Provincial TiOAT Evaluation Interim Results



Key findings from TiOAT safety data checklists, quantitative and qualitative interviews with TiOAT clients

Background

The provincial tablet-based injectable opioid agonist treatment (TiOAT) evaluation is being conducted to characterize various TiOAT programs, prospectively monitor health and social outcomes and health care utilization patterns among program clients, and inform the development of TiOAT best practices.

This interim update includes data from TiOAT safety data checklists, and self-reported data from clients on their experiences accessing TiOAT. These participants were enrolled in separate but parallel quantitative and qualitative studies conducted between February 2019 and February 2022. Key findings are presented here as a complement to the full report. Further results will be shared as they become available.

Summary of Key *Qualitative* **Findings:**

Participants accessed TiOAT for a number of reasons including (from 20 participants):

- Access to a safe and reliable supply of opioids in order to abstain from or reduce unregulated drug consumption
- Seek alternative treatment options to methadone due to difficulty comfortably tapering or discontinuing the medication and perceived negative impacts on participants' physical health
- Desire to reduce risk of overdose, given the concern with street supply and proliferation of benzodiazepines

"I overdosed three times myself and my girlfriend OD'd once with me...Yeah, it's my main concern. That's why I've joined the TiOAT, is the dirty drugs on the street, like you don't know what you're getting... Benzos are the ones that lead you up to OD'ing."

Participants identified lack of appropriate options for carry doses as a key program challenge

"Where I'm at now, it's a little bit harder to get to... it's kind of out in the middle of nowhere kind of thing and we can only get a ride in twice a day, so it is a little bit harder to access and to get to, and then go back home...There is no bus service out where I live... For us to catch the shuttle, it is either at 9 in the morning or 3 in the afternoon, and that's it."

Acknowledgements

SUBSTANCE USE

Our sincere thanks to all participants. We respectfully acknowledge that this work was hosted on the ancestral and unceded traditional territory of the Coast Salish Peoples.

Contacts

Please contact the evaluation team with any queries: ioatstudy@bccsu.ubc.ca

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PROVIDENCE HEALTH CARE Research Institute





86%

Summary of Key Safety Data:

From 124* safety data checklists:

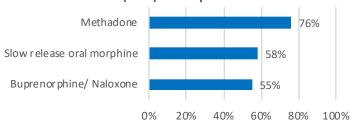
- Average hydromorphone dose was 64mg per day (8 x 8mg tablets per day)
- 10% reported mild side effects from TiOAT medication, with constipation being most common; no major side effects reported
- 80% reported use of Sterifilt FAST filter among participants who injected TiOAT medication; most common reasons for using the filter were to avoid harms from coatings and powders and for a more comfortable injection

Summary of Key Quantitative Findings:

Baseline Characteristics of Respondents (N=53*):

Median Age	41	Ethnicity		History of injection drug use	
Women	25%	White	62%	Crystal meth	83%
Living in unstable housing	61%	Indigenous	32%	Fentanyl	76%
Opioid overdose in the past	76%	Black	6%	Powder cocaine	74%

Participants accessing oral opioid agonist treatment (OAT) in the past



Proportion of participants on TiOAT reporting:

Decreased unregulated opioid use 82%

No opioid overdose since starting TiOAT 74%

Satisfied or very satisfied with TiOAT

*Results may not represent all 124 checklists or 53 participants