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Trends in the use of Opioid Agonist Treatment in New South Wales, 2013-2022

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1. Executive Summary

Opioid agonist treatment (OAT) is one of the main treatments for people with opioid dependence[1]. Involving long-term pharmacotherapy with an opioid agonist or partial agonist, it is well established that OAT reduces non-medical use of opioids, injecting and injecting-related injuries, criminal activity, and overall mortality, particularly overdose mortality[2-5]. The World Health Organization lists both methadone and buprenorphine[6,7]as essential medicines for opioid dependence[8]. In Australia, there are currently four OAT formulations subsidised through the Pharmaceutical Benefit Scheme (PBS), including methadone liquid (PBS listed in 1974), sublingual (SL) buprenorphine (2001), SL buprenorphine-naloxone (2005) and long-acting injectable (LAI) buprenorphine (2019)[9].

LAI formulations of buprenorphine represent a relatively new addition to OAT in Australia[10], having been PBS-listed since September 2019. LAI buprenorphine is administered via weekly[11] or monthly[12,13] subcutaneous injections, providing an alternate treatment option that reduces the frequency of dosing visits compared to oral and sublingual OAT alternatives. It's unclear what impact the introduction of LAI buprenorphine and policy changes in response to the COVID-19 pandemic had on patterns of OAT medicine use. Furthermore, in New South Wales (NSW) there are limited longitudinal population-level data that allow the ability to distinguish between SL and LAI buprenorphine formulations.

This technical report describes 10-year trends in the sales of OAT medicines in NSW. Aggregate monthly sales were used to estimate the number of OAT clients per month, based on average doses.

Key Findings

- NSW had the highest rate of OAT utilisation of all jurisdictions from 2013 to 2022.
- The estimated number of OAT clients in NSW increased by 44% from 15,660 in January 2013 to 22,535 in December 2022.
- Per capita, NSW saw a 31% increase in rates of use from 21 OAT clients per 10,000 population in January 2013 to 28 per 10,000 in December 2022.
- Patterns of OAT medicines in NSW also changed over this time. There was:
    - a decline (-8.5%) in clients receiving methadone (2013-2022),

  - an almost 2-fold increase of clients receiving SL buprenorphine (2013-2022), and
  - a substantial uptake of LAI buprenorphine following its introduction (370 clients in Sep 2019 to 5,774 clients in Dec 2022).
- Consequently, the distribution of OAT medicines has shifted in NSW:
  - In January 2013, over four-fifths (83.7%) of OAT clients received methadone with the remainder receiving SL buprenorphine (16.3%).
  - In December 2022, 52.5% of clients received methadone and 47.5% buprenorphine (26.2% LAI buprenorphine and 21.3% SL buprenorphine).
- Across the decade in NSW, trends in the distribution of OAT clients by remoteness and socioeconomic status remained relatively consistent:
  - Approximately 70% of OAT in NSW was in major cities and 23% in inner regional areas, while less than 1.0% were in remote and very remote areas.
  - Around a quarter (24-26%) of clients in NSW received OAT in the most advantaged areas and a fifth (20%) in the most disadvantaged areas.
- From 2013 to 2022, greater increases in OAT utilisation were observed in outer regional (+86%), remote (+540%) and very remote (+80%) areas compared with major cities (+40%).
- The majority (61-77%) of OAT in NSW is accessed through community pharmacies, however access from non-community pharmacy settings increased markedly since 2020. For example, the proportion of clients accessing OAT from 'other' settings (including prisons) increased from less than 1% in 2013 to 9% in 2022.
- The majority of clients in community pharmacy received methadone whereas, since 2020, the majority of clients in non-community pharmacy settings received buprenorphine. In 2022 almost all (96%) OAT clients at 'other' settings (including prisons) received LAI buprenorphine.

Conclusions

There has been an increase in access to OAT in NSW over the past decade, with just under half of clients now receiving buprenorphine and just over half, methadone. Importantly, there has been an increase in access to OAT in non-community pharmacy settings and in regional and

remote areas since early 2020 - coinciding with the introduction of LAI buprenorphine and the COVID-19 pandemic. It is now important to determine the clinical outcomes of these changes, in terms of benefits, harms and cost effectiveness.

2. Background & Methods

2.1. Background

Opioid agonist treatment (OAT) is a first-line treatment for opioid dependence[1]. Involving long-term pharmacotherapy with an opioid agonist or partial agonist, it is well established that OAT reduces non-medical use of opioids and related harms [3]. For example, there is strong evidence to show that OAT is effective at reducing injecting and injection related injuries, blood-borne viral spread, overdoses and overall mortality[2-5], as well as improving physical health, social functioning and economic productivity[1]. Methadone and buprenorphine are both listed by the World Health Organization as essential medicines for this indication[8]. In Australia, four formulations of OAT are approved by the Therapeutics Goods Administration (TGA) and subsidised through the Pharmaceutical Benefit Scheme (PBS) for the treatment of opioid dependence. These include methadone liquid (PBS listed in 1974), sublingual (SL) buprenorphine (2001), SL buprenorphine-naloxone (2005: tablets, 2011: films) and long acting injection (LAI) buprenorphine (September 2019)[9].

LAI formulations of buprenorphine have recently become available for the treatment of opioid dependence[10], having been listed on the PBS since September 2019. Depending on the formulation, LAI buprenorphine is administered via weekly[11] or monthly[12,13] subcutaneous injections, providing an alternate OAT option to daily methadone and SL buprenorphine, reducing the frequency of dosing visits and increasing flexibility[14,15]. LAI buprenorphine may offer a number of benefits including increased quality of life, employment, and treatment satisfaction[16], however, the shift to monthly dosing may result in unintended consequences as well[17-19]. In Australia, the roll-out of LAI buprenorphine was stepped up during the COVID-19 pandemic in an effort to reduce face-to-face interactions and the frequency of visits by OAT clients to health services. National interim guidance developed by professional and consumer groups also recommended increasing the number of take-away doses for methadone and SL buprenorphine, greater use of telehealth appointments, and home delivery, including third party collections for clients in quarantine[20]. These recommendations addressed logistical barriers to OAT engagement, including

the travel burden associated with attending services[21]. Although their implementation was not mandated, and varied across jurisdictions, understanding the extent to which these changes in guidance impacted access to OAT will help determine the adaptability of the program to support clients.

In 2022, the NSW Government implemented SafeScript, a real-time prescription monitoring tool, providing prescribers and pharmacists with access to their patients' prescription history for opioids and other high-risk medicines.[22] SafeScript automatically collects details of prescriptions issued at a medical clinic or dispensed at a pharmacy in real time. The program aims to support clinical decision making and reduce harm from the included medicines. SafeScript NSW had a phased roll out commencing in November 2021 and since late May 2022, prescribers and pharmacists in all NSW areas are encouraged to register to use the system.[22] The potential exists for a new sub-group of people with iatrogenic opioid dependence, identified as a result of their patterns of opioid prescribing as recorded in SafeScript, to lead to an increase in OAT initiations in NSW from 2022.

Each year, a summary of medicines used on snapshot day/s in OAT programs around Australia are published.[23] To date, summaries of New South Wales (NSW) data have been unable to distinguish between SL and LAI buprenorphine formulations. This limits a nuanced understanding of changes to the profile of individual medicines over time and changes to overall utilisation in different settings (e.g., community vs. prison, regional v. remote). Monthly sales data provide a novel means to examine longitudinal trends of OAT in NSW, including the ability to distinguish between SL and LAI formulations of buprenorphine.

This report aims to describe sales of OAT medicines in NSW over time and to consider factors that may have affected patterns of access.

2.2. Aims

This report aims to:

1. Examine trends in the estimated number of clients on all OAT medicines in NSW between 2013 and 2022, and

2. Examine variation in the estimated number of OAT clients by jurisdiction, remoteness, socio-economic status and setting.

2.3. Methods

2.3.1. Study design and time period

This is a descriptive study of trends in the sales of OAT medicines (methadone, SL buprenorphine, SL buprenorphine-naloxone and LAI buprenorphine) in NSW from January 2013 to December 2022.

2.3.2. Data source

Data was provided by IQVIA (iqvia.com) on sales of medicines by pharmaceutical wholesalers and manufacturers to community pharmacies, hospitals and other providers, including prisons. IQVIA claims around 97% coverage of the Australian community pharmacy and hospital settings[24]. Data on all formulations of OAT medicines sold in NSW between January 2013 and December 2022 were included. Due to the legal requirements for secure storage and monitoring of OAT medicines in pharmacies, the number of packs sold over a 12-month period should closely approximate the number of medicines used by clients in the NSW OAT Program.

2.3.3. Medicines

Available OAT medicines, by formulation and strength, are summarised in Table 1. Formulations of methadone and buprenorphine used only for opioid dependence were included. In the rare event that methadone is used for analgesia, methadone tablets (which can be crushed) are generally preferred over liquid, in both the community and hospital setting. Methadone liquid 200mL, indicated for both analgesia and opioid dependence in Australia, was included because most use was assumed to be for opioid dependence. Sales of LAI buprenorphine were disaggregated into five groups relative to strength and injection frequency - weekly low and high strengths, and monthly low, medium and high strengths (see 'LAIB Group' in Table 1). These groups were selected to provide high level trends without identifying individual brands.

Table 1. Medicines available in the Australian opioid agonist treatment programme.

Active Ingredient	Form	Brand name	Strength (mg)	LAIB† Group	Entry to market‡
Methadone	Oral (liquid)	Biodone Forte, Methadone Syrup	5mg / mL	N/A	1974[25]
Buprenorphine	Sublingual tablet	Subutex	0.4, 2, 8	N/A	2001[26]
Buprenorphine / naloxone	Sublingual tablet / film	Suboxone	2/0.5, 8/2	N/A	2005: Tablets[27] 2011: Films[28]

Active Ingredient	Form	Brand name	Strength (mg)	LAIB† Group	Entry to market‡
Buprenorphine	Long acting injection	Buvidal weekly	8, 16	Weekly LAIB - low	September 2019[25]
Buprenorphine	Long acting injection	Buvidal weekly	24, 32	Weekly LAIB - high	September 2019[25]
Buprenorphine	Long acting injection	Buvidal monthly	64	Monthly LAIB - low	September 2019[25]
Buprenorphine	Long acting injection	Buvidal monthly	96, 128	Monthly LAIB - med	September 2019[25]
Buprenorphine	Long-acting injection	Buvidal monthly	160	Monthly LAIB - high	May 2022[25]
Buprenorphine	Long-acting injection	Sublocade	100	Monthly LAIB - low	May 2020[25]
Buprenorphine	Long-acting injection	Sublocade	300	Monthly LAIB - high	May 2020[25]

†LAIB: Long-acting injection buprenorphine, ‡ Entry to market based on PBS listing as part of the Australian Opioid Dependence Treatment Program

2.3.4. OAT clients per month

Describing OAT utilisation based solely on packs sold does not enable a like-for-like comparison between different medicines. In some cases, one pack may be used to treat one or multiple clients - for example, one pack of LAI buprenorphine treats one client over 28 days, whereas one pack of methadone syrup (1 L) may treat several clients. Oral morphine equivalents (OME) were considered less relevant for comparing OAT in a non-analgesia setting and could not be reliably estimated for LAI buprenorphine. For these reasons, the monthly number of packs sold was converted into an estimate of OAT clients per month.

For SL buprenorphine and methadone formulations, OAT clients per month were estimated by summing the total milligrams (mg) contained in the packs sold that month and dividing by the average dose (mg) to treat a single person for 28 days e.g.,

$$\text{OAT clients per month} = \frac{[\ \text{mg per pack} \times \text{Total number of packs sold that month}\ ]}{[\ \text{Average daily dose (mg) for a single person} \times 28\ \text{days}\ ]}$$

Average doses were estimated from previous research (see Table 2). For LAI buprenorphine formulations, estimates of clients per month were based on the number of packs (injections) sold. Specifically, one pack of weekly and one pack of monthly LAI buprenorphine were assumed to treat 0.25 and 1 client, respectively, over a 28-day period, aligning with the recommended dosing schedules[11-13]. A chart review of three Australian OAT providers verified these dose estimates

aligned with real-world LAI buprenorphine dosing schedules[29]. To account for small fluctuations in sales data, reflecting the ordering behaviour (such as stockpiling) of pharmacies rather than actual fluctuations in OAT client numbers, three-month moving averages are presented.

Table 2. Average doses for OAT medicines; data pooled from recent Australian cohort studies.

Measure	Methadone liquid		Sublingual Buprenorphine	
	Pooled estimate (95% CI)	**Sources**	**Pooled estimate (95% CI)**	**Sources**
Mean dose (mg/day)	74.06 (69.44, 78.69)	[30,31]	16.00 (14.39, 17.61)	[31]
Median dose (mg/day)	75 (47,75)	[31-35]	13 (13, 16)	[31-36]

Where applicable $I^2 = 0.0$.

2.3.5. Geographical information and setting

Monthly OAT utilisation was summarised overall and disaggregated by jurisdiction, remoteness, socioeconomic status, and setting. The Australian jurisdictions includes six states (NSW, Queensland (QLD), South Australia (SA), Tasmania (TAS), Victoria (VIC), Western Australia (WA)), and two territories (Australian Capital Territory (ACT) and the Northern Territories (NT)). Setting refers to the provider type which purchased the medicines, and includes 'community pharmacy', 'hospital' including outpatient drug and alcohol services, 'aged and community healthcare', 'clinics and medical centres' including private clinics and general practices, and 'other (including prisons)'. The Australian Bureau of Statistics (ABS) mapping of Postcode 2017 was used to map sales to the Australian Statistical Geography Standard (ASGS) Remoteness Areas 2016 data[37] and to the Socio-Economic Indexes for Areas (SEIFA) Index of Relative Socioeconomic Advantage and Disadvantage (IRSAD) 2016 data[38] (see Appendix 6.1 Mapping to postcode). Australian remoteness categories include 'Major Cities', 'Inner Regional', 'Outer Regional', 'Remote' and 'Very Remote'. IRSAD summarises information about the economic and social conditions of people and households within an area, with lower quintiles indicating relatively greater disadvantage and higher quintiles indicating relatively greater advantage.

2.3.6. Statistical Analysis

Descriptive statistics and data visualisations were used to describe trends over time, and by OAT medicine, jurisdiction, remoteness, socioeconomic status and setting. The estimated number of clients receiving OAT medicines each month, overall and by individual medicines, were evaluated as a count standardised against population size and/or as a proportion (%) of the total number of OAT clients that month. Per capita estimates were based on the estimated residential population at June 30 each year, provided by the ABS[39], overall and by jurisdiction.

Analyses were conducted using SAS Enterprise Guide 9.4 (SAS Institute Inc., Cary, NC, USA) and Microsoft Excel for Microsoft 365 (Microsoft, Seattle, WA, USA).

Ethics approval

Ethics approval was not required as data from IQVIA were received in deidentified aggregated form.

3. Guide to interpretation of results

- It is important to acknowledge that the amounts sold do not directly translate to the amounts dispensed or used. For this reason, it was not possible to estimate patterns of use at the client level nor determine the exact number of clients engaged in OAT in each month.
- The approach used in estimating the number of clients receiving OAT per month assumes that real-world OAT doses – and the factors known to influence dose, including disorder severity - have remained stable over time and across settings. The parameters used to derive these estimates were informed by the literature and have not been validated against population-level data on OAT doses from Australia.
- The estimates assume clients are retained in OAT over the full 28-day interval; where this is not the case, the number of clients accessing OAT at least once a month would be higher.
- This report complements the National Opioid Pharmacotherapy Statistics Annual Data (NOPSAD), which provide a national overview of OAT pharmacotherapies used in Australia on snapshot day/s by state and territory health departments[23]. Where comparisons with NOPSAD show varying trends, these may be explained by differences in client ascertainment and changes in the patterns of OAT retention during the study period[40].
- Furthermore, IQVIA coverage is not 100% and may have improved over time, which could lead to an underestimate of OAT clients in earlier years of the study and an overestimate of the percentage change between 2013 to 2022.
- As the weekly low dose LAI buprenorphine formulation can be used for top-up or supplemental dosing, inclusion of these formulations may have resulted in a slight overestimate of the number of clients.
- The geographic information provided by IQVIA for non-community pharmacy/hospital settings was less granular (PHN level) so there may be misclassification of remoteness and socioeconomic categories in these settings.

- The socioeconomic and remoteness findings reflect where OAT was received rather than where OAT clients reside, as clients may have travelled to different areas to receive OAT.

4. Findings

4.1. OAT utilisation by state/territory

Across the decade, NSW had the highest number of OAT clients per month of all jurisdictions, followed by Victoria and Queensland (Figure 1A). The estimated number of clients receiving OAT each month in NSW increased from 15,660 clients in January 2013 to 22,535 clients in December 2022 (44% increase Figure 1A, Table A1).

After accounting for population size, there was a 31% increase in use of OAT in NSW, from 21 OAT clients per 10,000 population in January 2013 to 28 per 10,000 in December 2022 (Figure 1B). In December 2022, the number of OAT clients per capita per month in NSW was more than three-fold the number in the NT (285 per 10,000 population vs 82 per 10,000) (Figure 1B).

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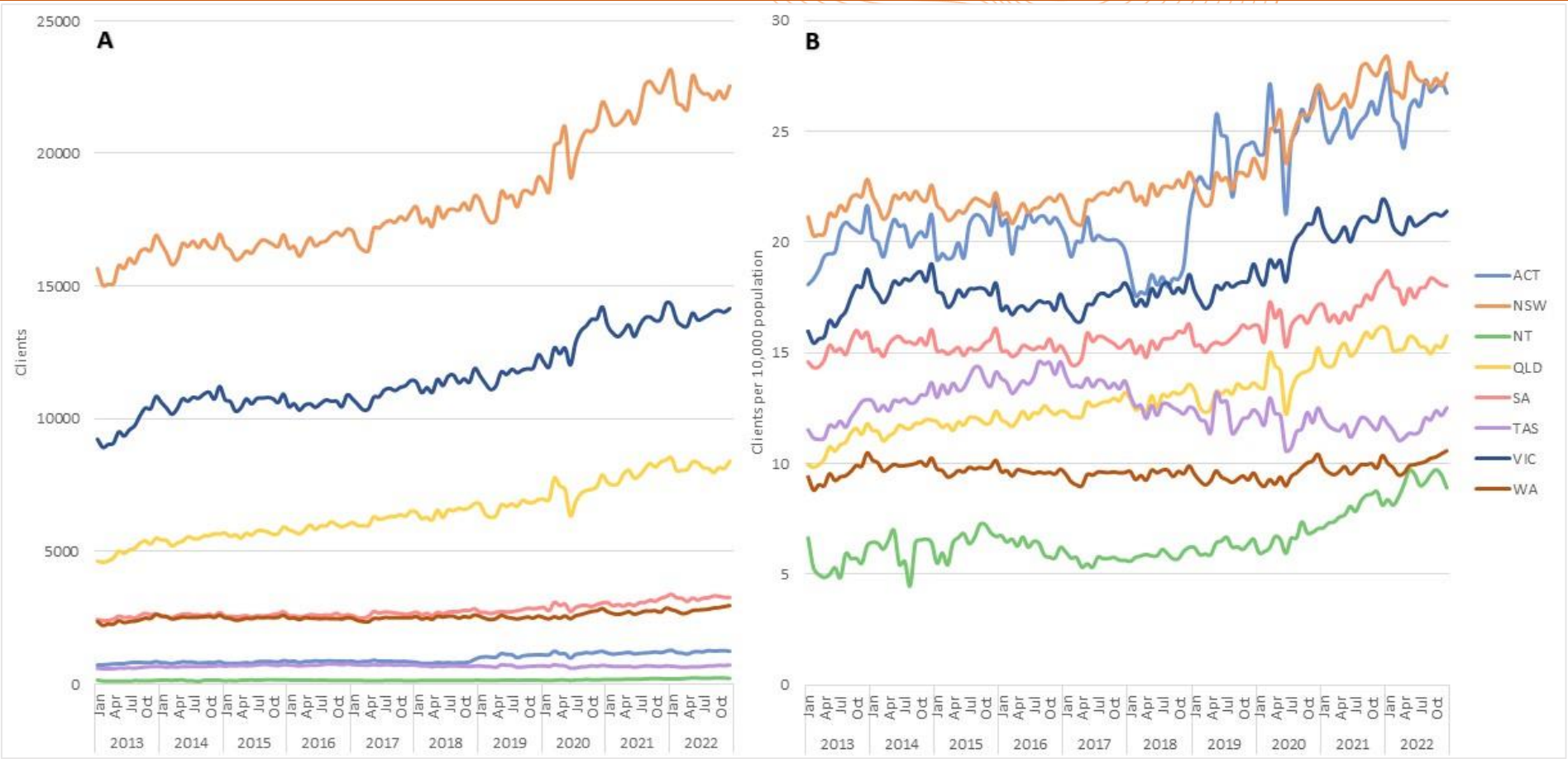
Figure 1. Number of OAT clients (A), and OAT clients per 10,000 population (B), per month by Australian state/territory (2013-2022).



ACT: Australian Capital Territory, NSW: New South Wales, NT: Northern Territories, QLD: Queensland, SA: South Australia, TAS: Tasmania, VIC: Victoria, WA: Western Australia

4.2. OAT utilisation in NSW

4.2.1. All OAT medicines

In NSW, per-capita estimates from 2013 to 2019 ranged between 20 to 23 clients per 10,000 population, before increasing to a range of 24 to 28 clients per 10,000 population from 2020 onwards (Figure 1B).

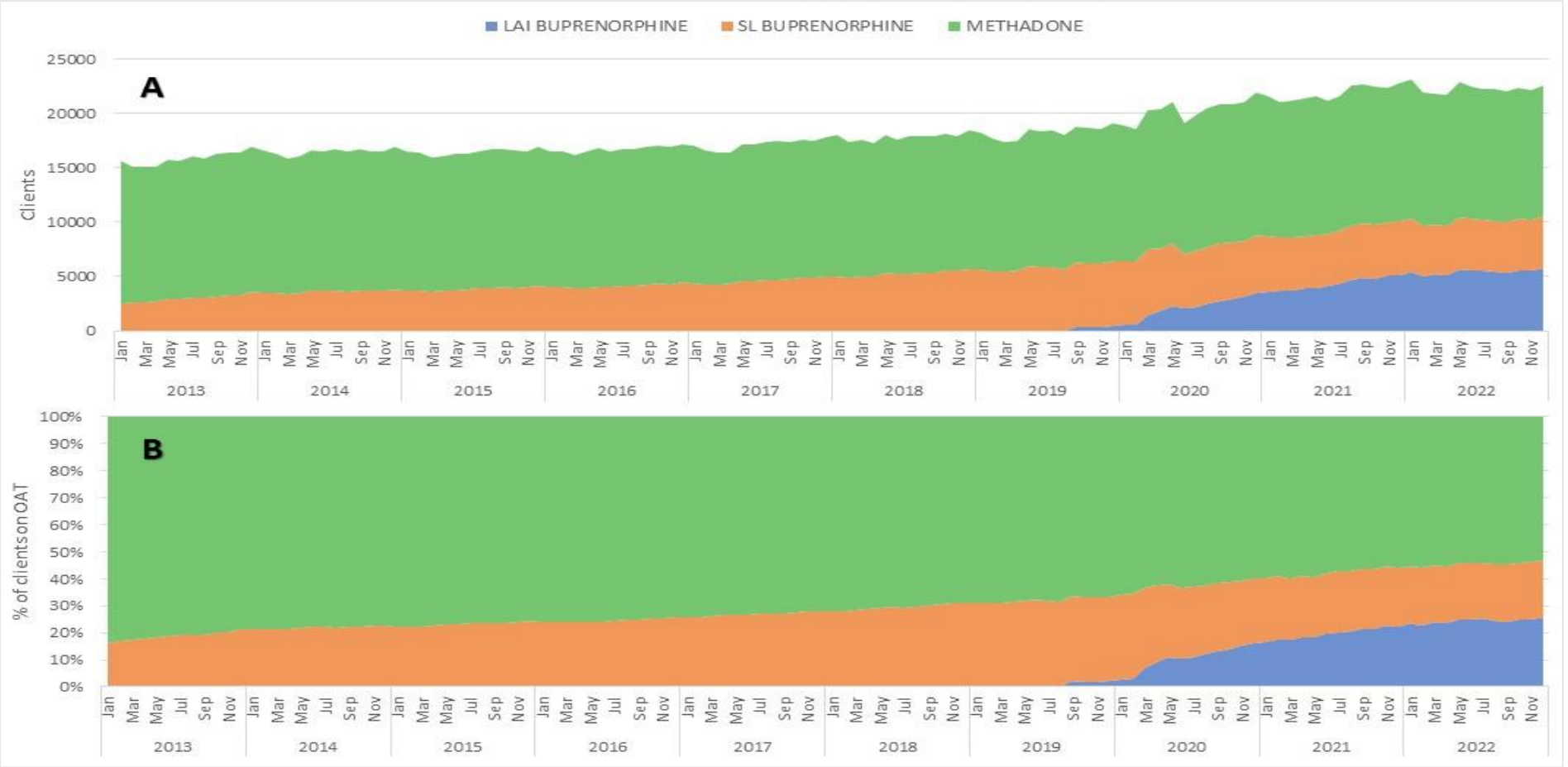
Patterns of OAT have changed over time in NSW. Methadone use decreased (-8.5%) from 13,115 clients in 2013 to 11,999 in December 2022 (Figure 2A, Table A1). There was a 135% increase in the estimated number of clients receiving SL buprenorphine from January 2013 (2,545 clients) to December 2019 (5,984 clients), followed by a 25% decrease by December 2022 (4,762 clients). Following its introduction to the market, there was a substantial uptake of LAI buprenorphine from 370 clients in September 2019 to 5,774 clients in December 2022.

Subsequently, the distribution of medicines in the NSW OAT program evolved over time (Figure 2B). In January 2013, over four-fifths (83.7%) of the estimated number of OAT clients in NSW received methadone with the remainder receiving SL buprenorphine (16.3%). In December 2022, 52.5% of clients received methadone, 26.2% LAI buprenorphine and 21.3% SL buprenorphine (Figure 2B, Table A1).

4.2.2. LAI buprenorphine

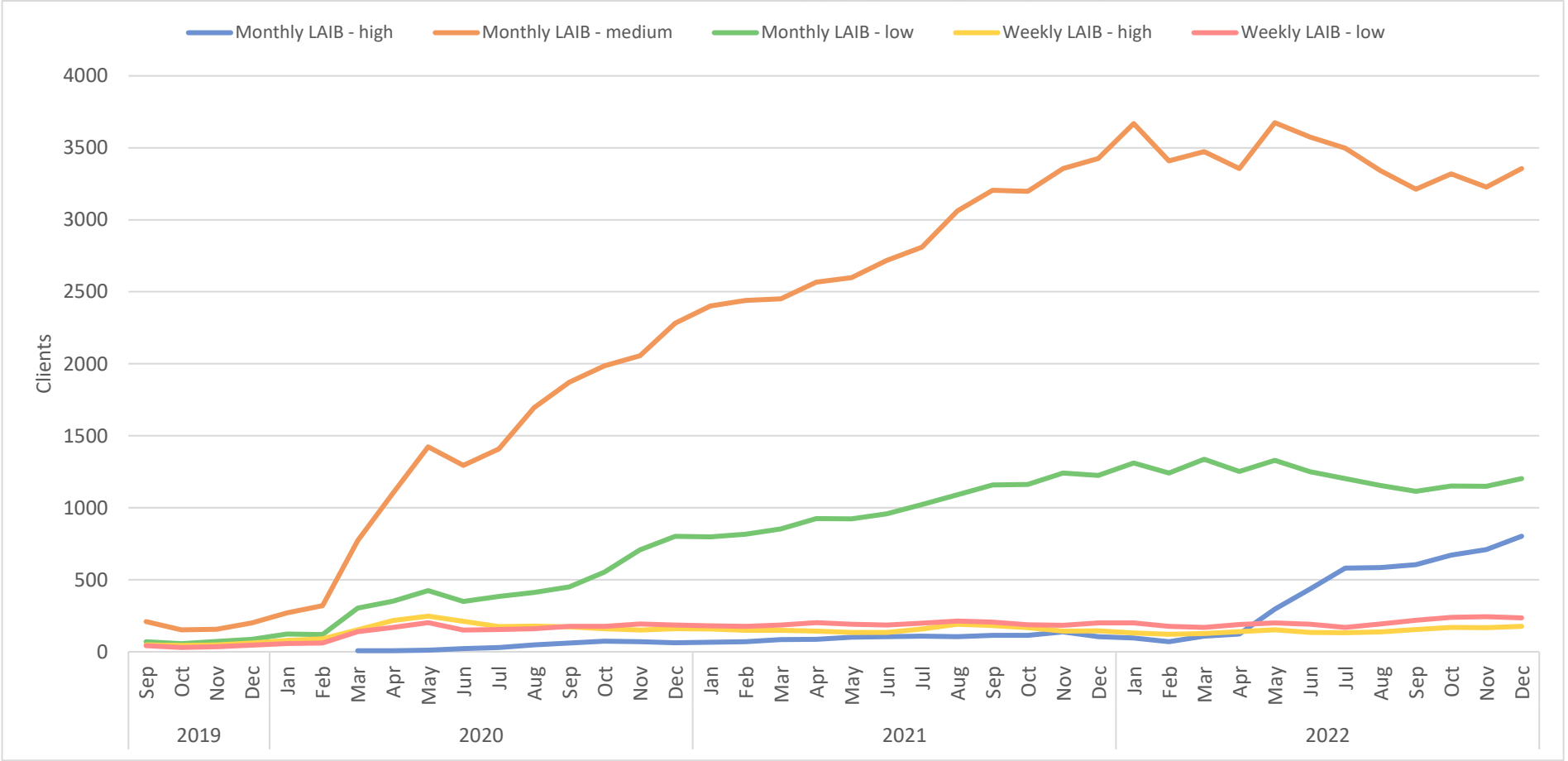
Since the introduction of LAI buprenorphine, the majority of use was for monthly rather than weekly formulations (Figure 3, Table A2). The formulations in the 'Monthly LAIB – medium' group were used most commonly, followed by 'Monthly LAIB – low', with 'Monthly LAIB – high' used less frequently. From September 2019 to December 2022, use of 'Monthly LAIB – medium' formulations increased from 210 to 3,356 clients (+1498%), from 70 to 1,203 clients (+1618%) for 'Monthly LAIB – low', and from <10 clients in March 2020 to 802 clients in December 2022 for 'Monthly LAIB – high' (Figure 3, Table A2).

Figure 2. Cumulative number of OAT clients (A) and proportion of total OAT clients (B), per month by medicine (NSW, 2013-2022).



LAI: Long Acting Injection, OAT: Opioid Agonist Treatment, SL: Sublingual

Figure 3. Number of OAT clients by LAI buprenorphine (LAIB) group* (NSW, 2019-2022).



* LAIB groups are defined in Table 1

4.2.1. Remoteness

Over the study period in NSW, trends in the distribution of OAT clients by remoteness remained relatively consistent. Approximately 70% of OAT was accessed in major cities, 23% in inner regional areas, and less than 1.0% were in remote and very remote areas (Table A3). The estimated number of OAT clients increased across all remoteness categories over the decade (Figure 4). From 2013 to 2022, greater increases in OAT utilisation were observed in outer regional (925 to 1717 clients: +86%), remote (17 to 110 clients: +540%) and very remote (44 to 79 clients: +80%) areas compared with major cities, which increased by 40% from 11,193 clients in January 2013 to 15,646 in December 2022 (Figure 4, Table A3).

4.2.2. Socioeconomic status (IRSAD)

Across the decade in NSW, trends in the distribution of OAT utilisation by socioeconomic status remained relatively consistent. Around a quarter (24-26%) of the estimated number of OAT clients received OAT in the most advantaged areas and 20% in the most disadvantaged areas (Table A4). From 2013 to 2022, rates of OAT use increased across all IRSAD quintiles, however the greatest increases in OAT use were observed in the most advantaged IRSAD quintile (+57%: 3,760 to 5,919 clients), compared with the most disadvantaged quintile (+42%: 3,174 to 4,494) (Figure 5, Table A4).

Figure 4. Number of OAT clients per month by remoteness (NSW, 2013-2022).

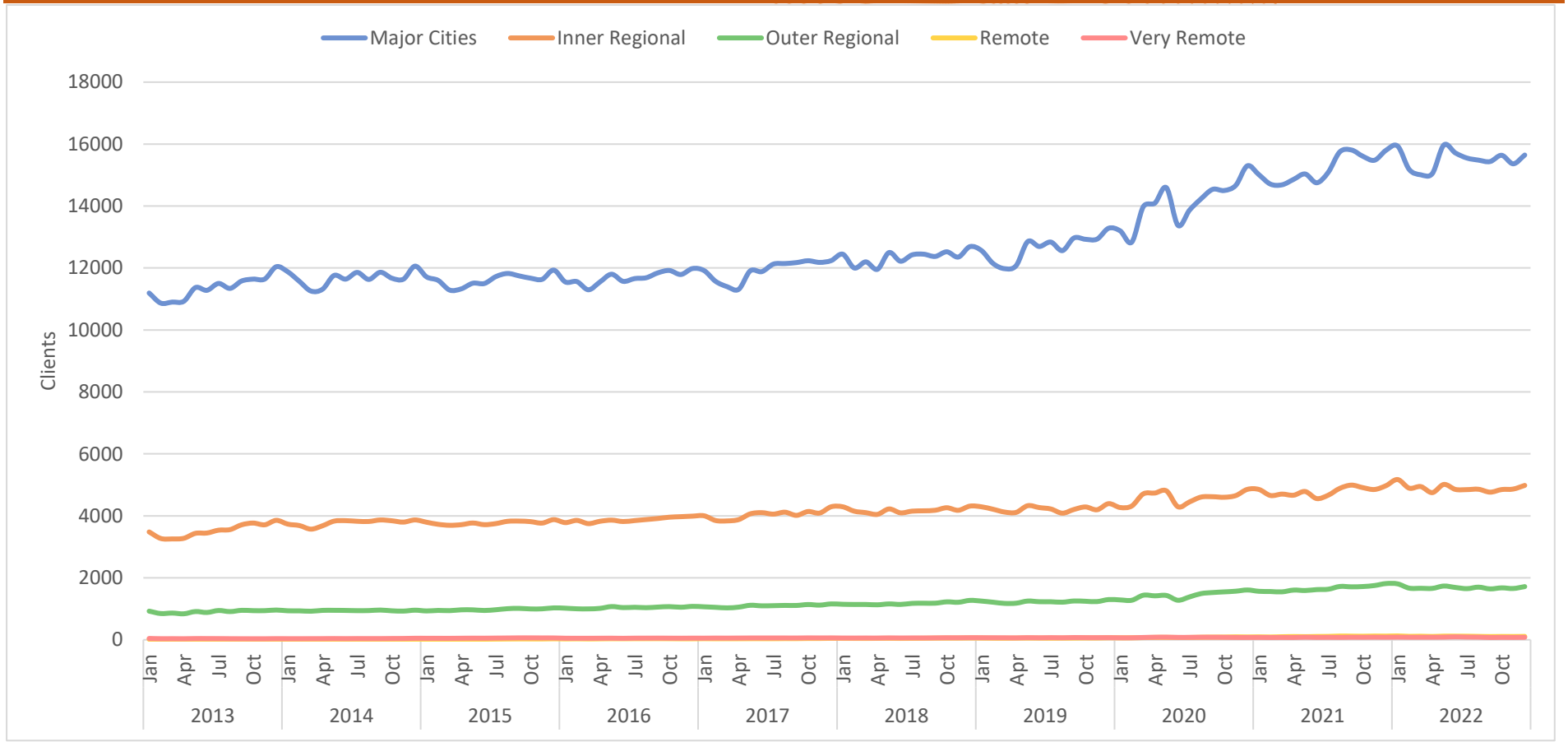
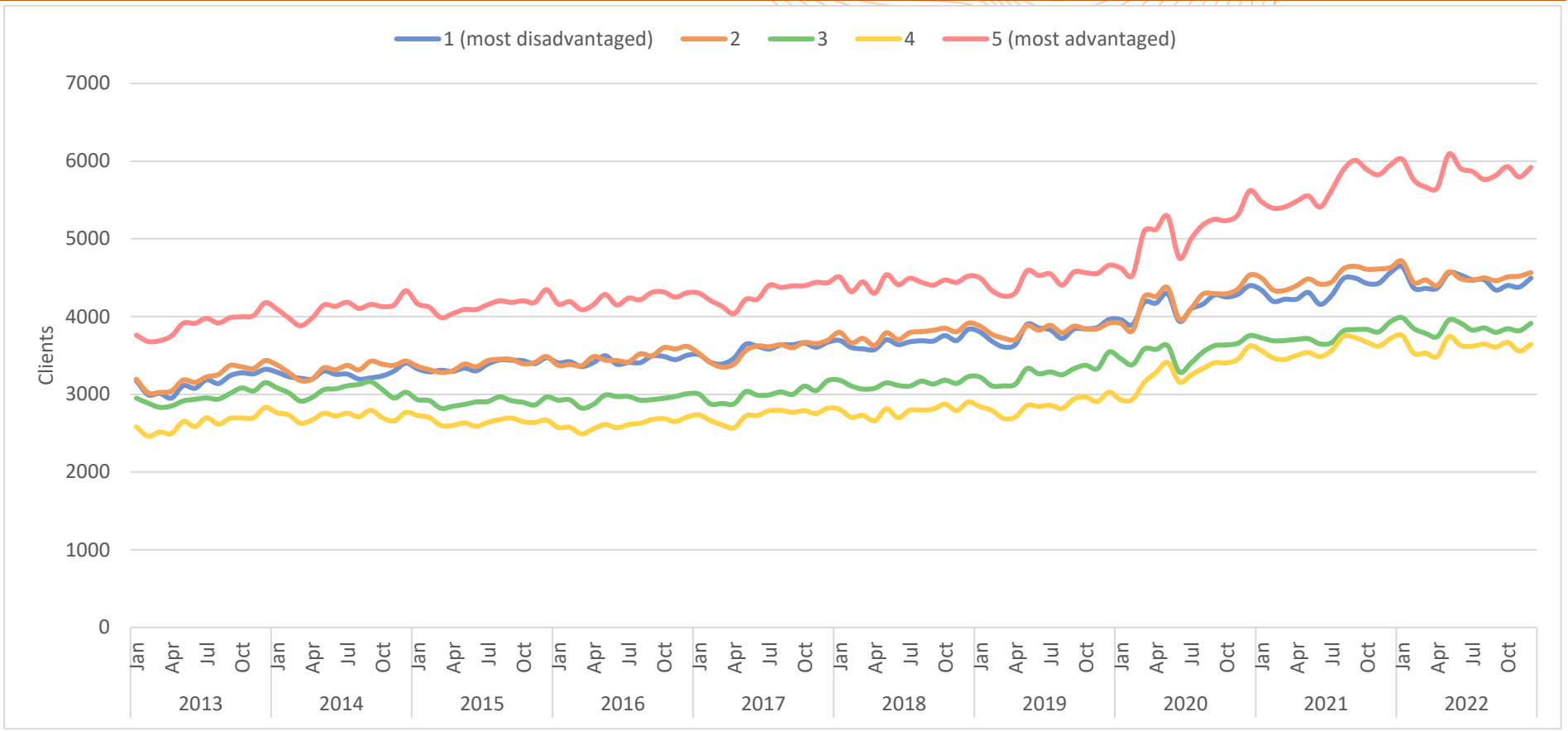


Figure 5. Number of OAT clients per month by IRSAD quintile (NSW, 2013-2022).



IRSAD: Index of Relative Socioeconomic Advantage and Disadvantage

4.2.3. Setting

In NSW, trends in the distribution of OAT utilisation by setting remained relatively consistent between 2013 and 2019, with some significant changes observed from 2020 to 2022. The estimated number of clients accessing OAT each month in community pharmacy increased by 27% from 11,226 in January 2013 to 14,754 in December 2020, remaining relatively stable to the end of 2022 (Figure 6). In contrast, the estimated number of clients accessing OAT in non-community pharmacy settings remained relatively stable from 2013 to 2019/2020, before increasing markedly (Figure 6, Table A5). At the beginning of the study period, less than 1% of clients accessed OAT from other (including prisons) settings; between 2019 and 2022 this figure rose to 9% (Table A5).

The distribution of medicines in the NSW OAT program varied by setting (Figure 7, Table A6). The majority of clients accessing OAT in community pharmacy each month received methadone whereas, since 2020, the majority of clients accessing OAT in non-community pharmacy settings received buprenorphine. In NSW in December 2022 (Figure 7, Table A6):

- 13,739 clients accessed OAT from community pharmacy, of whom 9,360 (68.1%) received methadone, 3,954 (28.8%) SL buprenorphine and 426 (3.1%) LAI buprenorphine;
- 3,534 clients accessed OAT from hospitals, including outpatient drug and alcohol services, of whom 1,040 (29.4%) received methadone, 319 (9.0%) SL buprenorphine and 2,175(61.5%) LAI buprenorphine, and;
- 1,971 clients accessed OAT from other settings (including prisons), of whom 77 (3.9%) received methadone, 7 (0.4%) SL buprenorphine and 1,887 (95.7%) LAI buprenorphine.

Figure 6. Number of OAT clients per month, by setting (NSW, 2013-2022).

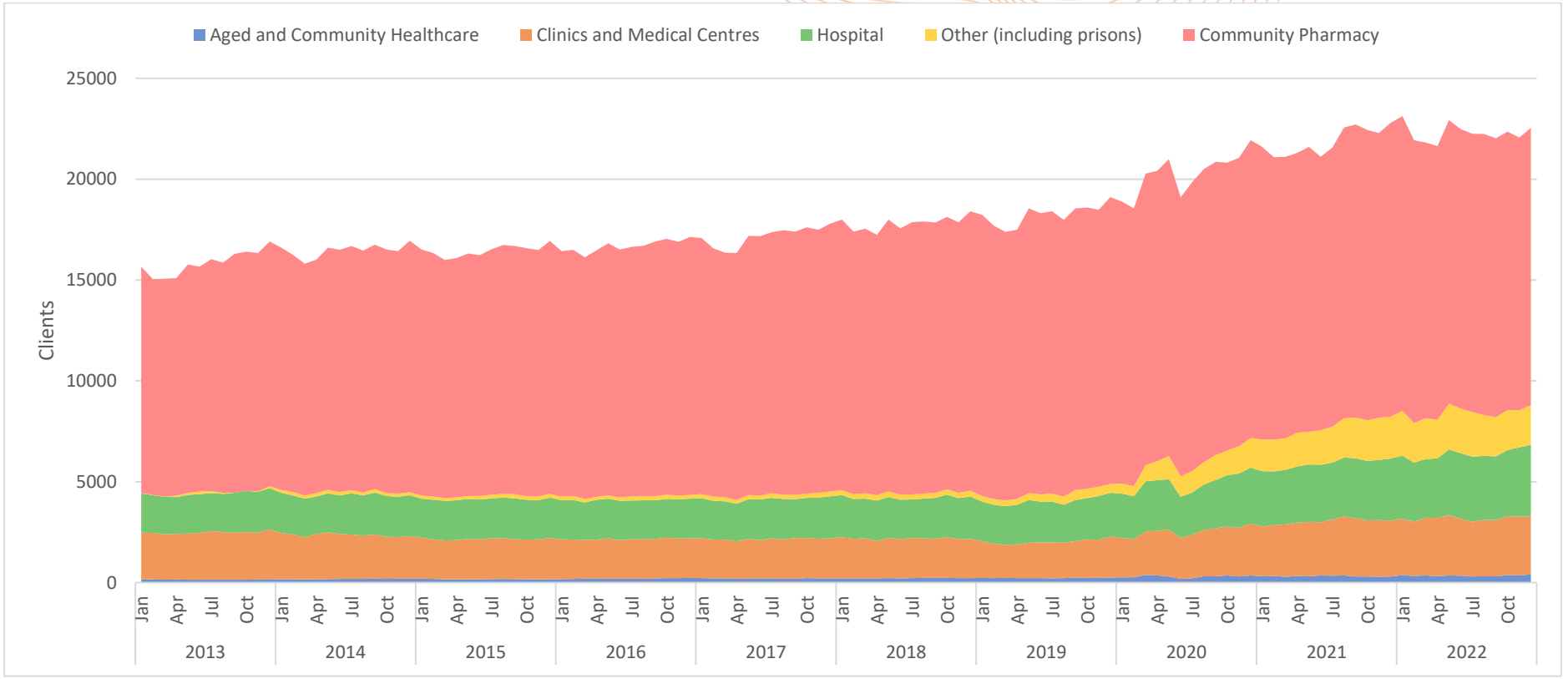
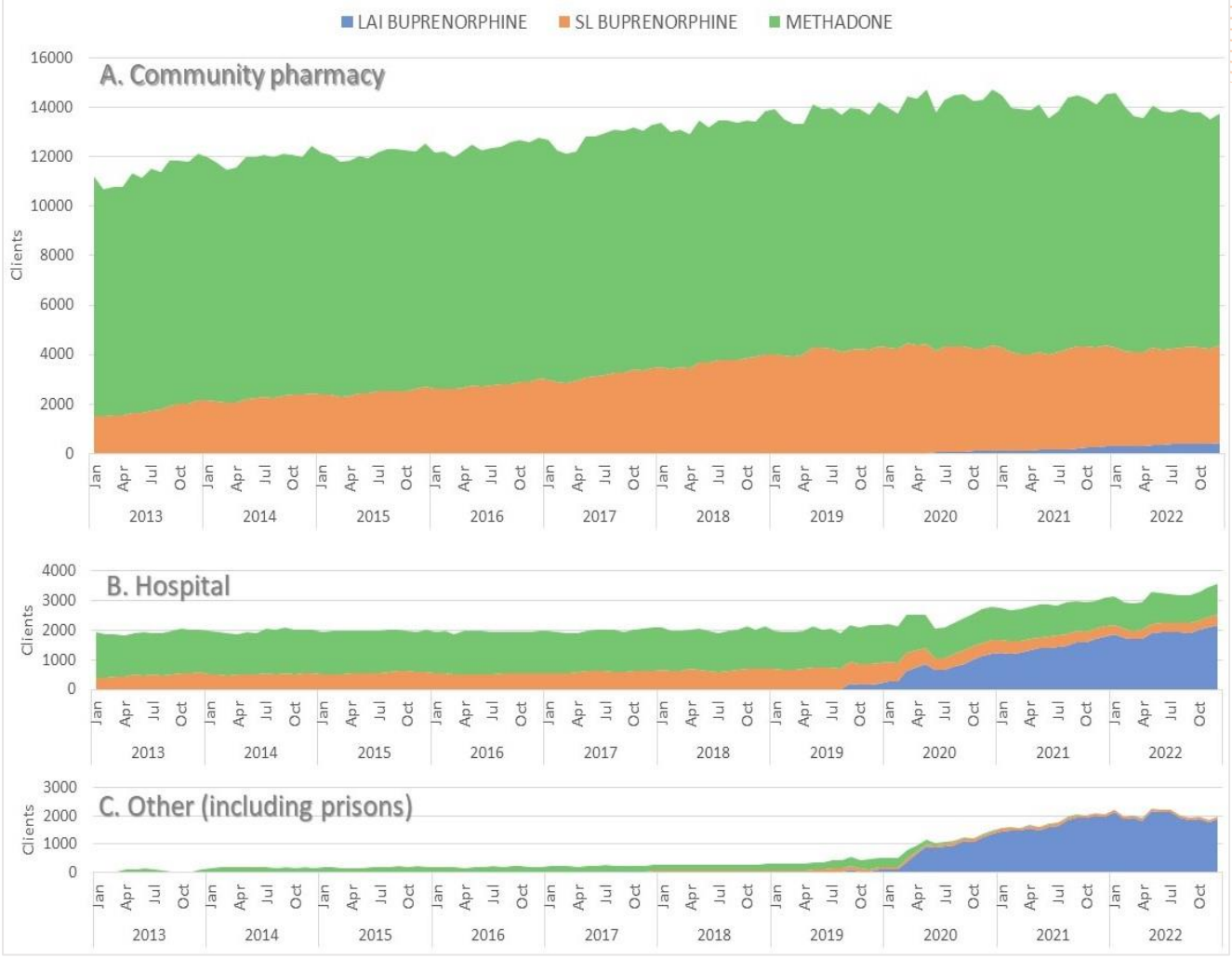


Figure 7. Number of OAT clients per month by medicine in: community pharmacy (A), hospitals (B), and other (including prisons) (C) (NSW, 2013-2022).



5. Discussion

This report used monthly sales data to evaluate trends in the estimated number of clients and the types of OAT medicines used in NSW between 2013 and 2022. Over the study period, overall utilisation of OAT in NSW increased steadily, with a +31% estimated increase in the per-capita number of OAT clients. The pattern of OAT medicines used in NSW changed over time; in 2013, methadone was most common while in 2022, levels of buprenorphine and methadone were approximately equal. Considerable increases in OAT access were observed in settings other than community pharmacies, and in remote and very remote geographic areas from early 2020 – coinciding with the introduction of LAI buprenorphine, the COVID-19 pandemic, and related interim OAT guidance and policies.

Importantly, this report provides novel insights about the uptake of LAI buprenorphine in NSW, as current data from the NSW OAT program has been unable to distinguish between SL and LAI buprenorphine formulations. This report demonstrates a substantial increase in the use of LAI buprenorphine for OAT in NSW. Between September 2019 (the month LAI buprenorphine was PBS-listed) and December 2022, the estimated number of clients accessing LAI buprenorphine increased 15-fold, eventually accounting for just over a quarter of all NSW OAT clients. LAI buprenorphine now surpasses SL buprenorphine as the most common buprenorphine formulation for OAT in NSW. By the end of the study period (2022), most clients in community pharmacy received methadone whereas almost all (96%) OAT clients at 'other' settings (including prisons) received LAI buprenorphine. As discussed previously, scale-up of LAI buprenorphine was accelerated during the COVID-19 pandemic in an effort to reduce exposure to infection, and help adhere with social distancing[20]. Such models included the rapid upscale of LAI buprenorphine in correctional centres in NSW for all clients initiated on OAT and those already receiving buprenorphine-naloxone, as a strategy to meet the increasing demand for OAT in NSW prisons while also increasing staff capacity for other clinical activities[41].

With this significant uptake of LAI buprenorphine there has been a shift in the distribution of OAT, with near equality in the number of clients estimated to be receiving buprenorphine (incl. SL and

LAI buprenorphine formulations) and methadone in NSW in the most recent year of data capture. The estimated proportion of all OAT clients receiving buprenorphine increased from a sixth (16.3%) in January 2013 to almost half (47.5%) of all estimated OAT clients in December 2022. Given the estimated number of clients receiving methadone over the study period decreased only slightly, this finding aligns with previous reports that buprenorphine is increasingly the medicine most OAT clients initiate on in NSW[40].

The trends seen in this report largely align with the annual summaries from the NOPSAD collection, however the client estimates in this report are somewhat lower than those reported in NOPSAD[23]. At the beginning of the study period, the estimated number of OAT clients in NSW in this report was 18% lower than the figure quoted by NOPSAD (June 2013: 15,663 clients vs 19,197 clients in NOPSAD) and by the end of the study period this difference had halved to 9% lower (June 2022: 22,468 clients vs 24,783 clients in NOPSAD). While both data sources show increasing per-capita OAT use between 2013 and 2022, the magnitude of the increase was higher in this report than NOPSAD. From 2013 to 2022, data indicate per capita OAT use in NSW increased by +31% in this report (from 21 to 28 OAT clients per 10,000 population) and by +15% (from 26 to 30 OAT clients per 10,000 population) according to the NOPSAD collection[23]. These differences may be explained by differences in the methods used for client ascertainment and changes in the patterns of OAT retention during the study period[40]. NOPSAD collects data on clients receiving OAT on specific day/s per year, whereas the client estimates in this report are based on a conversion of packs sold into clients treated over a month, with the assumption that clients are retained in OAT over the full 28-day interval. As some attrition from OAT is expected, this report may underestimate the total number of clients accessing OAT over the month, however, if OAT retention rates have improved over time[40] the potential for this source of underestimation would have diminished over the study time period.

In conclusion, the findings in this report suggest that in NSW, changes in service organisation and delivery during COVID, as well as the introduction of LAI buprenorphine, improved access to OAT for people with opioid dependence, especially in settings other than community pharmacy and

remote areas. It is yet to be determined if the increased utilisation is associated with net benefits or harms for people with opioid dependence.

6. Appendices

6.1. Mapping to postcodes

Data on sales to community pharmacy and hospitals were provided in 'bricks', which are geographic boundaries developed by IQVIA containing clusters of pharmacies, for medicine sales and distribution purposes across Australia. Data on sales to all other settings were provided at the Primary Health Network (PHN) level. Sales bricks and PHNs were mapped to postcodes.

6.2. Appendix Tables

Table A1. Estimated number and proportion of OAT clients per month (NSW, 2013-2022)

Time period	LAI Buprenorphine		Methadone		SL Buprenorphine		Total	
	n	Row %	n	Row %	n	Row %	N	Row %
2013								
January			13115	83.7	2545	16.3	15660	100
February			12466	82.0	2572	18.0	15037	100
March			12452	82.1	2618	17.9	15070	100
April			12359	81.7	2731	18.3	15090	100
May			12855	80.8	2915	19.2	15770	100
June			12723	81.2	2940	18.8	15663	100
July			12990	81.0	3048	19.0	16038	100
August			12819	80.3	3042	19.7	15861	100
September			13150	80.8	3145	19.2	16294	100
October			13137	79.3	3263	20.7	16400	100
November			13036	79.2	3308	20.8	16345	100
December			13326	78.0	3586	22.0	16912	100
2014								
January			13075	79.2	3523	20.8	16598	100
February			12774	78.8	3469	21.2	16243	100
March			12445	78.2	3357	21.8	15802	100
April			12549	78.3	3452	21.7	16001	100
May			12945	77.4	3655	22.6	16600	100
June			12853	78.1	3639	21.9	16492	100
July			12998	78.2	3684	21.8	16682	100
August			12860	78.2	3592	21.8	16451	100

Time period	LAI Buprenorphine		Methadone		SL Buprenorphine		Total	
	n	Row %	n	Row %	n	Row %	N	Row %
September			13039	77.2	3708	22.8	16747	100
October			12814	77.5	3694	22.5	16509	100
November			12714	77.5	3715	22.5	16429	100
December			13126	77.3	3827	22.7	16953	100
2015								
January			12812	78.1	3695	21.9	16507	100
February			12683	77.4	3661	22.6	16344	100
March			12438	77.8	3552	22.2	15991	100
April			12427	76.5	3654	23.5	16081	100
May			12576	76.8	3740	23.2	16316	100
June			12478	77.2	3758	22.8	16235	100
July			12654	75.7	3869	24.3	16523	100
August			12828	77.0	3908	23.0	16736	100
September			12717	76.0	3965	24.0	16682	100
October			12641	75.9	3929	24.1	16571	100
November			12501	75.6	3987	24.4	16488	100
December			12822	75.7	4110	24.3	16932	100
2016								
January			12454	76.1	3979	23.9	16433	100
February			12518	75.9	3977	24.1	16495	100
March			12241	75.8	3881	24.2	16121	100
April			12523	76.4	3947	23.6	16471	100
May			12801	76.1	4018	23.9	16819	100
June			12516	74.9	3992	25.1	16508	100
July			12572	75.5	4073	24.5	16645	100
August			12551	75.1	4142	24.9	16694	100
September			12706	74.9	4198	25.1	16904	100
October			12744	74.4	4292	25.6	17036	100
November			12629	74.9	4271	25.1	16900	100
December			12730	73.6	4407	26.4	17137	100
2017								
January			12700	74.7	4374	25.3	17074	100
February			12272	74.1	4286	25.9	16558	100
March			12097	73.2	4258	26.8	16354	100

Time period	LAI Buprenorphine		Methadone		SL Buprenorphine		Total	
	n	Row %	n	Row %	n	Row %	N	Row %
April			12012	73.4	4324	26.6	16336	100
May			12582	73.1	4600	26.9	17182	100
June			12583	73.2	4595	26.8	17177	100
July			12695	72.8	4682	27.2	17377	100
August			12758	73.1	4710	26.9	17468	100
September			12653	72.3	4743	27.7	17396	100
October			12771	72.0	4846	28.0	17617	100
November			12645	72.5	4848	27.5	17493	100
December			12841	71.9	4957	28.1	17798	100
2018								
January			12964	71.8	5024	28.2	17988	100
February			12505	72.0	4888	28.0	17393	100
March			12571	71.2	4973	28.8	17544	100
April			12255	70.1	4983	29.9	17239	100
May			12724	70.8	5265	29.2	17989	100
June			12354	70.0	5207	30.0	17562	100
July			12612	70.9	5247	29.1	17859	100
August			12576	69.8	5323	30.2	17899	100
September			12504	69.4	5348	30.6	17852	100
October			12605	69.4	5525	30.6	18130	100
November			12350	68.6	5515	31.4	17865	100
December			12712	69.2	5690	30.8	18402	100
2019								
January			12606	69.6	5623	30.4	18230	100
February			12218	68.3	5474	31.7	17691	100
March			12019	69.3	5372	30.7	17391	100
April			11962	67.6	5525	32.4	17486	100
May			12612	67.0	5945	33.0	18557	100
June			12434	69.2	5877	30.8	18311	100
July			12550	68.5	5858	31.5	18409	100
August			12302	67.6	5679	32.4	17981	100
September	370	2.0	12514	66.2	5919	31.8	18556*	100
October	282	1.0	12476	67.5	5922	31.4	18586*	100
November	310	2.1	12319	66.1	5861	31.9	18490	100

Time period	LAI Buprenorphine		Methadone		SL Buprenorphine		Total	
	n	Row %	n	Row %	n	Row %	N	Row %
December	393	3.0	12733	66.3	5984	30.7	19111	100
2020								
January	530	3.3	12443	65.3	5910	31.4	18883	100
February	591	3.3	12179	65.2	5787	31.5	18558	100
March	1370	11.6	12822	60.5	6081	28.0	20273	100
April	1843	10.8	12772	63.1	5792	26.1	20408	100
May	2308	10.4	12987	62.5	5697	27.0	20991	100
June	2029	10.6	12066	63.8	5002	25.5	19097	100
July	2153	11.4	12506	62.6	5197	26.1	19856	100
August	2490	14.4	12792	60.9	5215	24.8	20498	100
September	2733	13.6	12867	61.7	5252	24.7	20852	100
October	2949	14.5	12719	60.8	5147	24.7	20815	100
November	3177	17.1	12764	59.4	5119	23.5	21060	100
December	3493	16.1	13147	59.8	5287	24.1	21928	100
2021								
January	3602	16.9	12893	59.9	5105	23.2	21601	100
February	3652	19.2	12477	57.7	4958	23.1	21087	100
March	3721	16.9	12589	61.0	4800	22.1	21110	100
April	3921	19.3	12591	58.2	4798	22.5	21310	100
May	3947	18.8	12785	58.1	4864	23.1	21596	100
June	4100	20.1	12258	57.8	4757	22.1	21115	100
July	4297	20.8	12394	56.4	4887	22.8	21578	100
August	4661	21.1	12885	57.1	5008	21.8	22554	100
September	4866	22.4	12805	55.6	5041	22.0	22712	100
October	4827	21.1	12623	56.1	4978	22.8	22429	100
November	5062	24.5	12355	54.7	4868	20.8	22285	100
December	5100	21.5	12743	56.9	4947	21.6	22790	100
2022								
January	5406	24.3	12862	55.1	4856	20.6	23124	100
February	5017	23.0	12278	55.7	4642	21.2	21937	100
March	5215	24.3	12037	54.8	4562	21.0	21814	100
April	5059	22.7	11991	55.8	4595	21.5	21646	100
May	5653	26.9	12457	52.6	4813	20.6	22923	100
June	5586	24.9	12217	54.9	4665	20.2	22468	100

Time period	LAI Buprenorphine		Methadone		SL Buprenorphine		Total	
	n	Row %	n	Row %	n	Row %	N	Row %
July	5583	23.4	12030	54.9	4636	21.8	22249	100
August	5411	24.7	12163	54.4	4660	20.9	22234	100
September	5302	24.1	11991	54.1	4728	21.8	22022	100
October	5547	25.7	12082	53.7	4720	20.7	22349	100
November	5497	25.0	11872	53.6	4697	21.4	22066	100
December	5774	26.2	11999	52.5	4763	21.3	22535	100

LAI: Long acting injectable, SL: Sublingual

* Due to the calculation of 3 month moving averages the sum of the number of clients on individual OAT medicines does not tally up to the total number of clients on OAT for the first two months since launch of LAI buprenorphine (i.e., September and October 2019)

Table A2. Estimated number of LAI buprenorphine clients per month (NSW, 2019-2022)

Time period	LAI Buprenorphine group*					Total
	Monthly LAIB - high	Monthly LAIB - medium	Monthly LAIB - low	Weekly LAIB - high	Weekly LAIB - low	
	n	n	n	n	n	n
2019						
September		210	70	47	43	370
October		152	56	44	30	282
November		155	71	49	35	310
December		200	87	61	45	393
2020						
January		270	123	78	58	529
February		321	119	90	61	591
March	<10	773	303	152	140	1375
April	<10	1101	351	218	169	1846
May	11	1422	425	247	202	2308
June	22	1295	350	211	151	2029
July	30	1409	384	175	155	2153
August	47	1695	411	178	160	2490
September	60	1873	451	172	177	2733
October	74	1986	554	160	176	2949
November	70	2056	708	151	192	3177
December	62	2282	802	160	186	3493
2021						

Time period	LAI Buprenorphine group*					Total
	Monthly LAIB - high	Monthly LAIB - medium	Monthly LAIB - low	Weekly LAIB - high	Weekly LAIB - low	
	n	n	n	n	n	n
January	65	2401	798	158	180	3602
February	69	2440	817	149	177	3652
March	84	2450	853	148	186	3721
April	86	2566	924	143	202	3921
May	101	2598	923	133	191	3947
June	105	2717	958	134	185	4100
July	108	2811	1023	158	198	4297
August	104	3062	1090	191	214	4661
September	115	3205	1158	182	206	4866
October	114	3198	1162	166	187	4827
November	138	3356	1241	144	183	5062
December	105	3425	1225	144	201	5100
2022						
January	96	3669	1312	130	200	5406
February	70	3409	1241	121	176	5017
March	108	3474	1337	127	169	5215
April	123	3356	1251	139	190	5059
May	295	3675	1330	153	201	5653
June	435	3574	1250	135	192	5586
July	581	3497	1203	132	170	5583
August	585	3341	1154	137	193	5411
September	604	3213	1114	153	218	5302
October	671	3318	1151	169	238	5547
November	710	3227	1150	167	243	5497
December	802	3356	1203	177	236	5774

* LAIB groups are defined in Table 1

Table A3. Estimated OAT clients per month by remoteness (NSW, 2013-2022)

Time period	Major Cities		Inner Regional		Outer Regional		Remote		Very Remote		Grand Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
2013											
January	11193	71.5	3482	22.2	925	5.9	17	0.1	44	0.3	15660
February	10868	72.3	3271	21.8	848	5.6	15	0.1	36	0.2	15037
March	10901	72.3	3256	21.6	863	5.7	15	0.1	36	0.2	15070
April	10926	72.4	3276	21.7	839	5.6	14	0.1	35	0.2	15090
May	11367	72.1	3436	21.8	912	5.8	15	0.1	40	0.3	15770
June	11280	72.0	3446	22.0	882	5.6	15	0.1	40	0.3	15663
July	11501	71.7	3537	22.1	945	5.9	16	0.1	39	0.2	16038
August	11342	71.5	3556	22.4	910	5.7	16	0.1	36	0.2	15861
September	11581	71.1	3711	22.8	951	5.8	17	0.1	35	0.2	16294
October	11642	71.0	3768	23.0	940	5.7	16	0.1	34	0.2	16400
November	11644	71.2	3712	22.7	940	5.8	15	0.1	34	0.2	16345
December	12041	71.2	3856	22.8	960	5.7	18	0.1	37	0.2	16912
2014											
January	11876	71.6	3733	22.5	936	5.6	17	0.1	36	0.2	16598
February	11568	71.2	3687	22.7	934	5.7	18	0.1	36	0.2	16243
March	11256	71.2	3572	22.6	922	5.8	16	0.1	37	0.2	15802
April	11316	70.7	3680	23.0	949	5.9	18	0.1	38	0.2	16001
May	11761	70.8	3830	23.1	951	5.7	18	0.1	40	0.2	16600
June	11642	70.6	3846	23.3	948	5.7	19	0.1	38	0.2	16492
July	11857	71.1	3825	22.9	940	5.6	19	0.1	40	0.2	16682
August	11632	70.7	3819	23.2	943	5.7	18	0.1	39	0.2	16451
September	11862	70.8	3868	23.1	959	5.7	19	0.1	40	0.2	16747
October	11671	70.7	3841	23.3	935	5.7	19	0.1	42	0.3	16509
November	11640	70.9	3799	23.1	926	5.6	20	0.1	43	0.3	16429
December	12060	71.1	3868	22.8	955	5.6	20	0.1	50	0.3	16953
2015											
January	11713	71.0	3795	23.0	931	5.6	19	0.1	49	0.3	16507
February	11600	71.0	3727	22.8	948	5.8	20	0.1	49	0.3	16344
March	11287	70.6	3695	23.1	941	5.9	19	0.1	48	0.3	15991
April	11327	70.4	3716	23.1	968	6.0	19	0.1	51	0.3	16081
May	11509	70.5	3769	23.1	966	5.9	19	0.1	53	0.3	16316
June	11500	70.8	3716	22.9	947	5.8	20	0.1	52	0.3	16235
July	11723	71.0	3751	22.7	970	5.9	23	0.1	55	0.3	16523

Time period	Major Cities		Inner Regional		Outer Regional		Remote		Very Remote		Grand Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
August	11824	70.7	3824	22.8	1004	6.0	26	0.2	58	0.3	16736
September	11747	70.4	3832	23.0	1014	6.1	28	0.2	62	0.4	16682
October	11671	70.4	3814	23.0	996	6.0	28	0.2	62	0.4	16571
November	11634	70.6	3767	22.8	999	6.1	27	0.2	60	0.4	16488
December	11932	70.5	3878	22.9	1030	6.1	32	0.2	59	0.4	16932
2016											
January	11551	70.3	3783	23.0	1020	6.2	28	0.2	51	0.3	16433
February	11561	70.1	3853	23.4	1000	6.1	31	0.2	50	0.3	16495
March	11298	70.1	3749	23.3	998	6.2	27	0.2	49	0.3	16121
April	11550	70.1	3825	23.2	1015	6.2	31	0.2	51	0.3	16471
May	11799	70.2	3862	23.0	1072	6.4	34	0.2	52	0.3	16819
June	11570	70.1	3817	23.1	1039	6.3	34	0.2	48	0.3	16508
July	11660	70.0	3848	23.1	1049	6.3	36	0.2	53	0.3	16645
August	11686	70.0	3882	23.3	1037	6.2	36	0.2	54	0.3	16694
September	11842	70.1	3915	23.2	1056	6.2	36	0.2	54	0.3	16904
October	11921	70.0	3957	23.2	1071	6.3	35	0.2	53	0.3	17036
November	11791	69.8	3974	23.5	1051	6.2	33	0.2	51	0.3	16900
December	11982	69.9	3991	23.3	1079	6.3	32	0.2	53	0.3	17137
2017											
January	11918	69.8	4003	23.4	1065	6.2	36	0.2	53	0.3	17074
February	11570	69.9	3850	23.3	1048	6.3	34	0.2	55	0.3	16558
March	11398	69.7	3837	23.5	1030	6.3	35	0.2	55	0.3	16354
April	11312	69.2	3880	23.7	1054	6.5	34	0.2	56	0.3	16336
May	11909	69.3	4065	23.7	1114	6.5	36	0.2	58	0.3	17182
June	11883	69.2	4104	23.9	1096	6.4	36	0.2	58	0.3	17177
July	12125	69.8	4056	23.3	1101	6.3	36	0.2	59	0.3	17377
August	12144	69.5	4118	23.6	1109	6.4	38	0.2	58	0.3	17468
September	12175	70.0	4017	23.1	1108	6.4	38	0.2	58	0.3	17396
October	12235	69.4	4140	23.5	1138	6.5	43	0.2	61	0.3	17617
November	12181	69.6	4090	23.4	1119	6.4	43	0.2	60	0.3	17493
December	12238	68.8	4294	24.1	1158	6.5	48	0.3	60	0.3	17798
2018											213722
January	12446	69.2	4293	23.9	1146	6.4	46	0.3	57	0.3	17988
February	12001	69.0	4150	23.9	1140	6.6	45	0.3	57	0.3	17393
March	12198	69.5	4104	23.4	1140	6.5	44	0.3	58	0.3	17544
April	11957	69.4	4048	23.5	1129	6.6	47	0.3	56	0.3	17239

Time period	Major Cities		Inner Regional		Outer Regional		Remote		Very Remote		Grand Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
May	12499	69.5	4223	23.5	1158	6.4	49	0.3	61	0.3	17989
June	12219	69.6	4097	23.3	1142	6.5	45	0.3	58	0.3	17562
July	12424	69.6	4152	23.3	1175	6.6	47	0.3	60	0.3	17859
August	12446	69.5	4163	23.3	1181	6.6	50	0.3	59	0.3	17899
September	12374	69.3	4181	23.4	1181	6.6	54	0.3	62	0.3	17852
October	12524	69.1	4262	23.5	1224	6.8	55	0.3	65	0.4	18130
November	12354	69.2	4180	23.4	1211	6.8	56	0.3	65	0.4	17865
December	12689	69.0	4314	23.4	1272	6.9	58	0.3	68	0.4	18402
2019											
January	12564	68.9	4293	23.5	1250	6.9	56	0.3	67	0.4	18230
February	12148	68.7	4213	23.8	1213	6.9	52	0.3	65	0.4	17691
March	11978	68.9	4123	23.7	1175	6.8	50	0.3	65	0.4	17391
April	12076	69.1	4112	23.5	1181	6.8	55	0.3	62	0.4	17486
May	12853	69.3	4328	23.3	1251	6.7	57	0.3	69	0.4	18557
June	12695	69.3	4267	23.3	1229	6.7	55	0.3	65	0.4	18311
July	12837	69.7	4222	22.9	1228	6.7	52	0.3	69	0.4	18409
August	12561	69.9	4087	22.7	1214	6.7	54	0.3	66	0.4	17981
September	12969	69.9	4206	22.7	1253	6.8	55	0.3	72	0.4	18556
October	12927	69.6	4287	23.1	1243	6.7	59	0.3	69	0.4	18586
November	12932	69.9	4197	22.7	1234	6.7	58	0.3	68	0.4	18490
December	13284	69.5	4394	23.0	1299	6.8	66	0.3	69	0.4	19111
2020											243217
January	13198	69.9	4269	22.6	1287	6.8	63	0.3	66	0.3	18883
February	12834	69.2	4317	23.3	1276	6.9	65	0.4	65	0.4	18558
March	13979	69.0	4710	23.2	1438	7.1	70	0.3	75	0.4	20273
April	14093	69.1	4736	23.2	1419	7.0	77	0.4	82	0.4	20408
May	14591	69.5	4807	22.9	1430	6.8	78	0.4	84	0.4	20991
June	13376	70.0	4294	22.5	1276	6.7	73	0.4	77	0.4	19097
July	13868	69.8	4451	22.4	1384	7.0	75	0.4	78	0.4	19856
August	14234	69.4	4607	22.5	1491	7.3	82	0.4	83	0.4	20498
September	14539	69.7	4618	22.1	1526	7.3	86	0.4	82	0.4	20852
October	14501	69.7	4600	22.1	1547	7.4	87	0.4	80	0.4	20815
November	14668	69.6	4654	22.1	1568	7.4	95	0.4	75	0.4	21060
December	15299	69.8	4855	22.1	1608	7.3	91	0.4	75	0.3	21928
2021											
January	15012	69.5	4853	22.5	1565	7.2	95	0.4	76	0.4	21601

Time period	Major Cities		Inner Regional		Outer Regional		Remote		Very Remote		Grand Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
February	14708	69.7	4658	22.1	1558	7.4	90	0.4	73	0.3	21087
March	14685	69.6	4703	22.3	1548	7.3	99	0.5	75	0.4	21110
April	14860	69.7	4667	21.9	1604	7.5	105	0.5	74	0.3	21310
May	15035	69.6	4786	22.2	1591	7.4	102	0.5	82	0.4	21596
June	14752	69.9	4558	21.6	1621	7.7	108	0.5	77	0.4	21115
July	15090	69.9	4668	21.6	1632	7.6	109	0.5	79	0.4	21578
August	15748	69.8	4888	21.7	1721	7.6	121	0.5	77	0.3	22554
September	15811	69.6	4992	22.0	1710	7.5	118	0.5	81	0.4	22712
October	15605	69.6	4910	21.9	1719	7.7	115	0.5	80	0.4	22429
November	15479	69.5	4852	21.8	1751	7.9	121	0.5	83	0.4	22285
December	15800	69.3	4975	21.8	1815	8.0	119	0.5	81	0.4	22790
2022											
January	15936	68.9	5172	22.4	1805	7.8	125	0.5	85	0.4	23124
February	15183	69.2	4894	22.3	1667	7.6	111	0.5	82	0.4	21937
March	15009	68.8	4946	22.7	1662	7.6	115	0.5	82	0.4	21814
April	15047	69.5	4750	21.9	1659	7.7	107	0.5	82	0.4	21646
May	15971	69.7	5014	21.9	1735	7.6	118	0.5	85	0.4	22923
June	15714	69.9	4854	21.6	1689	7.5	117	0.5	94	0.4	22468
July	15549	69.9	4847	21.8	1651	7.4	115	0.5	87	0.4	22249
August	15482	69.6	4859	21.9	1699	7.6	110	0.5	84	0.4	22234
September	15436	70.1	4765	21.6	1643	7.5	104	0.5	74	0.3	22022
October	15638	70.0	4849	21.7	1676	7.5	108	0.5	77	0.3	22349
November	15364	69.6	4865	22.0	1655	7.5	106	0.5	77	0.3	22066
December	15647	69.4	4983	22.1	1717	7.6	110	0.5	79	0.3	22535

Table A4. Estimated OAT clients per month by IRSAD quintile (NSW, 2013-2022)

Time period	1 (most disadvantaged)		2		3		4		5 (most advantaged)		Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
2013											
January	3175	20.3	3194	20.4	2950	18.8	2581	16.5	3760	24.0	15660
February	2995	19.9	3019	20.1	2885	19.2	2460	16.4	3679	24.5	15037
March	3011	20.0	3024	20.1	2832	18.8	2513	16.7	3690	24.5	15070
April	2950	19.6	3044	20.2	2849	18.9	2496	16.5	3751	24.9	15090
May	3111	19.7	3183	20.2	2914	18.5	2649	16.8	3913	24.8	15770
June	3077	19.6	3153	20.1	2935	18.7	2585	16.5	3913	25.0	15663
July	3186	19.9	3224	20.1	2953	18.4	2698	16.8	3977	24.8	16038
August	3138	19.8	3255	20.5	2937	18.5	2614	16.5	3917	24.7	15861
September	3239	19.9	3370	20.7	3011	18.5	2690	16.5	3984	24.5	16294
October	3275	20.0	3352	20.4	3081	18.8	2695	16.4	3996	24.4	16400
November	3263	20.0	3331	20.4	3042	18.6	2698	16.5	4012	24.5	16345
December	3322	19.6	3433	20.3	3149	18.6	2830	16.7	4178	24.7	16912
2014											
January	3283	19.8	3377	20.3	3082	18.6	2761	16.6	4095	24.7	16598
February	3227	19.9	3279	20.2	3019	18.6	2735	16.8	3982	24.5	16243
March	3207	20.3	3175	20.1	2912	18.4	2627	16.6	3881	24.6	15802
April	3196	20.0	3195	20.0	2959	18.5	2669	16.7	3982	24.9	16001
May	3298	19.9	3340	20.1	3059	18.4	2756	16.6	4148	25.0	16600
June	3256	19.7	3315	20.1	3070	18.6	2719	16.5	4132	25.1	16492
July	3260	19.5	3372	20.2	3109	18.6	2758	16.5	4184	25.1	16682
August	3195	19.4	3315	20.1	3127	19.0	2711	16.5	4104	24.9	16451
September	3211	19.2	3425	20.5	3161	18.9	2794	16.7	4156	24.8	16747
October	3236	19.6	3387	20.5	3059	18.5	2697	16.3	4128	25.0	16509
November	3299	20.1	3372	20.5	2952	18.0	2656	16.2	4150	25.3	16429
December	3401	20.1	3427	20.2	3025	17.8	2766	16.3	4333	25.6	16953
2015											
January	3326	20.1	3359	20.3	2931	17.8	2728	16.5	4163	25.2	16507
February	3289	20.1	3317	20.3	2918	17.9	2700	16.5	4120	25.2	16344
March	3308	20.7	3281	20.5	2819	17.6	2597	16.2	3986	24.9	15991
April	3295	20.5	3303	20.5	2846	17.7	2598	16.2	4038	25.1	16081
May	3335	20.4	3388	20.8	2869	17.6	2632	16.1	4092	25.1	16316
June	3302	20.3	3354	20.7	2901	17.9	2588	15.9	4090	25.2	16235

Time period	1 (most disadvantaged)		2		3		4		5 (most advantaged)		Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
July	3390	20.5	3434	20.8	2907	17.6	2639	16.0	4154	25.1	16523
August	3441	20.6	3451	20.6	2967	17.7	2674	16.0	4202	25.1	16736
September	3438	20.6	3449	20.7	2918	17.5	2695	16.2	4182	25.1	16682
October	3433	20.7	3392	20.5	2896	17.5	2647	16.0	4203	25.4	16571
November	3395	20.6	3411	20.7	2863	17.4	2637	16.0	4182	25.4	16488
December	3469	20.5	3485	20.6	2963	17.5	2669	15.8	4346	25.7	16932
2016											
January	3404	20.7	3372	20.5	2924	17.8	2572	15.7	4160	25.3	16433
February	3418	20.7	3383	20.5	2928	17.8	2574	15.6	4192	25.4	16495
March	3356	20.8	3368	20.9	2821	17.5	2490	15.4	4087	25.3	16121
April	3407	20.7	3484	21.2	2870	17.4	2557	15.5	4152	25.2	16471
May	3495	20.8	3440	20.5	2989	17.8	2611	15.5	4284	25.5	16819
June	3387	20.5	3435	20.8	2970	18.0	2569	15.6	4148	25.1	16508
July	3409	20.5	3417	20.5	2971	17.8	2610	15.7	4238	25.5	16645
August	3407	20.4	3520	21.1	2924	17.5	2627	15.7	4215	25.3	16694
September	3492	20.7	3495	20.7	2931	17.3	2674	15.8	4311	25.5	16904
October	3486	20.5	3600	21.1	2948	17.3	2687	15.8	4315	25.3	17036
November	3446	20.4	3584	21.2	2972	17.6	2650	15.7	4249	25.1	16900
December	3501	20.4	3616	21.1	3006	17.5	2708	15.8	4306	25.1	17137
2017											
January	3510	20.6	3525	20.6	3003	17.6	2735	16.0	4302	25.2	17074
February	3410	20.6	3406	20.6	2875	17.4	2661	16.1	4206	25.4	16558
March	3390	20.7	3349	20.5	2882	17.6	2605	15.9	4130	25.3	16354
April	3466	21.2	3388	20.7	2876	17.6	2569	15.7	4037	24.7	16336
May	3643	21.2	3562	20.7	3035	17.7	2721	15.8	4222	24.6	17182
June	3616	21.1	3621	21.1	2988	17.4	2728	15.9	4224	24.6	17177
July	3582	20.6	3611	20.8	2992	17.2	2789	16.0	4403	25.3	17377
August	3635	20.8	3637	20.8	3030	17.3	2792	16.0	4375	25.0	17468
September	3637	20.9	3598	20.7	2998	17.2	2767	15.9	4395	25.3	17396
October	3660	20.8	3667	20.8	3105	17.6	2788	15.8	4397	25.0	17617
November	3604	20.6	3652	20.9	3046	17.4	2752	15.7	4439	25.4	17493
December	3670	20.6	3696	20.8	3176	17.8	2820	15.8	4436	24.9	17798
2018											
January	3693	20.5	3798	21.1	3181	17.7	2807	15.6	4510	25.1	17988
February	3602	20.7	3661	21.0	3107	17.9	2702	15.5	4321	24.8	17393

Time period	1 (most disadvantaged)		2		3		4		5 (most advantaged)		Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
March	3584	20.4	3719	21.2	3066	17.5	2728	15.5	4446	25.3	17544
April	3576	20.7	3627	21.0	3078	17.9	2660	15.4	4298	24.9	17239
May	3700	20.6	3792	21.1	3147	17.5	2813	15.6	4538	25.2	17989
June	3639	20.7	3703	21.1	3113	17.7	2696	15.4	4410	25.1	17562
July	3675	20.6	3793	21.2	3105	17.4	2795	15.6	4492	25.2	17859
August	3688	20.6	3806	21.3	3169	17.7	2796	15.6	4440	24.8	17899
September	3684	20.6	3823	21.4	3131	17.5	2809	15.7	4405	24.7	17852
October	3755	20.7	3850	21.2	3182	17.6	2873	15.8	4470	24.7	18130
November	3691	20.7	3805	21.3	3139	17.6	2790	15.6	4439	24.8	17865
December	3836	20.8	3915	21.3	3228	17.5	2901	15.8	4522	24.6	18402
2019											
January	3799	20.8	3876	21.3	3220	17.7	2840	15.6	4495	24.7	18230
February	3683	20.8	3771	21.3	3108	17.6	2794	15.8	4335	24.5	17691
March	3609	20.8	3721	21.4	3108	17.9	2689	15.5	4264	24.5	17391
April	3639	20.8	3705	21.2	3129	17.9	2707	15.5	4307	24.6	17486
May	3898	21.0	3882	20.9	3331	18.0	2856	15.4	4589	24.7	18557
June	3853	21.0	3825	20.9	3263	17.8	2842	15.5	4528	24.7	18311
July	3828	20.8	3887	21.1	3288	17.9	2858	15.5	4548	24.7	18409
August	3718	20.7	3791	21.1	3251	18.1	2817	15.7	4404	24.5	17981
September	3839	20.7	3876	20.9	3330	17.9	2938	15.8	4573	24.6	18556
October	3842	20.7	3842	20.7	3373	18.1	2964	15.9	4564	24.6	18586
November	3859	20.9	3842	20.8	3328	18.0	2905	15.7	4555	24.6	18490
December	3962	20.7	3916	20.5	3544	18.5	3028	15.8	4660	24.4	19111
2020											
January	3960	21.0	3912	20.7	3458	18.3	2927	15.5	4625	24.5	18883
February	3894	21.0	3818	20.6	3380	18.2	2935	15.8	4531	24.4	18558
March	4183	20.6	4256	21.0	3583	17.7	3153	15.6	5098	25.1	20273
April	4172	20.4	4258	20.9	3577	17.5	3280	16.1	5121	25.1	20408
May	4295	20.5	4372	20.8	3625	17.3	3409	16.2	5291	25.2	20991
June	3938	20.6	3963	20.8	3286	17.2	3157	16.5	4752	24.9	19097
July	4099	20.6	4104	20.7	3403	17.1	3249	16.4	5001	25.2	19856
August	4158	20.3	4289	20.9	3542	17.3	3331	16.3	5177	25.3	20498
September	4277	20.5	4294	20.6	3625	17.4	3404	16.3	5251	25.2	20852
October	4251	20.4	4294	20.6	3634	17.5	3403	16.3	5233	25.1	20815
November	4286	20.3	4355	20.7	3656	17.4	3453	16.4	5310	25.2	21060

Time period	1 (most disadvantaged)		2		3		4		5 (most advantaged)		Total
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %	n
December	4398	20.1	4534	20.7	3756	17.1	3621	16.5	5620	25.6	21928
2021											
January	4340	20.1	4496	20.8	3725	17.2	3560	16.5	5478	25.4	21601
February	4196	19.9	4341	20.6	3689	17.5	3466	16.4	5395	25.6	21087
March	4223	20.0	4337	20.5	3691	17.5	3448	16.3	5410	25.6	21110
April	4223	19.8	4398	20.6	3706	17.4	3501	16.4	5482	25.7	21310
May	4310	20.0	4483	20.8	3715	17.2	3537	16.4	5551	25.7	21596
June	4157	19.7	4417	20.9	3648	17.3	3485	16.5	5409	25.6	21115
July	4274	19.8	4447	20.6	3665	17.0	3565	16.5	5628	26.1	21578
August	4489	19.9	4615	20.5	3815	16.9	3746	16.6	5890	26.1	22554
September	4494	19.8	4647	20.5	3832	16.9	3729	16.4	6010	26.5	22712
October	4426	19.7	4608	20.5	3835	17.1	3669	16.4	5891	26.3	22429
November	4428	19.9	4612	20.7	3802	17.1	3618	16.2	5825	26.1	22285
December	4565	20.0	4629	20.3	3932	17.3	3716	16.3	5948	26.1	22790
2022											
January	4642	20.1	4713	20.4	3985	17.2	3757	16.2	6026	26.1	23124
February	4368	19.9	4439	20.2	3846	17.5	3526	16.1	5758	26.2	21937
March	4363	20.0	4471	20.5	3784	17.3	3529	16.2	5667	26.0	21814
April	4365	20.2	4398	20.3	3741	17.3	3486	16.1	5655	26.1	21646
May	4561	19.9	4575	20.0	3954	17.2	3742	16.3	6092	26.6	22923
June	4533	20.2	4487	20.0	3916	17.4	3627	16.1	5905	26.3	22468
July	4473	20.1	4465	20.1	3825	17.2	3618	16.3	5868	26.4	22249
August	4474	20.1	4497	20.2	3854	17.3	3645	16.4	5764	25.9	22234
September	4341	19.7	4461	20.3	3797	17.2	3607	16.4	5817	26.4	22022
October	4399	19.7	4509	20.2	3844	17.2	3668	16.4	5929	26.5	22349
November	4379	19.8	4520	20.5	3817	17.3	3556	16.1	5795	26.3	22066
December	4494	19.9	4565	20.3	3913	17.4	3643	16.2	5920	26.3	22535

IRSAD: Index of Relative Socioeconomic Advantage and Disadvantage

*Australia Bureau of Statistics. Census of Population and Housing: Socio-Economic Indexes for Areas (SEIFA), Australia, 2016. ABS: Canberra; 2018.

Table A5. Estimated OAT clients per month by setting (NSW, 2013-2022)

Time period	Community Pharmacy		Hospital		Clinics and Medical Centres		Other (incl. prisons)		Aged and Community Healthcare	
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %
2013										
January	11226	71.7	1949	12.4	2323	14.8	<5		160	1.0
February	10695	71.1	1871	12.4	2308	15.3	8	0.1	156	1.0
March	10802	71.7	1843	12.2	2254	15.0	22	0.1	149	1.0
April	10784	71.5	1825	12.1	2256	15.0	73	0.5	153	1.0
May	11324	71.8	1897	12.0	2302	14.6	106	0.7	141	0.9
June	11151	71.2	1913	12.2	2321	14.8	130	0.8	147	0.9
July	11512	71.8	1881	11.7	2405	15.0	92	0.6	147	0.9
August	11407	71.9	1894	11.9	2356	14.9	57	0.4	147	0.9
September	11839	72.7	1967	12.1	2340	14.4	<5		147	0.9
October	11861	72.3	2049	12.5	2351	14.3			148	0.9
November	11811	72.3	2025	12.4	2317	14.2	27	0.2	164	1.0
December	12139	71.8	2021	11.9	2479	14.7	97	0.6	176	1.0
2014										
January	11998	72.3	1984	12.0	2292	13.8	149	0.9	175	1.1
February	11756	72.4	1924	11.8	2218	13.7	173	1.1	172	1.1
March	11483	72.7	1907	12.1	2096	13.3	155	1.0	162	1.0
April	11568	72.3	1853	11.6	2236	14.0	174	1.1	171	1.1
May	12002	72.3	1936	11.7	2312	13.9	175	1.1	175	1.1
June	12000	72.8	1900	11.5	2235	13.6	179	1.1	178	1.1
July	12093	72.5	2041	12.2	2209	13.2	161	1.0	178	1.1
August	11981	72.8	1994	12.1	2148	13.1	148	0.9	180	1.1
September	12115	72.3	2075	12.4	2183	13.0	171	1.0	204	1.2
October	12067	73.1	2014	12.2	2087	12.6	153	0.9	188	1.1
November	12015	73.1	2011	12.2	2051	12.5	157	1.0	194	1.2
December	12478	73.6	2020	11.9	2114	12.5	149	0.9	192	1.1
2015										
January	12185	73.8	1935	11.7	2033	12.3	155	0.9	198	1.2
February	12082	73.9	1955	12.0	1970	12.1	155	0.9	181	1.1
March	11800	73.8	1956	12.2	1937	12.1	139	0.9	158	1.0
April	11855	73.7	1975	12.3	1947	12.1	149	0.9	155	1.0
May	12021	73.7	1972	12.1	2013	12.3	149	0.9	162	1.0

Time period	Community Pharmacy		Hospital		Clinics and Medical Centres		Other (incl. prisons)		Aged and Community Healthcare	
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %
June	11948	73.6	1972	12.1	1979	12.2	165	1.0	172	1.1
July	12163	73.6	1984	12.0	2016	12.2	184	1.1	177	1.1
August	12335	73.7	2025	12.1	2004	12.0	183	1.1	190	1.1
September	12298	73.7	2016	12.1	1987	11.9	209	1.3	172	1.0
October	12286	74.1	1974	11.9	1965	11.9	181	1.1	165	1.0
November	12204	74.0	1940	11.8	1985	12.0	197	1.2	161	1.0
December	12531	74.0	1996	11.8	2050	12.1	188	1.1	167	1.0
2016										
January	12165	74.0	1938	11.8	1969	12.0	188	1.1	173	1.1
February	12209	74.0	1961	11.9	1951	11.8	191	1.2	183	1.1
March	11980	74.3	1868	11.6	1921	11.9	161	1.0	192	1.2
April	12214	74.2	1968	11.9	1929	11.7	152	0.9	208	1.3
May	12502	74.3	1957	11.6	2002	11.9	156	0.9	202	1.2
June	12280	74.4	1953	11.8	1900	11.5	175	1.1	200	1.2
July	12372	74.3	1929	11.6	1950	11.7	201	1.2	193	1.2
August	12420	74.4	1927	11.5	1952	11.7	190	1.1	204	1.2
September	12612	74.6	1913	11.3	1956	11.6	208	1.2	215	1.3
October	12679	74.4	1923	11.3	1992	11.7	212	1.2	229	1.3
November	12584	74.5	1946	11.5	1960	11.6	188	1.1	222	1.3
December	12791	74.6	1958	11.4	1966	11.5	190	1.1	231	1.3
2017										
January	12692	74.3	1986	11.6	1978	11.6	201	1.2	218	1.3
February	12291	74.2	1921	11.6	1925	11.6	208	1.3	213	1.3
March	12119	74.1	1888	11.5	1928	11.8	211	1.3	208	1.3
April	12240	74.9	1875	11.5	1842	11.3	182	1.1	197	1.2
May	12835	74.7	1955	11.4	1960	11.4	218	1.3	213	1.2
June	12852	74.8	2016	11.7	1912	11.1	200	1.2	197	1.1
July	12948	74.5	1999	11.5	1987	11.4	234	1.3	209	1.2
August	13112	75.1	1995	11.4	1953	11.2	211	1.2	198	1.1
September	13053	75.0	1921	11.0	2012	11.6	209	1.2	201	1.2
October	13203	74.9	1996	11.3	1988	11.3	213	1.2	218	1.2
November	13046	74.6	2037	11.6	1966	11.2	233	1.3	212	1.2
December	13281	74.6	2081	11.7	1976	11.1	245	1.4	216	1.2

Time period	Community Pharmacy		Hospital		Clinics and Medical Centres		Other (incl. prisons)		Aged and Community Healthcare	
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %
2018										
January	13406	74.5	2080	11.6	2051	11.4	244	1.4	207	1.1
February	13011	74.8	1969	11.3	1969	11.3	235	1.4	209	1.2
March	13115	74.8	1974	11.2	1977	11.3	263	1.5	215	1.2
April	12911	74.9	2009	11.7	1848	10.7	255	1.5	216	1.3
May	13478	74.9	2033	11.3	1990	11.1	268	1.5	220	1.2
June	13200	75.2	1949	11.1	1943	11.1	257	1.5	213	1.2
July	13491	75.5	1904	10.7	1991	11.1	253	1.4	221	1.2
August	13486	75.3	1961	11.0	1973	11.0	248	1.4	231	1.3
September	13405	75.1	2021	11.3	1945	10.9	250	1.4	231	1.3
October	13504	74.5	2116	11.7	2012	11.1	263	1.4	235	1.3
November	13416	75.1	2023	11.3	1941	10.9	262	1.5	223	1.2
December	13849	75.3	2111	11.5	1934	10.5	287	1.6	221	1.2
2019										
January	13935	76.4	1959	10.7	1819	10.0	285	1.6	232	1.3
February	13550	76.6	1923	10.9	1712	9.7	281	1.6	225	1.3
March	13323	76.6	1917	11.0	1637	9.4	282	1.6	233	1.3
April	13340	76.3	1961	11.2	1662	9.5	295	1.7	228	1.3
May	14115	76.1	2119	11.4	1750	9.4	349	1.9	223	1.2
June	13941	76.1	2020	11.0	1773	9.7	352	1.9	226	1.2
July	13990	76.0	2034	11.0	1768	9.6	401	2.2	216	1.2
August	13711	76.3	1887	10.5	1748	9.7	408	2.3	226	1.3
September	13975	75.3	2037	11.0	1811	9.8	487	2.6	246	1.3
October	13938	75.0	2043	11.0	1903	10.2	465	2.5	237	1.3
November	13731	74.3	2158	11.7	1893	10.2	468	2.5	240	1.3
December	14228	74.5	2161	11.3	2045	10.7	432	2.3	245	1.3
2020										
January	13985	74.1	2203	11.7	1949	10.3	485	2.6	261	1.4
February	13775	74.2	2119	11.4	1893	10.2	501	2.7	270	1.5
March	14458	71.3	2491	12.3	2146	10.6	791	3.9	387	1.9
April	14387	70.5	2502	12.3	2213	10.8	953	4.7	354	1.7
May	14715	70.1	2502	11.9	2320	11.0	1145	5.5	310	1.5
June	13818	72.4	2036	10.7	2036	10.7	1023	5.4	185	1.0

Time period	Community Pharmacy		Hospital		Clinics and Medical Centres		Other (incl. prisons)		Aged and Community Healthcare	
	n	Row %	n	Row %	n	Row %	n	Row %	n	Row %
July	14334	72.2	2092	10.5	2157	10.9	1060	5.3	213	1.1
August	14522	70.8	2246	11.0	2297	11.2	1115	5.4	318	1.5
September	14533	69.7	2405	11.5	2365	11.3	1231	5.9	319	1.5
October	14273	68.6	2544	12.2	2425	11.7	1214	5.8	360	1.7
November	14308	67.9	2692	12.8	2410	11.4	1346	6.4	304	1.4
December	14754	67.3	2764	12.6	2576	11.7	1479	6.7	355	1.6
2021										
January	14510	67.2	2745	12.7	2469	11.4	1565	7.2	312	1.4
February	13995	66.4	2658	12.6	2513	11.9	1586	7.5	334	1.6
March	13954	66.1	2716	12.9	2585	12.2	1559	7.4	296	1.4
April	13877	65.1	2779	13.0	2660	12.5	1669	7.8	326	1.5
May	14129	65.4	2857	13.2	2680	12.4	1610	7.5	321	1.5
June	13567	64.3	2846	13.5	2636	12.5	1704	8.1	362	1.7
July	13859	64.2	2826	13.1	2785	12.9	1770	8.2	337	1.6
August	14401	63.9	2915	12.9	2922	13.0	1959	8.7	357	1.6
September	14518	63.9	2961	13.0	2891	12.7	2035	9.0	308	1.4
October	14382	64.1	2939	13.1	2785	12.4	2016	9.0	306	1.4
November	14112	63.3	2977	13.4	2804	12.6	2095	9.4	297	1.3
December	14568	63.9	3075	13.5	2771	12.2	2070	9.1	305	1.3
2022										
January	14616	63.2	3130	13.5	2799	12.1	2215	9.6	365	1.6
February	14025	63.9	2934	13.4	2683	12.2	1959	8.9	335	1.5
March	13659	62.6	2909	13.3	2863	13.1	2030	9.3	353	1.6
April	13578	62.7	2943	13.6	2890	13.4	1912	8.8	322	1.5
May	14063	61.3	3259	14.2	2988	13.0	2256	9.8	357	1.6
June	13840	61.6	3257	14.5	2813	12.5	2210	9.8	349	1.6
July	13794	62.0	3220	14.5	2714	12.2	2212	9.9	309	1.4
August	13943	62.7	3163	14.2	2798	12.6	2009	9.0	321	1.4
September	13818	62.7	3155	14.3	2794	12.7	1945	8.8	311	1.4
October	13804	61.8	3278	14.7	2918	13.1	1978	8.9	371	1.7
November	13518	61.3	3428	15.5	2918	13.2	1844	8.4	358	1.6
December	13739	61.0	3534	15.7	2881	12.8	1971	8.7	410	1.8

Table A6. Estimated OAT clients per month by medicine and setting (NSW, 2013-2022)

Time period	Community Pharmacy			Hospital			Other (incl. prisons)		
	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup
	n	n	n	n	n	n	n	n	n
2013									
January	9744	1482		1549	400			<5	
February	9211	1484		1470	401			8	
March	9278	1524		1434	410			22	
April	9227	1557		1390	434			73	
May	9695	1630		1408	488			106	
June	9531	1620		1434	480			130	
July	9804	1708		1378	503			92	
August	9627	1780		1418	476			57	
September	9923	1916		1476	491			<5	
October	9852	2009		1524	525				
November	9784	2028		1480	545			27	
December	9999	2140		1423	598			97	
2014									
January	9849	2149		1464	520			149	
February	9661	2095		1421	503			173	
March	9434	2048		1430	478			155	
April	9499	2068		1366	488			174	
May	9788	2214		1422	515			175	
June	9772	2229		1400	499			179	
July	9830	2263		1488	553			161	
August	9723	2258		1493	501			148	
September	9804	2311		1537	538			171	
October	9700	2366		1514	501			153	
November	9659	2356		1484	527			157	
December	10035	2443		1476	544			149	
2015									
January	9822	2364		1419	515			155	
February	9724	2359		1435	520			155	
March	9498	2302		1445	511			139	
April	9518	2337		1420	555			149	
May	9615	2405		1421	550			149	

Time period	Community Pharmacy			Hospital			Other (incl. prisons)		
	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup
	n	n	n	n	n	n	n	n	n
June	9521	2427		1444	528			165	
July	9661	2502		1447	536			184	
August	9825	2510		1457	567			183	
September	9776	2522		1407	608			209	
October	9751	2535		1369	606			181	
November	9615	2588		1347	594			197	
December	9825	2705		1417	579			188	
2016									
January	9547	2617		1388	550			188	
February	9586	2624		1424	536			191	
March	9391	2589		1362	506			161	
April	9548	2667		1465	503			152	
May	9775	2727		1457	500			156	
June	9587	2693		1443	510			175	
July	9635	2737		1415	514			201	
August	9637	2783		1396	532			190	
September	9795	2817		1372	541			208	
October	9800	2879		1376	547			212	
November	9702	2882		1401	545			188	
December	9782	3009		1413	545			190	
2017									
January	9721	2971		1442	543		11	197	
February	9394	2897		1372	549		16	197	
March	9264	2856		1344	544		19	192	
April	9318	2923		1301	574		22	161	
May	9745	3091		1349	605		22	196	
June	9716	3136		1410	606		21	179	
July	9778	3170		1398	601		22	213	
August	9846	3266		1421	573		22	188	
September	9777	3277		1335	586		23	186	
October	9815	3388		1394	602		28	185	
November	9674	3372		1411	626		29	204	
December	9832	3449		1451	630		33	212	

Time period	Community Pharmacy			Hospital			Other (incl. prisons)		
	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup
	n	n	n	n	n	n	n	n	n
2018									
January	9913	3494		1441	640		33	211	
February	9592	3418		1360	609		34	201	
March	9631	3484		1359	614		38	225	
April	9447	3464		1328	681		39	217	
May	9796	3682		1367	667		40	228	
June	9520	3680		1318	631		38	219	
July	9721	3770		1331	572		40	213	
August	9695	3791		1324	638		45	203	
September	9623	3782		1347	674		45	205	
October	9637	3867		1406	710		45	218	
November	9528	3889		1330	692		38	224	
December	9842	4008		1397	713		40	247	
2019									
January	9909	4025		1278	681		38	247	
February	9605	3945		1258	665		40	241	
March	9421	3902		1262	656		48	234	
April	9340	4000		1265	696		55	240	
May	9814	4301		1367	752		88	261	
June	9671	4270		1289	731		103	249	
July	9770	4221		1314	719		126	275	
August	9624	4087		1198	689		122	287	
September	9787	4188		1240	735	184	123	336	83
October	9697	4241	<5	1224	724	142	125	312	
November	9550	4178	5	1294	703	161	107	334	
December	9892	4331	5	1259	692	210	104	305	76
2020									
January	9709	4271	6	1285	655	262	84	340	89
February	9527	4242	6	1215	628	276	91	310	100
March	10008	4440	11	1237	647	607	89	308	394
April	10007	4362	18	1170	585	747	95	211	647
May	10273	4420	22	1118	528	857	104	145	896
June	9675	4111	32	989	395	651	113	61	848

Time period	Community Pharmacy			Hospital			Other (incl. prisons)		
	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup	Methadone	SL bup	LAI bup
	n	n	n	n	n	n	n	n	n
July	10016	4283	35	1031	397	663	113	56	891
August	10204	4265	52	1032	428	786	111	42	962
September	10208	4257	68	1102	436	866	100	26	1104
October	10056	4133	84	1082	460	1002	107	20	1088
November	10065	4152	91	1142	442	1108	107	14	1225
December	10386	4273	95	1091	457	1215	115	21	1344
2021									
January	10227	4189	94	1086	418	1242	108	19	1439
February	9881	4020	94	1022	421	1216	99	16	1471
March	9938	3913	104	1102	394	1220	91	8	1460
April	9874	3893	110	1096	373	1309	103	10	1556
May	10043	3954	132	1113	371	1373	110	15	1484
June	9585	3845	136	1069	376	1401	103	18	1583
July	9759	3950	150	1019	394	1413	101	20	1648
August	10154	4084	163	1062	377	1476	90	17	1852
September	10198	4134	185	997	373	1591	95	13	1927
October	10055	4108	219	995	345	1598	80	9	1927
November	9846	4017	249	933	338	1706	84	9	2002
December	10193	4110	265	970	333	1773	87	8	1976
2022									
January	10316	4028	272	963	327	1839	82	8	2125
February	9881	3871	272	895	305	1735	80	5	1874
March	9567	3804	288	923	282	1703	81	5	1944
April	9470	3811	297	934	304	1705	85	5	1823
May	9762	3977	324	1041	322	1897	81	7	2168
June	9636	3865	338	1008	334	1915	71	8	2131
July	9548	3881	365	999	307	1913	73	11	2128
August	9669	3904	370	930	316	1916	75	8	1925
September	9503	3942	373	933	326	1896	81	7	1857
October	9507	3913	383	948	326	2005	77	5	1896
November	9260	3866	392	1008	326	2095	75	7	1763
December	9360	3954	426	1040	319	2175	77	7	1887

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