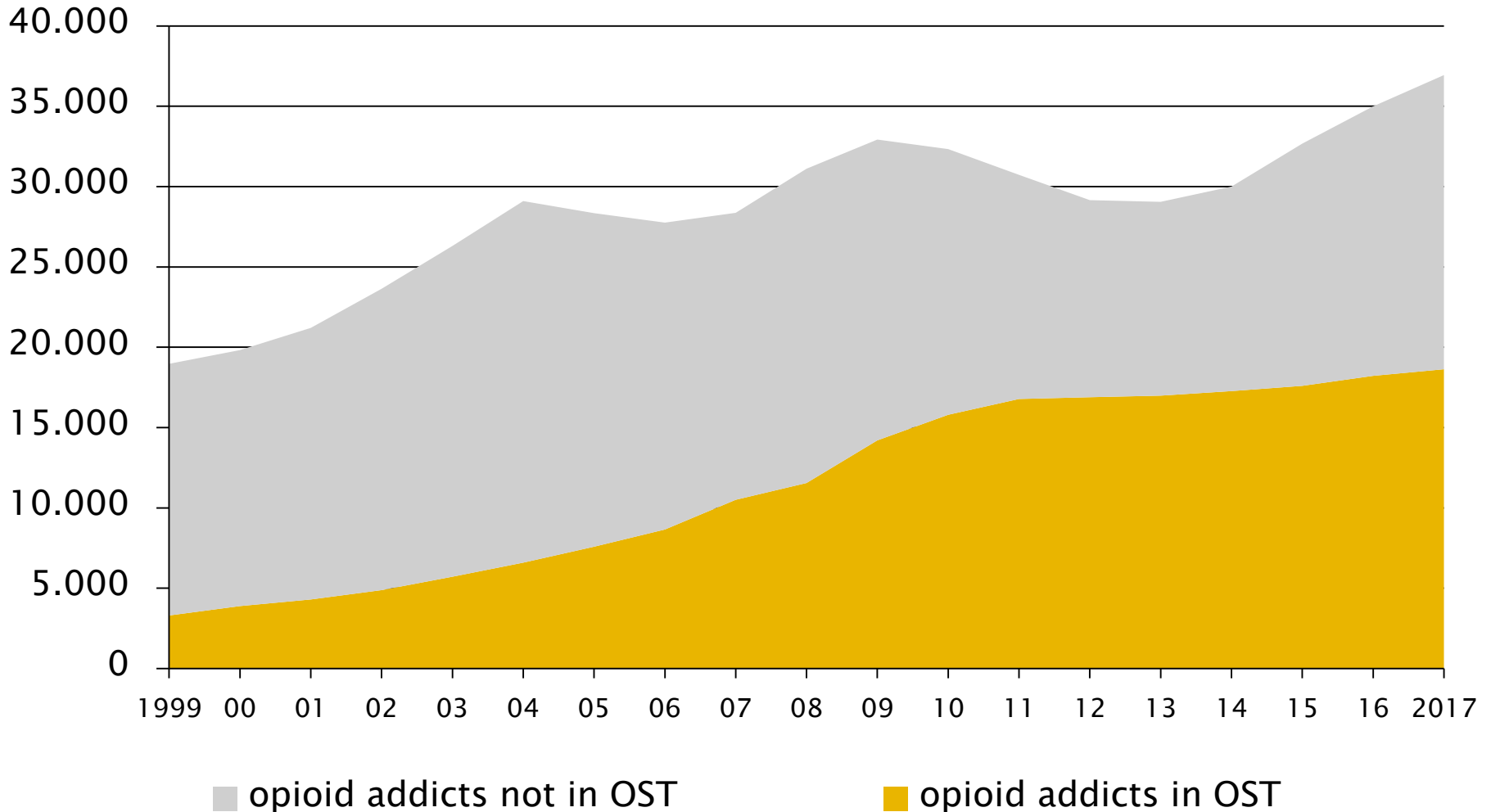


# Coverage of Opioid Substitution Treatment in Austria

Addiction Competence Center  
REITOX–Focal Point Austria  
Martin Busch

EMCDDA–Meeting on Problem Drug Use  
Lisbon 19–20 June 2018

# Do you estimate an annual national OST coverage at the National Focal Point? **YES WE DO**



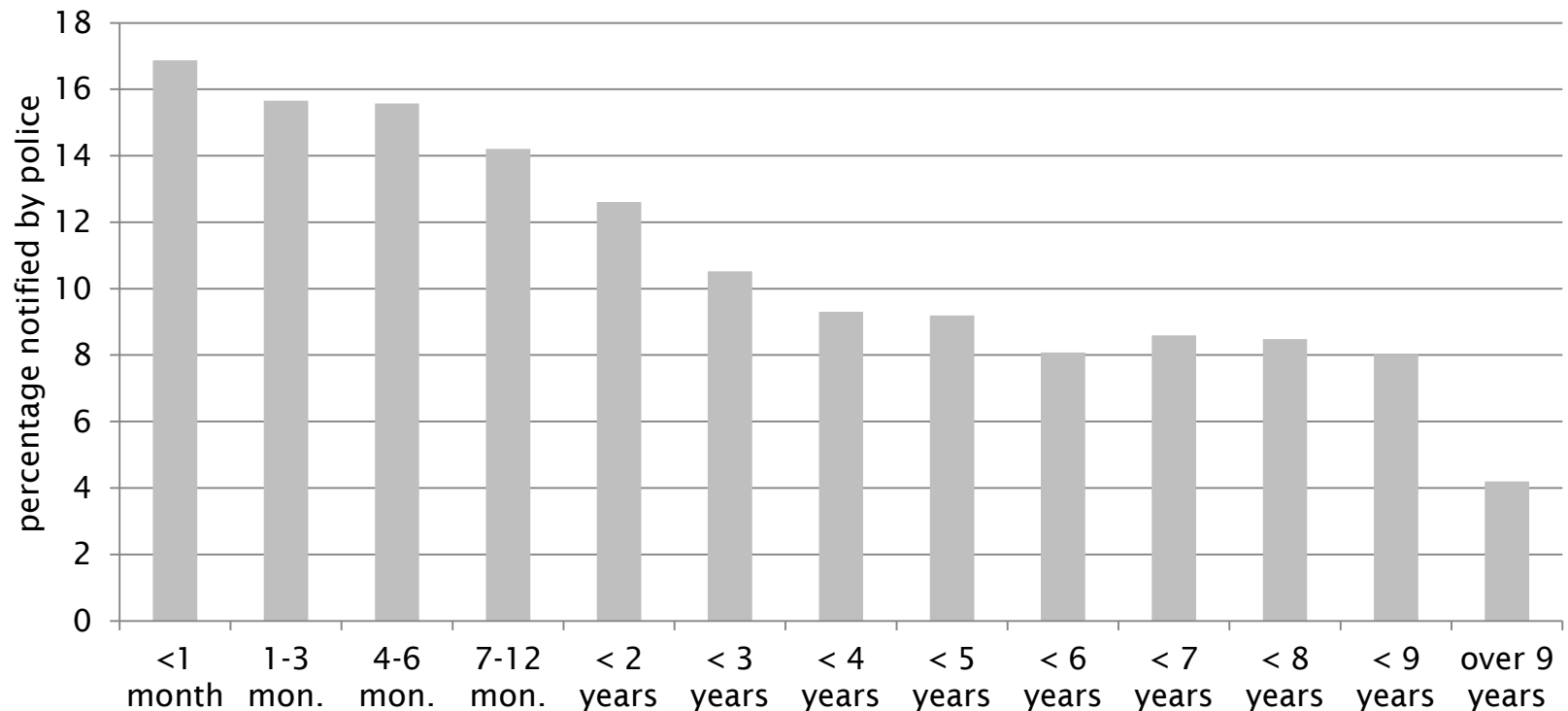
preliminary results - not for publication

## If yes, what method do you use and what are the methodological problems and challenges in estimating this national OST coverage?

---

- » The 2-sample capture-recapture estimate (CRC) of high risk opioid use is based on national **opioid substitution treatment database** (all clients in OST in a respective year) and all **opioid related notifications by the police** in the same year.
- » For some years the 2-sample CRC is validated by 3-sample CRC including direct drug related death cases of the next years.
- » OST-in-treatment rate is calculated very simple  
**Clients in treatment/prevalence of PDU \*100**
- » **Main problem:** For CRC we take all clients in OST in a respective year regardless if they are „stable clients“ or not – this leads to violation of basic assumptions of CRC (a „stable client“ should have probability zero to appear in police notifications or DRD)  
**We do not know how many „stable clients“ there are!**

# OST duration on 1.1.2013 and the probability to be caught by police in 2013



10 % of all OST patients were notified by the police in 2013. The probability of a notification decreases with OST duration!

## What are your thoughts on the EMCDDA proposal in terms of using all OST patients (including stable OST patients) when calculating the OST coverage

---

- » *OST coverage*  $_t = \text{Patients in OST}_t / \text{People in need of OST}_t$
- » *People in need of OST*  $_t = \text{High-risk Opioid Users}_t + \text{'stable' OST patients}_t$  if this later group is not already included in HROU
- » This is exactly the way in Austria in-treatment (OST coverage) rate is calculated, so it is a good idea ;-)
- » There is just one conceptional problem: Are patients in abstinence oriented treatment „in need of OST“?

Thank you for your attention