually, Suboxone® will act as if it was buprenorphine alone. However, if the combined preparation is injected, the naloxone will have a clinically significant effect such that it is likely to attenuate the effects of the buprenorphine in the short-term, and is also likely to precipitate withdrawal symptoms in opioid-dependent individuals using heroin or methadone (DoHA 2007).

## Naltrexone

Naltrexone is an adjunctive therapy (which means it is used in combination with other treatment, for example, counselling) in the maintenance of formerly opioid-dependant patients who have ceased the use of opioids. It is not included in this collection due to scheduling compliance conditions (there is no legislative requirement to report prescription of the substance to government authorities).

Methadone clinics (private or public) and approved pharmacies can dispense methadone, buprenorphine and buprenorphine/naloxone. They must follow the doctor's prescribed dosing plan. At commencement of the program, clients need to attend the clinic or pharmacy to take their dose under supervision (Pharmaceutical Society of Australia 2005). In certain circumstances, clients may be eligible to receive a takeaway dose. The takeaway dose for methadone is determined for each jurisdiction in line with the National Policy on Methadone Treatment (DoHA 2003). The policy for unsupervised dosing of buprenorphine and buprenorphine/naloxone is determined by each Australian jurisdiction. Prescribers are required to check with the relevant authority in their jurisdiction to determine if there is a preference as to which formulation of buprenorphine is used for unsupervised dosing (Lintzeris et al. 2006).

# **Terminology**

The main counts of the NOPSAD collection in 2007 are prescribers, dosing sites and clients (see Box 2 for definitions).

It is important to remember that counts in the NOPSAD collection relate to a particular day. The use of a 'snapshot/specified' day permits the number of clients to be estimated at a single point in time. The 'snapshot/specified' day varies slightly between jurisdictions. Snapshot data provide a glimpse of pharmacotherapy treatment activity on a specified day but do not capture the total estimated activity throughout any given year. However, the snapshot data are considered to be a good representation of the total client base.

# **Box 2: Key definitions for the NOPSAD collection**

**Prescribers** refers to the number of registered prescribers who have undergone accreditation and/or authorisation to prescribe a pharmacotherapy drug, and who have not been recorded as ceasing this registration prior to the 'snapshot/specified' day.

More specifically, prescribers should be included in the count, if they are either:

- registered or authorised prescribers; or
- active prescribers, or prescribers that are scripting at least one client over the reporting period (i.e. financial year).

**Pharmacotherapy dosing point site** refers to the dosing point at which at least one client is provided a pharmacotherapy drug on the 'snapshot/specified' day. Dosing point sites include:

- public clinics
- private clinics
- pharmacies
- correctional settings
- other, that is, inpatients in hospital, outpatients in hospital, community health centres, doctors' surgeries and dosing points 'not stated'.

**Clients** refers to the number of people registered as receiving opioid pharmacotherapy treatment on the 'snapshot'specified' day.

# **Scope and data presentation**

Several statistics referring to the number of clients registered for pharmacotherapy treatment are presented in this bulletin. The statistics differ slightly for a number of reasons including differing counting rules in states and territories and differing capability to report on client dosing practices and demographics. Box 3 presents information about the total number of pharmacotherapy clients within scope of the NOPSAD collection and the subsets of those clients described in this bulletin.

# Box 3: Scope and presentation of NOPSAD data in this bulletin

**38,843**—This figure relates to the total number of clients in all jurisdictions registered for treatment on the snapshot day.

**38,727**—This figure is lower than the above because the Northern Territory does not report client statistics by age group.

**38,568**—This figure is lower than the first because it refers to clients registered for treatment who received or took a dose on the snapshot day. According to the NOPSAD collection data definitions, these clients are referred to as active clients. South Australia reports both registration and dosing statistics because they use two data sources. The source varies by table in the Bulletin. The difference between these two statistics in South Australia relates to those clients who are registered for treatment but for some reason did not attend a dosing point on the snapshot day. They are counted in registration statistics but not in dosing statistics.

**38,498**—This figure is lower than both the first and third because it does not include 70 Queensland clients who may have received a takeaway dose for the snapshot day. While they are counted in the 'received a dose' or active category (because they consumed a dose on the snap-shot day), they did not actually enter a dosing point on the snapshot day to receive that dose and so do not appear in dosing point statistics (Table A2). Other jurisdictions report dosing point information on all clients including those receiving takeaway doses.

**24,256**—This figure is much lower than the others as only four jurisdictions are able to report information on Indigenous status.

# Administrative features in each jurisdiction

Each state and territory uses a slightly different method to collect data on pharmacotherapy prescription and dosing (Table 1). These differences are driven by jurisdictional differences such as varying legislation, computer systems and resources. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.

Table 1: Administrative features of the NOPSAD collection in each jurisdiction

Jurisdiction	Methodology
New South Wales	The Pharmacotherapy Drugs of Addiction System (PHDAS) is primarily used to assist the administration of the NSW Opioid Treatment Program. Information reported into the database is used to inform the issuing of authority to doctors to prescribe as part of the NSW Opioid Treatment Program. The database also records patient admissions and exits into and out of treatment, as well as details of approved prescribers and dosing points. For these reasons, PHDAS is characterised by continual fluctuations, and data extracted at different times for the same period may not be the same. However, while delays in reporting entries into the program, exits from the program, and changes in the status of dosing points cause short-term fluctuations in the database, these fluctuations flatten out over the course of a full year.
	Client data are reported in New South Wales as at 30 June.
Victoria	Data are collected from:
	<ul> <li>a quarterly census of pharmacists, whereby pharmacists are requested to report the actual number of clients being dosed on a specified day</li> </ul>
	<ul> <li>the permit database, which records information about practitioners authorised to prescribe pharmacotherapy drugs, as well as demographic information about clients dosing for pharmacotherapy treatment.</li> </ul>
	These two data sources cannot be linked.
	The Victorian pharmacotherapy system is essentially entirely community-based, other than inpatients in hospitals and in prisons. Although a small number of services receive government funding they are independent bodies and services and are not managed directly by government.
Queensland	Data are collected monthly from pharmacists and entered into a central database managed by the Drugs of Dependence Unit. Data are also collected from the administrative 'Admission' and 'Discharge' forms. National and Queensland totals may vary slightly due to these data source differences. For example, a client may be counted as registered and having received a dose on the snapshot day but a dosing point cannot be assigned because the dose consumed on the snap-shot day was a take-away dose.
	Client data for Queensland are reported on a specified day.
Western Australia	Data are collected monthly from pharmacists and entered into a central database managed by the Pharmaceutical Services Unit. Data are also collected from the 'Application for authority', 'Authority to prescribe' and 'Termination of treatment' forms.
	Client data are reported in Western Australia for the entire month of June. Prior to 2005, Western Australia reported clients over a year.
South Australia	Data are collected from the forms 'Application for authority', 'Termination of treatment', 'Authority to prescribe' and 'Request for take-away doses', which are entered into a central database system at Drug and Alcohol Services South Australia (DASSA). Information from scripts are also collected electronically from pharmacists monthly and sent to DASSA. Tables 2 and 3 contain information on those clients who are dosed on a specified day and Table 4 contains data on those clients registered for treatment on the specified day (but who may not actually receive treatment on that day).
	From 2007, data are collected via a quarterly census of pharmacists and reported on a specified day.
Tasmania	Data are collected from pharmacists participating in the Tasmanian Pharmacotherapy program, and stored in the Drug and Alcohol Pharmacy Information System (DAPIS). This central database is managed through the Pharmaceutical Services Unit, and is a 'live' database, from which a snapshot for any day can be taken.
	Client data are reported in Tasmania on a specified day.
Australian Capital Territory	Client participation data are collected from the Alcohol and Drug Program databases and from prescription dosing records provided by community pharmacies. General practitioner and pharmacy participation data are collected from the Chief Health Officer's records and quarterly phone contact.
	Client data are reported in the Australian Capital Territory on a specified day.
Northern Territory	Prescribers complete the forms 'Authority', 'Variation' and 'Cessation', and submit them to the Department of Health and Community Services Poisons Control for entry into a central database. Pharmacies also submit copies of scripts to the same database. The Northern Territory aggregates data throughout the year.
	Client data are reported in the Northern Territory on a specified day.

# Numbers of clients receiving pharmacotherapy treatment

Nationally, an estimated 38,568 clients were receiving pharmacotherapy treatment on the 'snapshot/specified' day in June 2007 (Tables 2 and 3). This figure has remained relatively stable since 2004 and has increased by approximately 50% (from 24,657) since 1998.

The largest proportion of clients was seen in New South Wales (42%), followed by Victoria (29%) and Queensland (11%) (Table 3). Western Australia and South Australia both provided services to approximately 7% of clients receiving pharmacotherapy treatment in 2007, however, the figure reported for Western Australia was for the number of clients who received treatment in the entire month of June.

Table 2: Total number of pharmacotherapy clients receiving pharmacotherapy treatment on a 'snapshot' specified' day by state and territory, 1998–2007

	NSW	Vic	Qld	WA <sup>(a)</sup>	SA	Tas	ACT	NT	Australia
1998	12,107	5,334	3,011	1,654	1,839	306	406	_	24,657
1999	12,500	6,700	3,341	2,449	1,985	370	559	2	27,906
2000	13,594	7,647	3,588	2,140	2,198	423	615	32	30,237
2001	15,069	7,743	3,745	2,307	2,522	464	641	25	32,516
2002	15,471	7,700	3,896	3,602	2,417	513	590	21	34,210
2003	16,165	8,685	4,289	4,079	2,486	498	686	98	36,986
2004	15,719	10,003	4,470	4,437	2,706	576	748	82	38,741
2005	16,469	10,753	4,440	2,883	2,857	588	764	183	38,937
2006	16,355	10,736	4,637	2,888	2,517	602	790	134	38,659
2007	16,348	11,051	4,309	2,822	2,559	600	765	114	38,568

<sup>(</sup>a) In Western Australia the numbers of clients receiving pharmacotherapy treatment are reported through the month of June 2007. The 2005, 2006 and 2007 figures reported for Western Australia are substantially lower than previous years, which included data for the whole year.

Note: Each state and territory uses a different method to collect data on pharmacotherapy prescription and dosing. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.

# Type of pharmacotherapy received

On a 'snapshot/specified' day in 2007, more than seven in ten clients (72%) registered for pharmacotherapy treatment were receiving methadone and the remaining 28% received buprenorphine or the combination product buprenorphine/naloxone (Table 3).

It is important to note that the number of clients receiving buprenorphine/naloxone is an underestimate since New South Wales and Queensland (and Tasmania and the Australian Capital Territory in 2006) were not able to separately identify the number of clients receiving buprenorphine/naloxone. In New South Wales and Queensland, clients receiving buprenorphine/naloxone are reported under the category 'buprenorphine'.

The proportion of clients prescribed methadone, buprenorphine or buprenorphine/naloxone varied across jurisdictions, although over 60% of clients in most jurisdictions were prescribed methadone.

Table 3: Total number of pharmacotherapy clients receiving pharmacotherapy treatment on a 'snapshot' specified' day, by type of pharmacotherapy provided and jurisdiction, 2006 & 2007

Pharmacotherapy drug type	NSW <sup>(a)</sup>	Vic	QId(a)	WA <sup>(b)</sup>	SA	Tas	ACT	NT	Australia
					2007 (Numbe	r)			
Methadone	13,596	6,630	2,676	1,957	1,643	512	607	48	27,669
Buprenorphine	2,752	1,548	1,633	246	556	73	83	34	6,925
Buprenorphine/naloxone	_	2,873	_	619	360	15	75	32	3,974
Total	16,348	11,051	4,309	2,822	2,559	600	765	114	38,568
					(Per cen	t)			
Methadone	83.2	60.0	62.1	69.3	64.2	85.3	79.3	42.1	71.7
Buprenorphine	16.8	14.0	37.9	8.7	21.7	12.2	10.8	29.8	18.0
Buprenorphine/naloxone	_	26.0	_	21.9	14.1	2.5	9.8	28.1	10.3
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Per cent of all clients by jurisdiction	42.4	28.7	11.2	<i>7.3</i>	6.6	1.6	2.0	0.3	100.0
					2006 <sup>(c)</sup> (Per cen				
Methadone	83.9	59.6	61.2	64.8	62.5	86.5	75.9	53.0	71.4
Buprenorphine	16.1	26.8	38.8	18.8	30.9	13.5	24.1	30.6	23.2
Buprenorphine/naloxone	_	13.6	_	16.4	6.6	_	_	16.4	5.5
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Per cent of all clients by jurisdiction	42.3	27.8	12.0	7.5	6.5	1.6	2.0	0.3	100.0

 $<sup>(</sup>a)\ In\ New\ South\ Wales\ and\ Queensland,\ clients\ prescribed\ buprenorphine/naloxone\ are\ counted\ under\ buprenorphine.$ 

Note: Each state and territory uses a different method to collect data on pharmacotherapy prescription and dosing. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.

Methadone was most commonly prescribed in:

- Tasmania (85%, or 512 of 600 clients)
- New South Wales (83%, or 13,596 of 16,348 clients)
- the Australian Capital Territory (79%, or 607 of 765 clients).

Buprenorphine was most commonly prescribed in:

- Queensland (38%, or 1,633 of 4,309 clients)
- the Northern Territory (30%, or 34 of 114 clients)
- South Australia (21%, or 556 of 2,559 clients).

Of those jurisdictions able to identify clients receiving buprenorphine/naloxone, dosing for this drug was most common in:

- the Northern Territory (28%, or 32 of 114 clients)
- Victoria (26%, or 2,873 of 11,051 clients)
- Western Australia (22%, or 619 of 2,822 clients).

These figures represent large increases relative to those observed for buprenorphine/naloxone in 2006.

<sup>(</sup>b) The number of clients on the program on a 'snapshot/specified' day in June, except for Western Australia, where the number of clients treated through the month of June is reported.

# Number of clients receiving pharmacotherapy treatment, drug type and prescriber type

Of the 38,843 estimated clients authorised to receive pharmacotherapy treatment on the 'snapshot/specified' day in June 2007 (Table 4):

- 64% (or 24,700) received the treatment from a private prescriber
- 28% (or 10,695) received the treatment from a public prescriber
- 8% (or 2,995) received the treatment from a practitioner in a correctional facility.

Table 4: Estimated number of pharmacotherapy clients by pharmacotherapy drug type and prescriber type on a 'snapshot/specified' day, 2005–2007

Prescriber type	Methadone	Buprenorphine <sup>(a)</sup>	Buprenorphine/ naloxone	All drug types(b)						
		2007 (Numb								
Public Prescriber	7,729	2,569	397	10,695						
Private Prescriber	17,051	4,236	3,413	24,700						
Public/Private Prescriber(c)	368	84	1	453						
Correctional Facilities	2,626	214	155	2,995						
Total <sup>(d)</sup>	27,774	7,103	3,966	38,843						
		(Per ce	nt)							
Public Prescriber	27.8	36.2	10.0	27.5						
Private Prescriber	61.4	59.6	86.1	63.6						
Public/Private Prescriber(c)	1.3	1.2	_	1.2						
Correctional Facilities	9.5	3.0	3.9	7.7						
Total	100.0	100.0	100.0	100.0						
	2006 (Per cent)									
Public Prescriber	28.3	30.1	8.2	27.7						
Private Prescriber	61.9	65.2	91.3	64.2						
Public/Private Prescriber(c)	1.4	1.0	_	1.2						
Correctional Facilities	8.4	3.7	0.5	6.9						
Total	100.0	100.0	100.0	100.0						
		2005 (Per cent)								
Public Prescriber	23.3	20.9	n.a.	23.5						
Private Prescriber	68.7	75.9	n.a.	69.8						
Public/Private Prescriber(c)	0.2	0.1	n.a.	0.1						
Correctional Facilities	7.8	3.0	n.a.	6.6						
Total	100.0	100.0	n.a.	100.0						

 $<sup>(</sup>a) \ \ In \ Western \ Australia \ the numbers of clients \ receiving \ pharmacotherapy \ treatment \ are \ reported \ through \ the \ month \ of \ June \ 2007.$ 

#### Notes

<sup>(</sup>b) In Queensland and New South Wales clients prescribed buprenorphine/naloxone are counted under buprenorphine.

<sup>(</sup>c) In New South Wales, these figures relate to prescribing that cannot be segregated into public of private prescribers.

<sup>(</sup>d) This total for all drug types differs from the estimated number of clients reported in Tables 2 and 3, as the client count in South Australia for this table refers to those clients registered for treatment (but who may not receive a dose on the snapshot day).

<sup>1.</sup> Each state and territory uses a different method to collect data on pharmacotherapy prescription and dosing. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.

<sup>2.</sup> Data on buprenorphine/naloxone only prescribers were not reported in 2005.

# Number of clients receiving pharmacotherapy treatment, drug type and dosing point site

As reported earlier in this bulletin, dosing point sites were most commonly located in pharmacies (Table 5). More specifically:

- 93% of buprenorphine/naloxone clients dosed at a pharmacy
- + 70% of buprenorphine clients dosed at a pharmacy
- 67% of methadone clients dosed at a pharmacy.

Table 5: Estimated number of pharmacotherapy clients by pharmacotherapy drug type and dosing point site on a 'snapshot/specified' day<sup>(a)(b)</sup>, 2006–2007

Dosing point site	Methadone	Buprenorphine <sup>(c)</sup>	Buprenorphine/ naloxone	All drug types						
		2007 (Numbe	r)							
Public clinic	3,282	1,002	89	4,153						
Private clinic	2,440	688	27	3,375						
Pharmacy	18,451	4,901	3,694	26,519						
Correctional setting	2,549	187	164	3,409						
Other <sup>(d)(e)</sup>	764	260	_	1,042						
Total	27,486	7,038	3,974	38,498						
	(Per cent)									
Public clinic	11.9	14.2	2.2	10.8						
Private clinic	8.9	9.8	0.7	8.8						
Pharmacy	67.1	69.6	93.0	68.9						
Correctional setting	9.3	2.7	4.1	8.9						
Other <sup>(d)</sup>	2.8	3.7	_	2.7						
Total	100.0	100.0	100.0	100.0						
	2006 <sup>(e)</sup> (Per cent)									
Public clinic	12.9	12.7	1.5	12.3						
Private clinic	9.3	8.5	1.8	8.7						
Pharmacy	67.4	73.9	94.5	70.4						
Correctional setting	8.5	3.5	2.2	7.0						
Other	1.9	1.5	_	1.7						
Total	100.0	100.0	100.0	100.0						

<sup>(</sup>a) The number of clients on the program on a 'snapshot/specified' day in June, except for Western Australia, where the number of clients treated through the month of June is reported.

<sup>(</sup>b) Queensland excludes clients who are not physically dosed on the 'snapshot/specified' day in 2007. That is, they physically received a double or triple dose of buprenorphine prior to the 'snapshot/specified' day which would have remained in their systems to cover the 'snapshot/specified' day (valid for 2006 & 2007).

<sup>(</sup>c) In Queensland and New South Wales clients prescribed buprenorphine/naloxone are counted under buprenorphine.

<sup>(</sup>d) In New South Wales the category 'other' includes clients dosed at hospitals, as hospital inpatients or hospital outpatients, as well as a small number of clients dosed in general practices. 'Other' also includes persons for whom the dosing point was not stated.

<sup>(</sup>e) The total estimated number of clients reported in Table 5 in 2006 excludes pharmacotherapy clients in the Northern Territory as data relating to dosing point sites and clients are not available.

# Demographic profile of clients receiving pharmacotherapy treatment

# Number of clients receiving pharmacotherapy treatment, drug type and sex

Of the 38,843 estimated clients authorised to receive pharmacotherapy treatment on a 'snapshot/specified' day in June 2007, 24,892 (or 64%) were male (Table 6). This proportion was similar for clients receiving methadone (63% of clients were male), and slightly higher for clients receiving buprenorphine (67%).

In New South Wales and Queensland, clients receiving buprenorphine/naloxone or buprenorphine treatment cannot be separately identified and are counted under buprenorphine. Of those clients receiving buprenorphine/naloxone that were able to be identified, 67% were male.

Females accounted for 35% of all pharmacotherapy clients on the 'snapshot/specified' day in 2007—36% of clients receiving methadone, 33% of clients receiving buprenorphine/naloxone and 33% of clients receiving buprenorphine.

Appendix Table A3 provides further breakdown of pharmacotherapy drug type by sex and jurisdiction.

Table 6: Estimated number of pharmacotherapy clients by pharmacotherapy drug type and sex of the client on a 'snapshot/specified' day, 2006 & 2007

Sex	Methadone	Buprenorphine	Buprenorphine/ Naloxone <sup>(a)</sup>	All drug types
		2007 (Number	)	
Male	17,525	4,724	2,643	24,892
Female	10,111	2,352	1,291	13,754
Not stated	138	27	32	197
Total	27,774	7,103	3,966	38,843
		(Per cent	)	
Male	63.1	66.5	66.6	64.1
Female	36.4	33.1	32.6	35.4
Not stated	0.5	0.4	0.8	0.5
Total	100.0	100.0	100.0	100.0
		2006 (Per cent	)	
Male	62.8	67.9	65.5	64.2
Female	36.8	31.6	33.3	35.4
Not stated	0.3	0.5	1.1	0.4
Total	100.0	100.0	100.0	100.0

(a) In New South Wales and Queensland, clients prescribed buprenorphine/naloxone are counted under buprenorphine.

# Number of clients receiving pharmacotherapy treatment, drug type and age group

For the 2007 collection, all jurisdictions except the Northern Territory were able to provide information on the age group of clients receiving pharmacotherapy treatment.

For clients whose age group could be indentified on the 'snapshot/specified' day in 2007, 39% (or 14,962) were aged 30–39 years, 28% were aged 40–49 years, 22% were aged 20–29 years, fewer than 4,000 clients (or 10%) were aged 50–59 years, and fewer than 1% of clients were aged either 10–19 years or 60 years and over (Table 7). Of those clients in the 30–39 years age group, 37% (or 10,368) were receiving methadone as their pharmacotherapy treatment.

Table 7: Estimated number of pharmacotherapy clients by pharmacotherapy drug type and age group of the client on a 'snapshot/specified' day, 2006 & 2007

Age group	Methadone	Buprenorphine	Buprenorphine/ Naloxone <sup>(a)</sup>	All drug types <sup>(b)</sup>							
		2007 (Numb									
10–19 years	73	35	13	121							
20–29 years	5,689	1,907	985	8,580							
30–39 years	10,368	2,852	1,742	14,962							
40–49 years	8,358	1,698	888	10,944							
50–59 years	3,107	538	284	3,929							
60 years and over	130	38	23	191							
Total	27,725	7,068	3,934	38,727							
		(Per cent)									
10–19 years	0.3	0.5	0.3	0.3							
20–29 years	20.5	27.0	25.0	22.2							
30–39 years	37.4	40.4	44.3	38.6							
40–49 years	30.1	24.0	22.6	28.3							
50–59 years	11.2	7.6	7.2	10.1							
60 years and over	0.5	0.5	0.6	0.5							
Total	100.0	100.0	100.0	100.0							
		2006 (Per ce									
10–19 years	0.6	1.0	1.0	0.7							
20–29 years	24.9	34.1	35.6	27.7							
30–39 years	36.2	38.4	40.3	36.9							
40–49 years	29.3	21.1	18.8	26.9							
50–59 years	8.7	5.1	4.2	7.6							
60 years and over	0.3	0.3	0.2	0.3							
Total	100.0	100.0	100.0	100.0							

<sup>(</sup>a) In New South Wales and Queensland, clients prescribed buprenorphine/naloxone are counted under buprenorphine.

<sup>(</sup>b) The total estimated number of clients reported excludes pharmacotherapy clients in the Northern Territory where data relating to the age group of clients was not available.

# Number of clients receiving pharmacotherapy treatment, drug type and Indigenous status

In 2007, four jurisdictions were able to provide a profile of Indigenous status of pharmacotherapy clients, namely New South Wales, Queensland, South Australia and the Australian Capital Territory.

Of the 24,256 clients whose Indigenous status could be identified on the 'snapshot/ specified' day in 2007, 7% (or 1,768) of clients identified as being of Aboriginal and/or Torres Strait Islander origin (Table 8). Approximately one in five (22%) clients did not report their Indigenous status.

As with the analysis relating to Indigenous status generally, caution should be taken when interpreting the differences in Indigenous status across drug types due to the high 'not stated' response for clients receiving methadone treatment.

Table 8: Estimated number of pharmacotherapy clients by pharmacotherapy drug type, Indigenous status of the client on a 'snapshot/specified' day, 2007

Indigenous status	NSW <sup>(a)</sup>	Qld <sup>(a)</sup>	SA	ACT	Total <sup>(b)</sup>	Total (%)
			Methadone	1		
Indigenous	1,287	59	75	33	1,454	7.8
Non-indigenous	9,783	1,907	506	574	12,770	68.6
Not stated	2,526	710	1,167	_	4,403	23.6
Total	13,596	2,676	1,748	607	18,627	100.0
			Buprenorphi	ne		
Indigenous	234	40	12	1	287	5.5
Non-indigenous	2,433	1,477	194	82	4,186	80.5
Not stated	85	116	528	_	729	14.0
Total	2,752	1,633	734	83	5,202	100.0
		!	Buprenorphine/na	loxone		
Indigenous	_	_	26	1	27	6.3
Non-indigenous	_	_	173	74	247	57.8
Not stated	_	_	153	_	153	35.8
Total	_	_	352	75	427	100.0
			Total			
Indigenous	1,521	99	113	35	1,768	7.3
Non-indigenous	12,216	3,384	873	730	17,203	70.9
Not stated	2,611	826	1,848	_	5,285	21.8
Total	16,348	4,309	2,834	765	24,256	100.0

<sup>(</sup>a) In New South Wales and Queensland, clients prescribed buprenorphine/naloxone are counted under buprenorphine.

<sup>(</sup>b) The total number of clients reported in this table excludes pharmacotherapy clients in Victoria, Western Australia, Tasmania and the Northern Territory where data relating to Indigenous status of clients was not available.

# **Prescribers of pharmacotherapy drugs**

# Number of prescribers authorised/accredited to prescribe pharmacotherapy drugs

Every jurisdiction has a registration process through which a general practitioner becomes authorised to prescribe a pharmacotherapy drug. This registration process usually involves attending a training course on prescribing pharmacotherapies and/or passing an exam.

As methadone was the first drug used for opioid pharmacotherapy treatment, jurisdictions first authorised their practitioners to prescribe only for this drug. With the introduction of buprenorphine as an opioid pharmacotherapy drug, the registration process in most jurisdictions changed to allow practitioners to prescribe for both drug types. Some prescribers, for various reasons, are authorised to prescribe buprenorphine only and buprenorphine/naloxone only.

The data presented in Table 9 relate to all 'registered prescribers', except for prescribers in New South Wales and South Australia. Prescribers in New South Wales relate to 'active prescribers' only and prescribers in South Australia relate to 'active private prescribers' only—that is, prescribers who are prescribing at least one client as at June 2007.

Nationally in 2007, 1,295 practitioners were authorised to prescribe pharmacotherapy drugs during the financial year. Of these:

- 27% (355) were registered to prescribe methadone only
- 4% (54) were registered for buprenorphine only
- Fewer than 1% (5) were registered for buprenorphine/naloxone only
- 68% (881) were registered to prescribe more than one drug type.

Prescribers in South Australia and the Northern Territory follow a single accreditation process which allows them to prescribe for all pharmacotherapy drugs. In New South Wales, clients prescribed buprenorphine/naloxone are counted under buprenorphine only.

Since 2005, the pattern of prescriber registration has varied for each jurisdiction (Table 9):

- In 2007, Victoria accounted for the largest proportion of prescribers (38%), followed by New South Wales (35%), Queensland (8%), Western Australia (7%) and South Australia (6%). Tasmania, the Australian Capital Territory and the Northern Territory had the lowest percentage of prescribers at 4%, 2% and 1% respectively.
- In 2006, Victoria accounted for the largest proportion of prescribers (38%), followed by New South Wales (34%) and Queensland (11%).
- In 2005, Victoria accounted for the largest proportion of prescribers (35%), followed by New South Wales (34%), Queensland (10%), Tasmania (7%), Western Australia and South Australia (6%) each and the Australian Capital Territory and the Northern Territory at 2% and 1% respectively.

Table 9: Estimated number of prescribers registered to prescribe pharmacotherapy drugs by drug type and jurisdiction, 2005-2007

Pharmacotherapy drug type	NSW <sup>(a)</sup>	Vic	Qld <sup>(b)</sup>	WA <sup>(c)</sup>	SA	Tas <sup>(d)</sup>	ACT	NT	Total	Total %
					20	07				
Methadone only	176	122	2	15	_	29	11	_	355	27.4
Buprenorphine only <sup>(e)</sup>	30	_	5	1	_	18	_	_	54	4.2
Buprenorphine/naloxone only	_	_	_	_	_	5	_	_	5	0.4
Authorised to prescribe more than one drug type	246	371	92	70	74	_	14	14	881	68.0
Total (no.)	452	493	99	86	74	52	25	14	1,295	100.0
Total (per cent)	34.9	38.1	7.6	6.6	5.7	4.0	1.9	1.1	100.0	
2006										
Methadone only	123	122	9	15	_	_	13	_	282	23.1
Buprenorphine only	287	_	5	1	_	_	12	_	305	25.0
Buprenorphine/naloxone only	_	_	_	_	_	_	_	_	_	_
Authorised to prescribe more than one drug type	_	341	120	52	65	48	_	7	633	51.9
Total (no.)	410	463	134	68	65	48	25	7	1,220	100.0
Total (per cent)	33.6	38.0	11.0	5.6	5.3	3.9	2.0	0.6	100.0	••
					20	05				
Methadone only	123	112	10	15	_	42	13	_	315	25.5
Buprenorphine only	_	_	1	1	_	_	_	_	2	0.2
Methadone and buprenorphine	293	316	114	56	73	39	15	11	917	74.3
Total (no.)	416	428	125	72	73	81	28	11	1,234	100.0
Total (per cent)	33.7	34.7	10.1	5.8	5.9	6.6	2.3	0.9	100.0	

<sup>(</sup>a) In New South Wales, practitioners authorised to prescribe methadone can additionally be approved to prescribe buprenorphine, but not vice versa. Medical practitioners who manage up to five clients do not require an approval to prescribe drugs of addiction under Section 28A of the 1966 Poisons and Therapeutic Goods Act and are not required to complete pharmacotherapy training. The figures provided for New South Wales represent the type of drugs prescribed by approved prescribers on 30 June 2007 rather than the number of prescribers approved to prescribe each drug type.

#### Notes

- 1. Each state and territory uses a different method to collect data on pharmacotherapy prescription and dosing. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.
- 'Authorised to prescribe more than one drug type' was not a valid response code in 2005.
- 3. Data presented in this table relate to all registered prescribers, except in New South Wales, where active prescribers are counted and South Australia where active private prescribers are counted,—that is, prescribers who are scripting at least one client at 30 June 2007.
- Data on buprenorphine/naloxone only prescribers were not reported in 2005 and 2006. However in 2006, buprenorphine/naloxone was available for prescription but no instances of 'buprenorphine/naloxone only' prescribers were reported.

<sup>(</sup>b) The total for Queensland includes those prescribers from private practice, public clinics, correctional centres and government medical offices.

<sup>(</sup>c) In Western Australia, prescriber training is provided for all pharmacotherapies currently available. The total number of prescribers includes those treating at least one client as at 30 June 2007 in private practice, public clinics and correctional centres.

<sup>(</sup>d) In Tasmania, training is provided separately for each pharmacotherapy drug.

<sup>(</sup>e) New South Wales data collection does not differentiate between prescribers who are authorised to prescribe buprenorphine and those authorised to prescribe buprenorphine/naloxone.

# Pharmacotherapy dosing point sites

# Number of pharmacotherapy dosing point sites

A pharmacotherapy dosing point site relates to the physical setting in which a pharmacotherapy drug is provided to a client, regardless of whether the drug intake is supervised or taken away.

During the reporting period—01 July 2006 to 30 June 2007—there were 2,173 pharmacotherapy dosing sites (Table 10). Of these:

- 87% (or 1,886) were located in pharmacies
- 8% (or 175) were located in 'other' locations including doctor's surgery, an outpatient hospital, or where the dosing point was not specified
- another 3% (or 56) were located in public clinics
- 2% (or 41) were located in a correctional facility
- less than 1% (or 15) were located in private clinics.

Pharmacotherapy dosing point sites were most commonly located in New South Wales (31% or 680), followed by Queensland (22% or 484) and Victoria (21% or 464). A further 11% (or 242) of dosing point sites were located in Western Australia and 10% (or 215) in South Australia. Tasmania accounted for 2% (or 49) of dosing point sites, the Australian Capital Territory 1% (or 28) and the Northern Territory less than 1% (or 12). This pattern has remained relatively stable over time.

Additional tables providing further state and territory breakdowns of NOPSAD data can be found in the Appendix at the back of this bulletin.

# **Data custodianship**

Jurisdictions are custodians of information collected through the NOPSAD collection within their state or territory. The AIHW is the custodian of collated national information forwarded from each jurisdiction. Custodianship for the AIHW means responsibility for protection, storage, analysis and dissemination of the data in accord with the purpose for which the data were collected, the *AIHW Act* (1987) and other relevant privacy principles.

Data requests can only be for summarised aggregate tables as unit record file data do not exist for this collection. This collection is not a national minimum data set.

Table 10: Number of pharmacotherapy dosing point sites and jurisdiction, 2005–06 and 2006–07

Dosing point sites	NSW <sup>(a)</sup>	Vic	Qld	WA <sup>(b)</sup>	SA	Tas	ACT	NT	Australia	Total %
					200	6-07				
Public clinic	37	_	12	1	2	1	1	2	56	2.6
Private clinic	12	3		_	_	_	_	_	15	0.7
Pharmacy	547	452	366	239	202	47	25	8	1,886	86.8
Correctional setting	2	9	16	2	8	1	2	2	41	1.9
Other	82	_	90	_	3	_	_	_	175	8.1
Total (no.)	680	464	484	242	215	49	28	12	2,173	100.0
Total (per cent)	31.3	21.4	22.3	11.1	9.9	2.3	1.3	0.6	100.0	
					200	5-06				
Public clinic	36	_	14	1	2	1	1	1	56	2.6
Private clinic	12	3		_	_	_	_	_	15	0.7
Pharmacy	533	459	378	241	164	46	25	7	1,853	86.6
Correctional setting	1	9	20	2	6	1	2	2	43	2.0
Other	78	_	91	_	3	_	_	_	172	8.0
Total (no.)	660	471	503	244	175	48	28	10	2,139	100.0
Total (per cent)	30.9	22.0	23.5	11.4	8.2	2.2	1.3	0.5	100.0	

<sup>(</sup>a) In New South Wales, figures relate to dosing point sites that were dosing at least one client as at 30 June 2007. The category 'other' includes clients dosed at hospitals, as hospital inpatients or hospital outpatients, as well as a small number of clients dosed in general practices. One juvenile justice centre dispensed pharmacotherapies. Individual adult correctional facilities cannot be distinguished.

Note: Each state and territory uses a different method to collect data on pharmacotherapy prescription and dosing. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.

# **Related data collections**

As in previous years, a subset of the data presented in this report will be included in the forthcoming 2006-07 annual report for the Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS-NMDS) due for release in July 2008.

If the data requested are not available from the NOPSAD collection, they may be available from the following sources:

- Alcohol and Other Drug Treatment Services National Minimum Data Set (AIHW) Amber Summerill phone (02) 6244 1137 Australian Institute of Health and Welfare http://www.aihw.gov.au/drugs/treatment/index.cfm
- Alcohol and Other Drug Treatment Services National Minimum Data Set Data Cubes http://www.aihw.gov.au/drugs/datacubes/index.cfm
- National Drug Strategy Household Survey (AIHW) Paul Meyer phone (02) 6244 1186 Australian Institute of Health and Welfare http://www.aihw.gov.au/drugs/ndshs07.cfm

<sup>(</sup>b) In Western Australia the number of dosing sites is for the financial year to 30 June 2007.

# References

- DoHA (Australian Government Department of Health and Ageing) 2008. Canberra: Pharmaceutical Benefits Schedule. Viewed 11 February 2008. http://www.pbs.gov.au/html/consumer/search/results?medicine=METHADONE%20HYD ROCHLORIDE.
- DoHA 2007. National Pharmacotherapy Policy for People Dependent on Opioids. Canberra: Australian Government.
- DoHA 2003. National Drug Strategy Clinical Guidelines and Procedures for the Use of Methadone in the Maintenance Treatment of Opioid Dependence. Canberra: Australian Government.
- Lintzeris N, Clark N, Winstock A, Dunlop A, Muhleisen P, Gowling L et al. 2006. National Clinical Guidelines and Procedures for the Use of Buprenorphine in the Treatment of Opioid Dependence, abbreviated version. Commonwealth of Australia: Viewed 1 July 2008, http://www.nationaldrugstrategy.gov.au/internet/drugstrategy/publishing.nsf/Content/15B5C4ED2E7A5F75CA25717E000A39CC/\$File/buprenorphine\_guide\_abbrev.pdf.
- The Pharmaceutical Society of Australia July 2005. Self help 0246–2005. Methadone and Buprenorphine. Viewed 1 July 2008, http://www.woodlandspharmacy.com.au/docs/self\_help/Methadone+&+Bupronophrine.pdf.

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# **Appendix tables**

Table A1: Estimated number of pharmacotherapy clients by pharmacotherapy drug type, prescriber type and jurisdiction, Australia (on a 'snapshot/specified' day<sup>(a)</sup>) 2007

Prescriber type	NSW	Vic	Qld	WA	SA	Tas	ACT	NT	Total <sup>(b)</sup>			
				M	ethadone							
Public prescriber	3,704	_	2,065	734	635	152	403	36	7,729			
Private prescriber	7,874	6,146	595	974	909	357	186	10	17,051			
Public/private prescriber <sup>(c)</sup>	368	_	_	_	_		_	_	368			
Correctional facility	1,650	484	16	249	204	3	18	2	2,626			
Total	13,596	6,630	2,676	1,957	1,748	512	607	48	27,774			
		Buprenorphine										
Public prescriber	1,010	_	1,101	92	253	17	71	25	2,569			
Private prescriber	1,502	1,527	519	151	461	56	12	8	4,236			
Public/private prescriber(c)	84	_	_	_	_	_	_	_	84			
Correctional facility	156	21	13	3	20	_	_	1	214			
Total	2,752	1,548	1,633	246	734	73	83	34	7,103			
		Buprenorphine/naloxone										
Public prescriber	n.a		n.a	209	90	9	65	24	397			
Private prescriber	n.a	2,801	n.a	398	192	5	10	7	3,413			
Public/private prescriber(c)	n.a		n.a	_	_	1	_	_	1			
Correctional facility	n.a	72	n.a	12	70	_	_	1	155			
Total (no.)	n.a	2,873	n.a	619	352	15	75	32	3,966			
			To	tal (all pha	rmacothera	py drugs)						
Public prescriber	4,714	_	3,166	1,035	978	178	539	85	10,695			
Private prescriber	9,376	10,474	1,114	1,523	1,562	418	208	25	24,700			
Public/private prescriber(c)	452	_	_	_	_	1	_	_	453			
Correctional facility	1,806	577	29	264	294	3	18	4	2,995			
Total	16,348	11,051	4,309	2,822	2,834	600	765	114	38,843			
			Total (	per cent) (al	l pharmacoti	herapy drug	s)					
Public prescriber	28.8	_	73.5	36.7	34.5	29.7	70.5	74.6	27.5			
Private prescriber	57.4	94.8	25.9	54.0	55.1	69.7	27.2	21.9	63.6			
Public/private prescriber <sup>(c)</sup>	2.8	_	_	_	_	0.2	_	_	1.2			
Correctional facility	11.0	5.2	0.7	9.4	10.4	0.5	2.4	3.5	7.7			
Total (%)	100.0	100.0	100.	100.0	100.0	100.0	100.0	100.0	100.0			

 $<sup>(</sup>a)\ \ In\ Western\ Australia\ the\ number\ of\ clients\ receiving\ pharmacotherapy\ treatment\ is\ reported\ through\ the\ month\ of\ June\ 2007.$ 

<sup>(</sup>b) This total for all drug types differs from the estimated number of clients reported in Tables 4 and 5, as the client count in South Australia varies due to differing collection methodologies. Please see the administrative features table for additional information.

<sup>(</sup>c) In New South Wales, these figures relate to prescribing that cannot be segregated into public of private prescribers.

Table A2: Estimated number of pharmacotherapy clients by pharmacotherapy drug type, dosing point site and jurisdiction, Australia (on a 'snapshot/specified' day<sup>(a)</sup>) 2007

Dosing point site	NSW <sup>(b)(d)</sup>	Vic	Qld <sup>(c)(d)</sup>	WA	SA	Tas	ACT	NT	Total
				M	ethadone				
Public clinic	2,812	_	125	30	63	94	154	4	3,282
Private clinic	2,322	118	_	_	_	_	_	_	2,440
Pharmacy	6,311	6,028	2,172	1,678	1,370	415	435	42	18,451
Correctional setting	1,581	484	13	249	199	3	18	2	2,549
Other	570	_	183	_	11	_	_	_	764
Total	13,596	6,630	2,493	1,957	1,643	512	607	48	27,486
				Bup	renorphine				
Public clinic	801	_	130	8	7	12	37	7	1,002
Private clinic	686	2	_	_	_	_	_	_	688
Pharmacy	908	1,525	1,556	235	544	61	46	26	4,901
Correctional setting	148	21	13	3	1	_	_	1	187
Other	209	_	47	_	4	_	_	_	260
Total	2,752	1,548	1,746	246	556	73	83	34	7,038
				Bupreno	rphine/naloxo	one			
Public clinic	n.a	_	n.a	11	31	8	29	10	89
Private clinic	n.a	27	n.a	_	_	_	_	_	27
Pharmacy	n.a	2,774	n.a	596	251	6	46	21	3,694
Correctional setting	n.a	72	n.a	12	78	1	_	1	164
Other	n.a	_	n.a	_	_	_	_	_	_
Total	n.a	2,873	n.a	619	360	15	75	32	3,974
				Total (all pha	rmacotherapy	/ drugs)			
Public clinic	3,613	_	255	49	101	114	220	21	4,153
Private clinic	3,008	147	_	_	_	_	_	_	3,375
Pharmacy	7,219	10,327	3,728	2,509	2,165	482	527	89	26,519
Correctional setting	1,729	577	26	264	278	4	18	4	3,409
Other	779	_	230	_	15	_	_	_	1,042
Total (no.)	16,348	11,051	4,239	2,822	2,559	600	765	114	38,498
			Tota	l (per cent) (al	l pharmacothe	erapy drugs)			
Public clinic	22.1	_	6.0	1.7	3.9	19.0	28.8	18.4	10.8
Private clinic	18.4	1.3	_	_	_	_	_	_	8.8
Pharmacy	44.2	93.4	87.9	88.9	84.6	80.3	68.9	78.1	68.9
Correctional setting	10.6	5.2	0.6	9.4	10.9	0.7	2.4	3.5	8.9
Other	4.8	_	5.4	_	0.6	_	_	_	2.7
Total (%)	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0

<sup>(</sup>a) The number of clients on the program on a 'snapshot/specified' day in June, except for Western Australia, where the number of clients treated through the month of June is reported.

(continued)

#### (continued)

- (b) In New South Wales the category 'other' includes clients dosed at hospitals, as hospital inpatients or hospital outpatients, as well as a small number of clients dosed in general practices. 'Other' also includes clients for whom the dosing point was not stated.
- (c) Queensland excludes clients who are not physically dosed on the 'snapshot/specified' day in 2007. That is, they physically received a double or triple dose of buprenorphine prior to the 'snapshot/specified' day which would have remained in their systems to cover the 'snapshot/specified' day.
- (d) In Queensland and New South Wales clients prescribed buprenorphine/naloxone are counted under buprenorphine.

Note: Each state and territory uses a different method to collect data on pharmacotherapy prescription and dosing. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.

Table A3: Estimated number of pharmacotherapy clients by pharmacotherapy drug type, sex of the client and jurisdiction, Australia (on a 'snapshot/specified' day<sup>(a)</sup>) 2007

Sex	NSW <sup>(b)</sup>	Vic	Qld <sup>(b)</sup>	WA	SA	Tas	ACT	NT	Total	Total (%)
					Methado	ne				
Male	8,726	4,376	1,440	1,229	1,087	308	331	28	17,525	63.1
Female	4,870	2,188	1,167	728	658	204	276	20	10,111	36.4
Not stated	_	66	69	_	3	_	_	_	138	0.5
Total	13,596	6,630	2,676	1,957	1,748	512	607	48	27,774	100.0
					Buprenorp	hine				
Male	1,925	1,022	1,043	139	479	44	53	19	4,724	66.5
Female	827	511	579	107	254	29	30	15	2,352	33.1
Not stated	_	15	11	_	1	_	_	_	27	0.4
Total	2,752	1,548	1,633	246	734	73	83	34	7,103	100.0
				Bu	prenorphine/	'naloxone				
Male	n.a	1,896	n.a	412	258	9	47	21	2,643	66.6
Female	n.a	948	n.a	207	91	6	28	11	1,291	32.6
Not stated	n.a	29	n.a	_	3	_	_	_	32	0.8
Total	n.a	2,873	n.a	619	352	15	75	32	3,966	100.0
	Total (all pharmacotherapy drugs)									
Male	10,651	7,294	2,483	1,780	1,824	361	431	68	24,892	64.1
Female	5,697	3,647	1,746	1,042	1,003	239	334	46	13,754	35.4
Not stated	_	110	80	_	7	_	_	_	197	0.5
Total	16,348	11,051	4,309	2,822	2,834	600	765	114	38,843	100.0

<sup>(</sup>a) The number of clients on the program on a 'snapshot/specified' day in June, except for Western Australia, where the number of clients treated through the month of June is reported.

<sup>(</sup>b) In New South Wales and Queensland, clients prescribed buprenorphine/naloxone are counted under buprenorphine.

Table A4: Estimated number of pharmacotherapy clients by pharmacotherapy drug type, age group of the client and jurisdiction, Australia (on a 'snapshot/specified' day<sup>(a)</sup>) 2007

Age group	NSW <sup>(b)</sup>	Vic	Qld <sup>(b)</sup>	WA	SA	Tas	ACT	NT <sup>(c)</sup>	Total	Total (%)
					М	ethadone				
10–19 years	43	18	5	1	1	1	4	_	73	0.3
20–29 years	2,616	1,575	441	468	296	132	161	_	5,689	20.5
30–39 years	4,704	2,965	933	717	616	229	204	_	10,368	37.4
40–49 years	4,484	1,499	919	545	608	116	187	_	8,358	30.1
50–59 years	1,695	527	367	219	219	32	48	_	3,107	11.2
60 years and over	54	46	11	7	7	2	3	_	130	0.5
Total	13,596	6,630	2,676	1,957	1,747	512	607	_	27,725	100.0
					Bup	renorphin	e			
10–19 years	21	4	3	2	5	_	_	_	35	0.5
20–29 years	830	368	417	75	166	25	26	_	1,907	27.0
30–39 years	1,008	692	715	101	278	29	29	_	2,852	40.4
40-49 years	672	350	367	53	214	16	26	_	1,698	24.0
50–59 years	204	123	123	14	69	3	2	_	538	7.6
60 years and over	17	11	8	1	1	_	_	_	38	0.5
Total	2,752	1,548	1,633	246	733	73	83	_	7,068	100.0
					Bupreno	rphine/na	loxone			
10–19 years	_	8	_	1	4	_	_	_	13	0.3
20–29 years	_	683	_	165	115	7	15	_	985	25.0
30–39 years	_	1,285	_	266	159	6	26	_	1,742	44.3
40–49 years	_	650	_	148	60	1	29	_	888	22.6
50–59 years	_	228	_	38	13	_	5	_	284	7.2
60 years and over	_	20	_	1	1	1	_	_	23	0.6
Total	_	2,873	_	619	352	15	75	_	3,934	100.0
				To	tal (all pha	rmacothei	apy drugs	s)		
10–19 years	64	30	8	4	10	1	4	_	121	0.3
20–29 years	3,446	2,625	858	708	577	164	202	_	8,580	22.2
30–39 years	5,712	4,942	1,648	1,084	1,053	264	259	_	14,962	38.6
40-49 years	5,156	2,499	1,286	746	882	133	242	_	10,944	28.3
50-59 years	1,899	878	490	271	301	35	55	_	3,929	10.1
60 years and over	71	77	19	9	9	3	3	_	191	0.5
Total	16,348	11,051	4,309	2,822	2,832	600	765	_	38,727	100.0

<sup>(</sup>a) The number of clients on the program on a 'snapshot/specified' day in June, except for Western Australia, where the number of clients treated through the month of June is reported.

<sup>(</sup>b) In New South Wales and Queensland, clients prescribed buprenorphine/naloxone are counted under buprenorphine.

<sup>(</sup>c) The total estimated number of clients reported excludes pharmacotherapy clients in the Northern Territory where data relating to the age group of clients was not available.

Note: Each state and territory uses a different method to collect data on pharmacotherapy prescription and dosing. These differences may result in minor discrepancies if directly comparing one jurisdiction with another jurisdiction.



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