Substitution treatment coverage calculation in Norway ++

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Themes

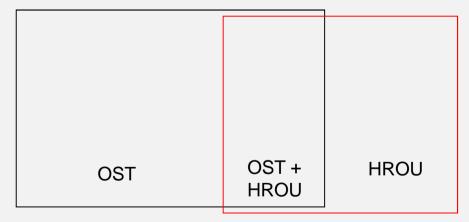
- Standard coverage calculation the Norwegian experience
- Influential factors and pitfalls
- Usefulness of OST coverage calculations

Standard coverage calculations

- n = the number of clients in OST
- N = the number of opiate users (OST clients + other HROU)
- Coverage = n/N
- Main question: How de we find data?

OST clients misuse opioids

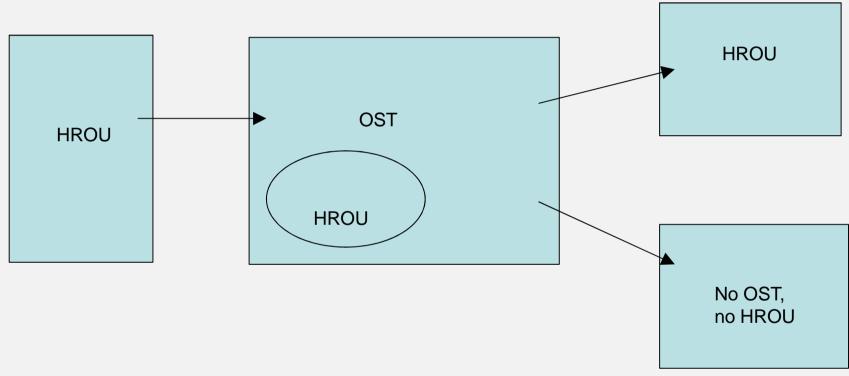
 What do we do about persons in OST who are HROU of opioids other than the prescribed substitution opioid or generally misuse the prescribed substitution opioid



 Should we adjust n (in OST) to the 'successful' OST clients?



Changes during a time period



What about those who enter OST or leave OST during the year? Count them as OST and/or HROU?



Examples of estimates of OST coverage in Norway - 1

Coverage opioid users

- 1. The number in OST all year (persons in OST at the beginning of the year + those who enter); n_ost = 7450
- 2. The number of HROU by mortality multiplier, risk of death 3 per 100 person years and a probability of 0.7 to die of a drug related opioid death; n_HROU = 9143
- 3. Withdraw double counting: During a week 9 percent in OST had used heroin. Assume the same percent for other opioids. For heroin users the probability of use in a single week is 2/3 assume this also for other opioids; n_double = 1234
- 4. Coverage of OST = n_ost/ (n_ost + n_HROU n_double) = 0,49

Examples of estimates of OST coverage in Norway - 2

Coverage heroin users

- 1. The number in OST all year (persons in OST at the beginning of the year + those who enter); n_ost = 7450
- 2. The number of HRHU by mortality multiplier, risk of death 3 per 100 person years and a probability of 0.7 to die of a drug related heroin death; n_HROU = 3635
- 3. Withdraw double counting: During a week 9 percent in OST had used heroin. For heroin users the probability of use in a single week is 2/3; n_double = 1006
- 4. Coverage of OST = n_ost/ (n_ost + n_HRHU n_double) = 0,74

Examples of estimates of OST coverage in Norway - 3

Coverage opioid users, survey at the street-level

- 1. The number in OST in survey); n_ost = 409
- 2. The number of HROU in survey; n_HROU = 1013
- 3. Withdraw double counting:; n_double = 225
- 4. Coverage of OST = n_ost/ (n_ost + n_HROU n_double) = 0,34

NB! Underreporting of (integrated) OST-patients who do not show up at street level

Technical pitfalls

- Mix period data and data on a given date
 - One year prevalence of HROU and the number of OST clients by the end of the year
- Estimate yearly proportions of persons from shorter period proportions
 - Estimate yearly proportion of HROU among OST clients from misuse of opioids during a week
- Forget double counting
 - Some HROU are in OST

Ideological pitfalls and usefulness of OST coverage estimation

- A high coverage does not mean that persons in OST do not misuse heroin/opioids. Estimate the coverage of non-misusers in OST?
- OST was originally intended to help heroin users.
 Estimate the coverage for those?
- 'Old' heroin users may misuse all kinds of opioids.
- A new group of opioid misusers has emerged who partly misuse OST drugs as well as other pharmaceuticals with opioids. Who to include and will OST be relevant for these persons?
- Can a high OST coverage still be interpreted as a positive characteristic?

Thank you for your attention!