

Examining factors that impact client experiences of depression in a longitudinal iOAT cohort

Category: Oral Presentation

Abstract Body

Background: Approximately 20-90% of individuals with substance use disorder have a concurrent mental health disorder. As we continue to look for ways to cope with the overdose crisis, understanding the complex psychosocial and mental health needs of individuals with opioid use disorder (OUD) is integral to the provision of person-centered care within iOAT. Therefore, the present study aimed to determine factors impacting client reported experiences of depression. This information will support the development of integrated care that addresses clients unique multidisciplinary needs.

Methods: This study was a secondary retrospective cohort analysis of iOAT clients from Crosstown clinic in Vancouver, Canada who were part of the Research on the Utilization of Therapeutic Hydromorphone (RUTH) study. Study variables were collected every 2 months for one year and once at 18 months. The outcome variable, taken from the European Addiction Severity Index, was self-reported 30-day experiences of serious depression. Multivariate analysis utilized a generalized linear mixed-effect model with random intercepts to account for individual variations.

Results: A total of 131 individuals were included in this preliminary analysis. Participants were on average 49 years old (SD =9.26), 30% self-reported as women, 30% self-reported an Indigenous (e.g. Métis, Inuit, First Nations) background, and 54% experienced a chronic medical condition at baseline. Serious depression was associated with 30-day illicit opioid use ($p = 0.011$; OR: 1.03; 95% CI: 1.03,1.05), poor health ($p < 0.001$; OR: 1.06; 95% CI: 1.03, 1.08), and feeling “extremely bothered” by social relationships ($p = 0.002$; OR: 2.61; 95% CI: 1.16, 5.89).

Conclusion: Findings highlight the role of participant and program characteristics in reported experiences of depression among individuals with OUD. To our knowledge, there is limited data examining mental health outcomes within iOAT in Canada. As OUD care continues to shift toward person-centered approaches, these preliminary findings provide evidence that can be utilized to support community services for people with mental health needs and can be added to existing services in a way that people with OUD will use.

Key Words

- Opiate Agonist Therapy
- Opioids/Opiates
- Psychiatric Co-Morbidities
- Substance Use Disorder (general)

Learning Objective # 1

Attendees should know what key client level factors are associated with experiences of serious depression among individuals with OUD receiving iOAT

Learning Objective # 2

Attendees should be able to identify program level factors associated with experiences of serious depression among individuals with OUD receiving iOAT

Reference # 1

Oviedo-Joekes E, Guh D, Brissette S, et al. Hydromorphone compared with diacetylmorphine for long-term opioid dependence. *JAMA Psychiatry*. 2016;73(5):447-455. doi:10.1001/jamapsychiatry.2016.0109

Reference # 2

Marchand K, Beaumont S, Westfall J, MacDonald S, Harrison S, Marsh DC, Schechter MT, Oviedo-Joekes E. Conceptualizing patient-centered care for substance use disorder treatment: findings from a systematic scoping review. *Subst Abuse Treat Prev Policy*. 2019 Sep 11;14(1):37. doi: 10.1186/s13011-019-0227-0. PMID: 31511016; PMCID: PMC6739978.

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