

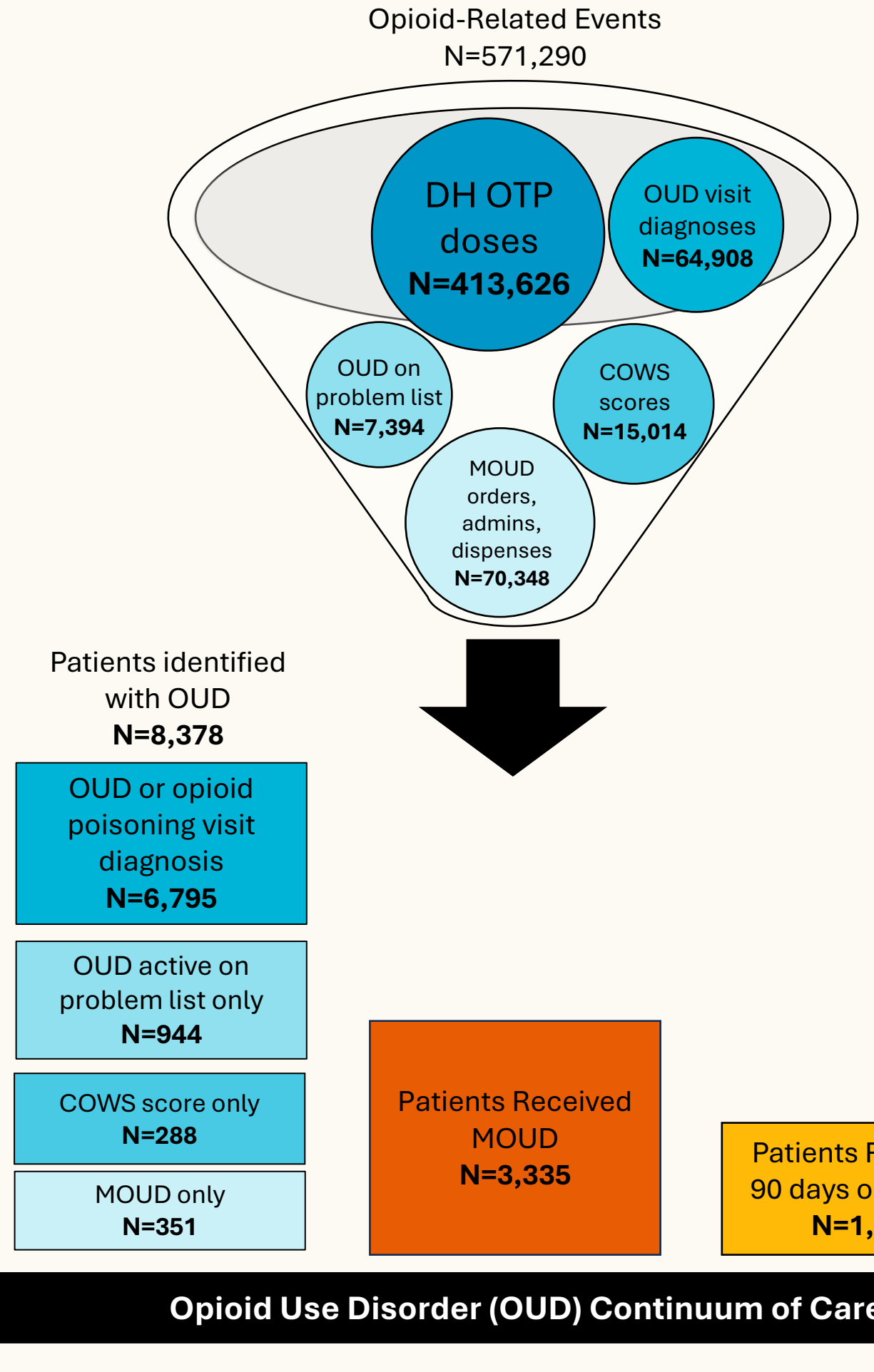
Medications for Opioid Use Disorder Receipt and Retention by Sociodemographics at a Safety-Net Health-System

INTRODUCTION

- Despite medications for opioid use disorder (MOUD) reducing risk of death¹, less than 1 in 4 individuals with opioid use disorder (OUD) received MOUD in past year²
- Disparities persist in OUD treatment delivery³ and retention⁴
- Continuum of care models present a novel tool to identify disparities in access to treatment and retention in care

METHODS

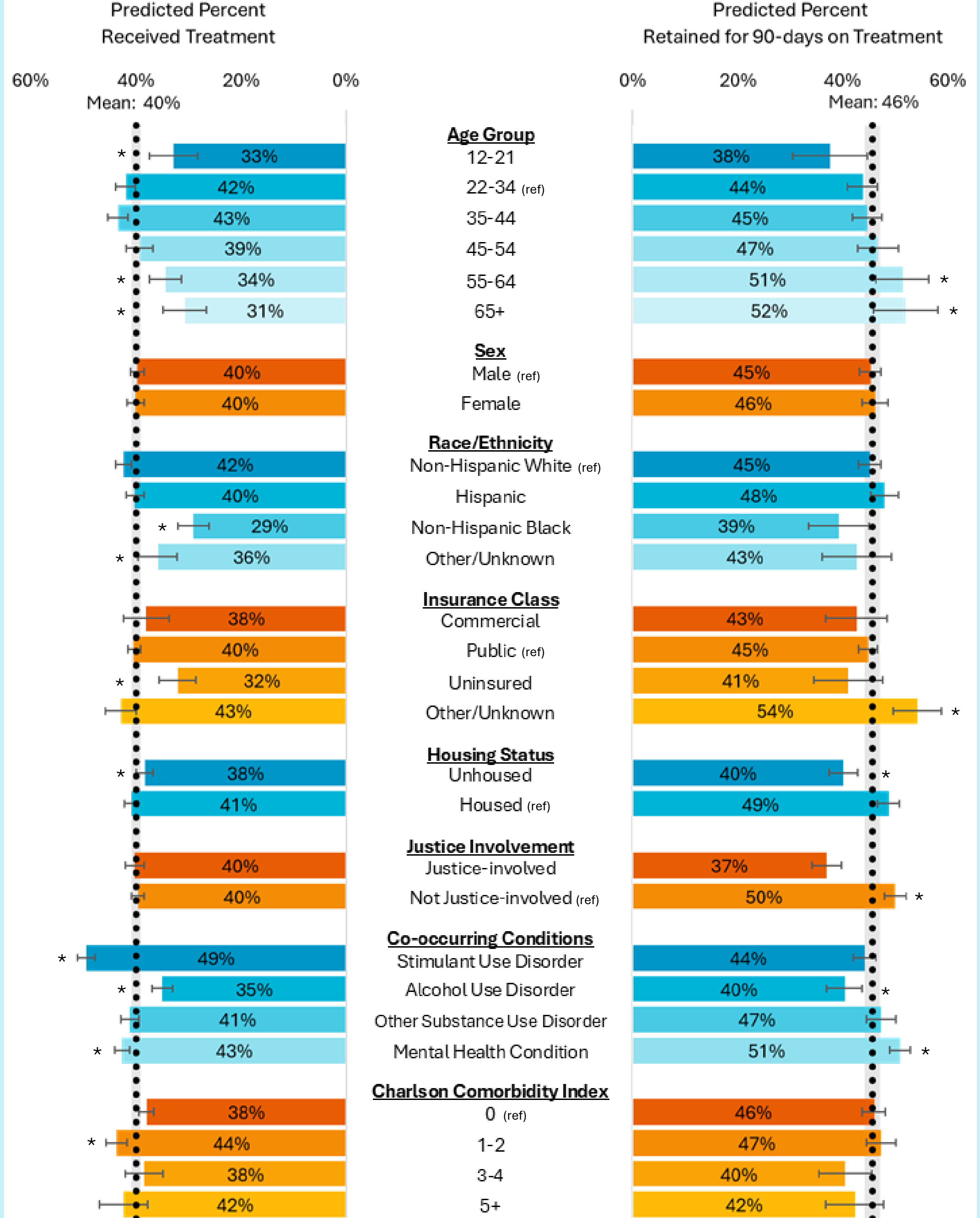
- Denver Health (DH) is an integrated, safety net hospital system in Denver, Colorado
- Queried DH's electronic health record (EHR) for those with OUD: Jan 1, 2023 – Sep 30, 2024



- Outcomes: Estimated methadone and/or buprenorphine treatment receipt and retention for 90 days
- Sociodemographic & clinical covariates
- Produced adjusted risk ratios for both outcomes using multivariable log binomial regression models
- Predicted percent treated/retained by sociodemographic and clinical characteristics

RESULTS

Model marginal predicted percent of receiving treatment and retention for 90-days on treatment, by characteristic



*Significance at p < 0.05 for adjusted risk ratios compared to referent group; referent group for co-occurring conditions is no co-occurring condition and is not displayed

CONCLUSIONS

- Group differences found in two stages of OUD continuum:
 - More likely to be retained: Age 55+, Co-occurring mental health conditions
 - Less likely to be retained: Co-occurring alcohol use disorders, Housing insecurity, Co-occurring stimulant use disorder
- Disparities in treatment receipt only: youth (<22), NH Black and other/unknown race, lack of insurance
- Limitations: single site (limits generalizability, mis-categorizes those treated outside DH), variables limited by EHR availability.
- Future work should focus on reducing disparities in OUD treatment and retention through programming and provider training

AUTHORS & DISCLOSURES

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REFERENCES

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⁴O'Connor AM, Cousins G, Durand L, Barry J, Boland F. Retention of patients in opioid substitution treatment: A systematic review. *PLoS One*. 2020;15(5):e0232086.

