Oral Substitution Treatment in Austria – the role of GPs

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Epidemiology of „problematic drug use“ including opiates in Austria


22.200 – 33.400 P.
1987 first administrative regulation concerning medication assisted treatment of opioid dependence; substitution classified as regular medical practice

Every region developed different approaches
Diversified use of opioids in OST

The Austrian model had been special

- because of the availability of different opioids.
  → the Austrian substitution act covered the prescription of different opioids (Methadone and others)
- regularly prescription of oral slow-release Morphine (OSRM) enabled since 1997
- Majority of opioid prescriptions are placed in pharmacies
- all of this under a common set of rules and regulations

→ This „Common sense“ changed with the accusations against the OSRM started 2003 and ended with the amendment of the substitution act in 3/2007.
The new regulation covered... since 3/2007

• A new buerocratic procedure for maintenance prescription as a barrier by some practitioners
• Postgraduate curriculum (40h) for all physicians as a requirement for maintenance prescription.
• particulary strict control of take-home regulations.
• methadone and buprenorphine defined as substances of „first choice“
OST in Austria

Roughly three different systems:

A.) GPs are licensed to initiate OST (Vienna, Tyrol, Lower Austria).
   ➔ rapid access to treatment, good coverage rate, no waiting list

B.) Initiating OST only by specialised centres (Upper Austria, Carinthia):
   ➔ bottleneck, waiting lists, no gain of experience by GPs, long distances to go for treatment

C.) Initiating OST only by specialised centres and specialised GPS (Styria):
   ➔ similar situation to B.)
Opioid Substitution Treatment in Austria

Regions with a lack of GPs licensed for OST and therefore with a lack of access to treatment

red – poor attendance
green – strong part
yellow – in between

role of GPs
Amendment of the substitution act

Two different licenses
A.) License to start treatment and even change dosage and medication:
   → 40h basic education, 20h online learning, 12h quality circle/education in the following 3 years.

B.) License only for maintain OST:
   → 4h quality circle/education per year
Opioid Substitution Treatment in Austria

Coverage: roughly 1/3 of „problematic opiat users“ (~ 30,000 P)

New treatment

Ongoing treatment

GÖG/ÖBIG; Annual Report 2009
Opioid Substitution Treatment in Vienna

No of patients: May 00 – June 10

Source: Health Authority of Vienna; MA15, Juni 2010
Opioid Substitution Treatment in Vienna

...prescribed drugs: May 00 – June 10

Morphine (59,0%)
Buprenorphine (18,4%)
Methadone (16,5%)
Suboxone (2,3%)

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<td>485</td>
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Source: Health Authority of Vienna; MA15, Juni 2010
Oral slow-release Morphine


Kastelic A et al. Slow-release oral morphine for maintenance treatment of Opioid addicts intolerant to methadone or with inadequate withdrawal suppression. Addiction 2008; 103: 1837-1846


EMCDDA 22.9.2010

There is evidence, but more studies are required!
Opioid Substitution Treatment in Vienna

...prescription by: May 00 – June 10

General Practitioners (76%)
Psychiatrists (10.2%)
Drug Institution (13.8%)

Source: Health Authority of Vienna; MA15, Juni 2010
OST in Vienna

...Duration of treatment...

**Wiener Substitutionsstatistik Juni 2010**

**Behandlungsdauer in %**

- **< 1 Y.** 14.12%
- **1 - 3 Y.** 17.30%
- **3 - 5 Y.** 16.85%
- **> 5 Y.** 51.74%
- **new treatment** 1.91%

Source: Health Authority of Vienna; MA15, Juni 2010
OST in Vienna

• Number of problematic opiate drug users: ~ 10,000 pers. (2010)
• Number of patients in OST: ~ 7,000 (~ 70% coverage rate)
• 75% covered by GPs
• No waiting list, low threshold on demand
• Obligatory training of GPs (initially 40 h training program)
• Good cooperation with health authorities and drug institutions
• GPs get extra fee for treatment (also in Styria, Upper Austria, Tyrol) – conducted to a special training program (quality circle).
• Diversification of treatment:
  – Oral slow-release Morphine (Substitol®, Compensan®, Kapanol®)
  – Buprenorphine, Bup/Nalox. (Subutex®, Suboxone®)
  – Methadone
  – L-Polamidon (since 26.8.2010)
**OST in Vienna**

...**specific problems**

- Overprescribing of benzodiazepins, mainly flunitrazepam
- Increase of psychiatric disorders especially deviant users or violent users.
- Diversion of medication to the black market
  - OST-medication like OSRM and BUP
    - control system implemented (Police → Health Authority → Physician)
- BZD: Flunitrazepam >> Oxazepam
- Injecting drug use of OSRM
  - no injectable OMT in Austria, but still in discussion (Vienna)
- Overdose: most OD-cases combined with opioid, BZD and alcohol
- Treatment (OST) of asylum seekers
- Treatment of Individuals without permission to stay.
OST in Austria – An Overview
An empirical study by A. Springer and A. Uhl (LBI) 2010

176 Physicians, treating 6,926 Patients (66% of all Pat. in 2007). 588 Patients was included.

- Methadone 24%
- Buprenorphine 17%
- OSRM 59%

How many patients do you treat that way?

Physicians: n = 176

- 21-50: 28%
- 51-100: 10%
- 11-20: 20%
- 6-10: 16%
- 3-5: 20%
- More than 100: 6%
Percentage of maintenance patients among all patients?

- 51% - 99%: 5%
- 5% - 9%
- 6% - 10%: 8%
- 11% - 50%: 8%
- Exclusively Substitution: 6%
- 1% - 5%: 73%

Summary - OST in Austria

...benefits according to a prominent role of GPs

- Easy and rapid (low threshold) access to OST
- High coverage rate
- No stigmatisation and ghettoisation
- Examination and basic treatment of somatic and psychiatric (drug related) diseases.
- GPs are used to network in case of polymorbidity like diabetes, etc.
- Low costs to the health system
Summary – OST in Austria:

• Suboptimal treatment of patients with severe mental disorders
  → lack of psychiatric back-up (less, but even in the city!)
• GPs with much more then 100-150 patients
• GPs with less than 10-5 patients
• Diversion to the black market in cause of..
  → lack of experience in dosage-finding
  → few time for examination
• Overprescription of benzodiazepines
Thank you for your Attention!