

Leveraging EMR data and province-wide administrative health data to evaluate opioid agonist treatment: why both are needed

Category: Poster Presentation (in person)

Abstract Body

Effective medications, such as methadone and buprenorphine, are available for the treatment of Opioid Use Disorder, known as opioid agonist treatment (OAT). In Ontario, OAT can be accessed in the community in specialized addiction clinics or in primary health care settings. Ontario has the largest multi-site organization devoted to treating opioid use disorder with standardized policies and practices for physicians providing OAT in approximately 70 clinics across the province in Canada. Ontario is also home to ICES, a not-for-profit research institute encompassing a secure and accessible array of linked health administrative data. The resulting databases offer a critical opportunity to evaluate the impact of specialized addiction treatment within a network of treatment providers alongside the impact of OAT at a population level amid a public health emergency of opioid poisonings.

The purpose of this presentation is to bring forward evidence to support the use of EMR data and province-wide administrative health data to effectively evaluate OAT to assess the quality of care within the addiction treatment system on a continuing basis in a time of significant growth of OAT provision in the Province of Ontario. We will do so by presenting two large cohorts of OAT patients in Ontario, one clinical cohort (n = 60,000 patients) and one population-level cohort (n = 100,000 patients). We will discuss why the cohorts were set up, describe the patient populations, what is being measured, what has been found, and the main strengths and weaknesses of using these data.

Key Words

- Epidemiology
- Opiate Agonist Therapy
- Primary Care

Learning Objective # 1

1. After this presentation, conference attendees will be able to recognize the value of assessing clinical data alongside population-wide administrative health data to effectively evaluate OAT

Learning Objective # 2

2. After this presentation, conference attendees will recognize and understand the history, strengths and limitations of using EMR data and province-wide administrative health data research platforms and be able to better critically appraise future studies that arise from such platforms.

Reference # 1

K. A. Morin, S. Acharya, J. K. Eibl and D. C. Marsh. Evidence of increased Fentanyl use during the COVID-19 pandemic among opioid agonist treatment patients in Ontario, Canada. *Int J Drug Policy* 2020 Vol. 90 Pages 103088 Accession Number: 33385974 DOI: 10.1016/j.drugpo.2020.103088
<https://www.ncbi.nlm.nih.gov/pubmed/33385974>

Reference # 2

K. A. Morin, J. K. Eibl, A. M. Franklyn and D. C. Marsh. The opioid crisis: past, present and future policy climate in Ontario, Canada. *Subst Abuse Treat Prev Policy* 2017 Vol. 12 Issue 1 Pages 45 Accession Number: 29096653 PMCID: PMC5667516 DOI: 10.1186/s13011-017-0130-5

Lead Author

Dr. Kristen Morin
Postdoctoral Fellow | NOSM