The impact of opioid agonist treatment on hospitalisations for injecting-related diseases: a retrospective data linkage study

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BACKGROUND
Injecting-related bacterial and fungal infections are common among people who inject drugs (PWID) and there is evidence that they are increasing in prevalence¹.

AIMS
Opioid agonist treatment (OAT) reduces injecting frequency and blood borne virus transmission. Therefore, we aimed to examine the impact of OAT on hospitalisations for injecting-related diseases.

METHOD
We conducted a retrospective state-wide cohort study using linked, routinely collected, administrative health data. The cohort included individuals on OAT between 1 Aug 2001 and 31 Dec 2017.

RESULTS
There were 19,834 recorded diagnoses for injecting-related diseases; skin and soft tissue infections (SSTI) were the most common (n=13,588).

IMPLICATIONS
Improving OAT coverage and retention may be an effective prevention strategy for injecting-related diseases; however, more evidence is needed to understand the external risk factors (e.g., increased methamphetamine injection and antibiotic resistant bacteria) that are contributing to this increasing trend over time.

Reference:¹ Lewer, Harris & Hope (2017)