BUPRENORPHINE USE COMPARED TO METHADONE

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INTRODUCTION

Malta had an estimated 6.1 opioid users per 1000 capita in 2010, the third highest rate in Europe¹. Untreated opioid dependence is associated with higher mortality, increased risk of blood borne infections, and social and economic implications. Opioid misuse is also a common cause of crime and incarceration².

The main opioid substitution treatment (OST) in Malta is methadone substitution therapy (MST). Other available OST include buprenorphine, buprenorphine/naloxone and naltrexone.

AIMS

This study established the 1) opinions and outcomes of MST and buprenorphine/naloxone substitution therapy (BST), 2) cost of treatment of MST which is found on the Maltese Government Formulary List, whereby opioid dependent individuals can obtain free opioid substitution therapy and 3) possible advantages of introducing BST on to this formulary list.

METHO

Participants over 18 years of age opioid history of with a dependence were enrolled in the study between September 1 and 27, 2013 from the Substance Misuse Outpatient Clinic (SMOPU), which is the central clinic whereby individuals can obtain free MST. Questionnaires were used to obtain the opinions and outcomes about their treatment from individuals, while accounts and other statistical data were obtained to evaluate the cost of MST.

RESULTS

Methadone was prescribed in 92% of 92 patients recruited, while 8% received buprenorphine/naloxone. greater proportion of buprenorphine/naloxone patients ceased in abusing heroin, compared to methadone (100% BST vs 54% MST, p<0.05). A majority of unemployment in both groups (66% MST vs 57% BST) was noticed. More methadone patients complained that their opioid substitution interfered with their treatment employment (65% MST vs 0% BST, p<0.05). The cost per capita of methadone substitution therapy amounted to 645 Euro in 2013.

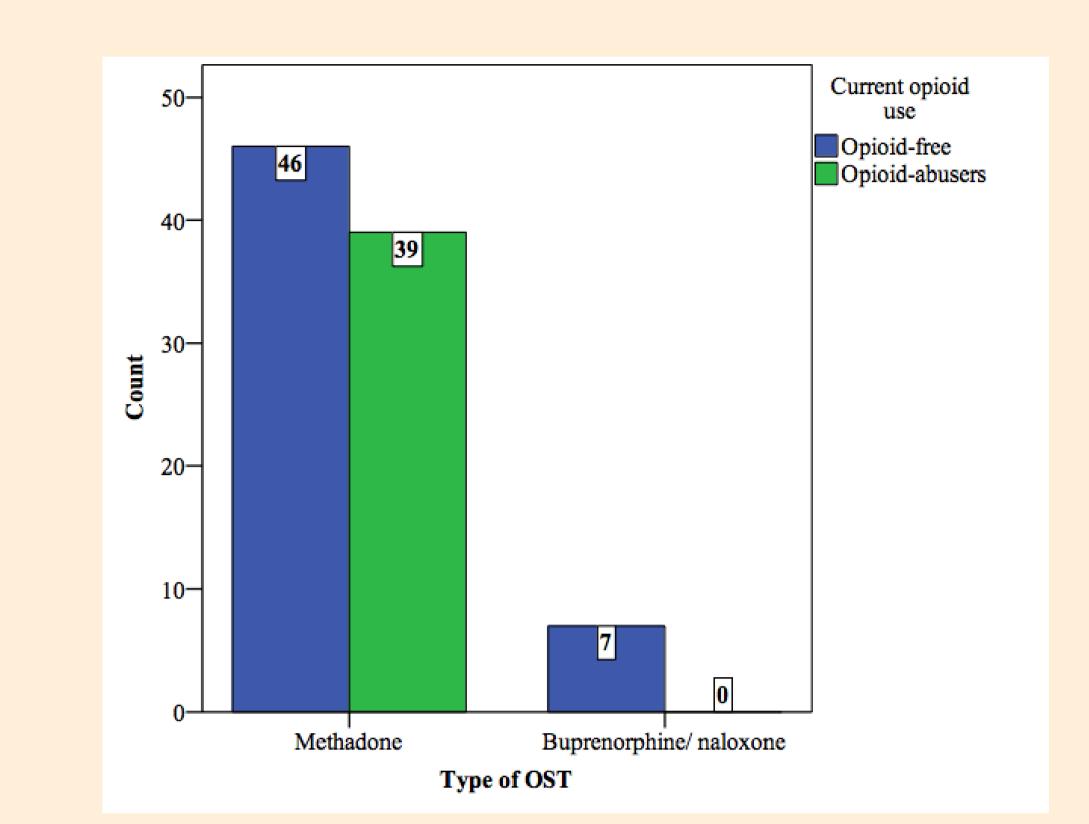


Figure 1: Type of OST and current heroin abuse $(X^2(1) = 5.575, p = 0.018)$

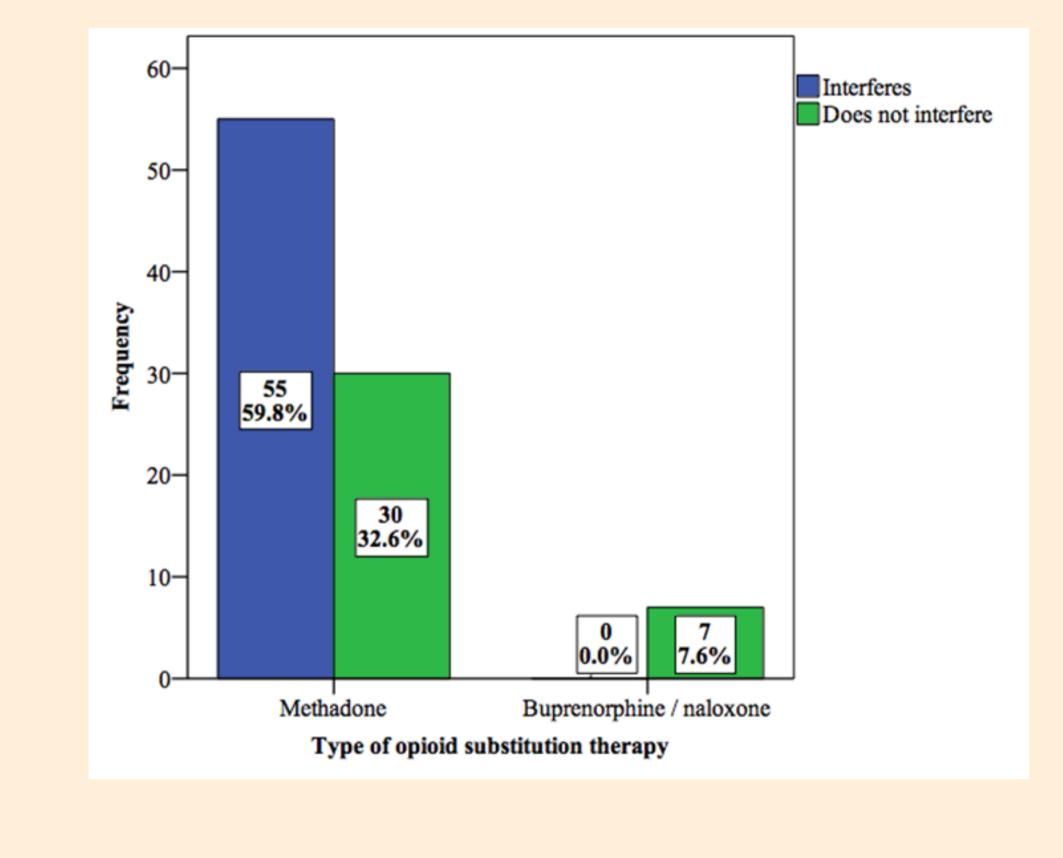


Figure 2: Type of OST and Interference
with work or study (X2 (1) = 11.262, p =
0.001)

CONCLUSION

BST was shown to be superior to MST in terms of having more heroin-free individuals and a report of less interference with work. Patient accessibility to BST should be increased by considering its inclusion on the Maltese Government Formulary List.

ACKNOWLEDGEMENTS and REFERENCES

Acknowledgements Agenzija Sedqa

References ¹ Gellel M, Olivari D'Emanuele C, Muscat R (Reitox National Focal Point, Malta). 2008—2010 National Report on the Drug situation in Malta. Malta; 2011. 70p.

² UK Home Office. Measuring different aspects of problem drug use: methadological developments. 2nd ed. Crown; 2006.