

Opioid-Related Health Harms and Palliative Care: A Population-based Cohort Study

Category: Poster Presentation (in person)

Abstract Body

Background/aims:

Besides opioid poisoning deaths, people with opioid-related health harms (OHH) are at high risk of prematurely dying from all major diseases and can benefit from palliative care.

This study's aim was to describe and compare palliative care for people with and without OHH in the last 90 days of life.

Methods:

This population-based cohort study used linked ICES health administrative databases to identify decedents with OHH in Ontario. OHH was defined as opioid-related emergency department visit or hospitalization or opioid use disorder treated with opioid-agonist therapy within three years prior to death. The primary outcome was receipt of palliative care overall and stratified by setting. Analysis included descriptive statistics and log-Poisson regression, adjusting for age, sex, socioeconomic position, comorbidities and substance use.

Results:

Of 323,727 decedents, 2,732 had OHH. Compared to decedents without OHH, those with OHH were younger and more likely to experience housing instability and reside in a low-income neighborhood. Relative risk of receiving palliative care across all settings was similar among decedents with and without OHH (RR 1.01, 95% CI 0.99-1.04). When analyzed according to setting, those with OHH were less likely to receive palliative care in outpatient (RR 0.82; 95% CI 0.79-0.86), home (RR 0.71; 95% CI 0.66-0.76), long-term care (RR 0.81; 95% CI 0.77-0.86) and complex continuing care settings (RR 0.81; 95% CI 0.77-0.86), and more likely to receive palliative care in inpatient settings (RR 1.03; 95% CI 1.01-1.06)

Conclusion:

Compared to the general population, people with OHH experience more socioeconomic inequities and are less likely to receive community-based palliative care at the end of their lives.

Key Words

- Equity, Diversity, Inclusion issues
- Elderly Populations
- Medical Co-Morbidities
- Opioids/Opiates
- Treatment Models/Programs

Learning Objective # 1

Describe the end-of-life characteristics of people who experience opioid-related health harms.

Learning Objective # 2

Compare receipt of palliative care among people with and without opioid-related health harms in the last 90 days of life.

Reference # 1

Bech AB, Clausen T, Waal H, et al. Mortality and causes of death among patients with opioid use disorder receiving opioid agonist treatment: a national register study. *BMC Health Serv Res* 2019; 19(1): 440

Reference # 2

Ebenau A, Dijkstra B, Ter Huurne C, et al. Palliative care for patients with substance use disorder and multiple problems: a qualitative study on experiences of healthcare professionals, volunteers and experts-by-experience. *BMC Palliat Care* 2020; 19(1): 8

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