

BASELINE INTERVIEW INTERIM RESULTS

Key findings from quantitative and qualitative interviews with clients receiving tablet hydromorphone

Background

The provincial tablet-based injectable opioid agonist treatment (TiOAT) evaluation is being conducted to characterize various tablet hydromorphone programs, prospectively monitor health and social outcomes and health care utilization patterns among program clients, and inform the development of tablet hydromorphone best practices. **This interim update includes** data from self-reported data from clients on their experiences accessing tablet hydromorphone. These participants were enrolled in separate but parallel quantitative (N=117) and qualitative (N=32) studies conducted between February 2019 and June 2022. Key findings are presented here as a complement to the full report. Further results will be shared as they become available.

Key Quantitative Findings

Self-reported Impacts of Tablet Hydromorphone

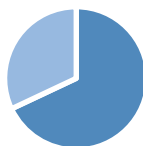
Reduced use of opioids



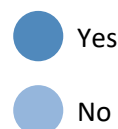
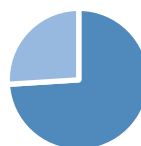
Provided Stability in Life



Reduced/Stopped Opioid Overdoses



Improved Income



92% of participants reported being satisfied or very satisfied with the service they received

Method of Administration

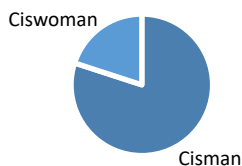
- Average hydromorphone dose was >80mg per day (10 x 8mg tablets per day)
- 26% reported mild side effects from tablet hydromorphone, with constipation being the most common; no major side effects reported

Perceptions of Staff

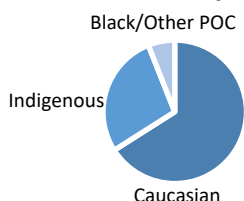
- 84% participants reported that at least one healthcare professional made a difference in their care
- 72% reported that nurses made a difference in their care by providing information on services and resources, being available to talk, and being supportive

Participant Characteristics

Gender

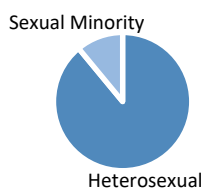


Ethnicity

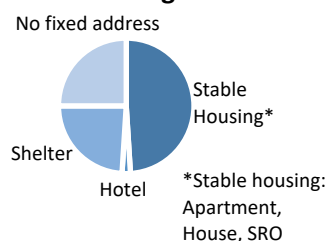


Median Age: 42

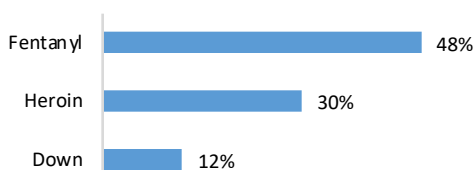
Sexual Orientation



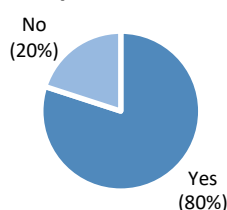
Housing



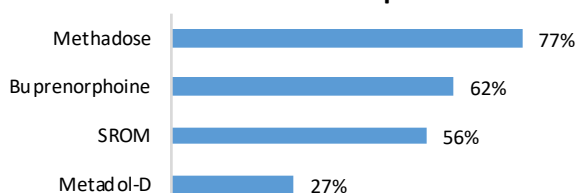
Participants' history of injection drug use



Participants with history of opioid overdose



Participants accessing oral opioid agonist treatment in the past



*Results may not represent all 117 participants

Key Qualitative Findings

Treatment Motivations

Participants accessed TiOAT for a number of reasons, including (from 32 participants):



Access a safe and reliable supply of opioids to abstain from or reduce unregulated drug consumption

“Yes, I overdosed three times myself ... it’s my main concern. That’s why I’ve joined the TiOAT, it’s the dirty drugs on the street.”



Address withdrawal and drug cravings



Achieve financial stability

“I was kind of tired of being broke all the time, like spending all my money on street drugs. So I thought well if I can be happy or at least have a bit of comfort with the Methadose and what was available on the TiOAT program then I could spend the money on things that I really needed like clothing, food and stuff like that.”



Improve health and social wellbeing

Program Challenges

Inadequate dosing

“I’m hoping that the people running it [TiOAT] will figure out that we need more, but I know that they’re worried about us overdosing, but right now, the way it is now, that’s impossible [to overdose on pharmaceutical grade drugs].”

Inability to obtain pleasure from hydromorphone

“I’m not dope sick any more but I’m not achieving [euphoria].”

Inability to control pain

Benzodiazepine adulteration in unregulated opioids left participants with physical dependence on two substances

“Like the drug scene’s getting, it’s harder to overcome this addiction because we’re getting hooked on two things now instead of one and the TiOAT program only helps the opiates. It doesn’t help the benzos. So that’s a big reason why I keep relapsing.”

Lack of option for take-home doses

Acknowledgements

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.

Program Strengths

Effective at managing withdrawal symptoms and curbing cravings

Reduced/discontinued unregulated drug use

Reduced spending on unregulated drugs

Fewer/no overdoses

“I haven’t had any overdoses for a long time and I’ve been pretty responsible in regards to, you know, making sure that I get my opioid agonist therapy or whatever.”

Reduced participation in criminalized activities

Positive relationships with TiOAT staff

“I use less because of the program. Like I know I do. Um, it’s cause I can come here and like you know talk to people. It’s helped me like with that part of it. Like before I kind of felt alone a lot of times so I was using a lot more when I wasn’t on this program cause I didn’t have like that community. So, this program definitely has cut down my usage.”

Contacts

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