

# **Patterns of Progress in Opiate Substitution Therapy**

Cambridgeshire **Community Services NHS Trust** 

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## Introduction

People receiving opiate substitution therapy (OST) for opiate dependence are often in treatment for years. Eastwood et al (2018), using NDTMS data, found 5 different trajectories that heroin users followed in the frist 5 years of treatment, but the data used in their study is self-report of 3 month periods. This study uses contemporaneous data of OST medication doses and urine drug screens to estimate progress

### Method

Luton Drug Service (LDS) is a community based service treating Luton residents with drug problems. The clinical diagnosis of almost all patients is the opiate dependence syndrome (ICD-10 code F11.2). They receive OST, psychosocial intervention and recovery activities such as assistance accommodation and occupation/employment. Around 500 patients are in treatment at any one time. LDS provides contractually mandated data to the Luton Clinical Commissioning Group about successful discharges from treatment.

In this study, the preparation for patients coming to see an addiction psychiatrist involved collecting longitudinal data on dose of OST medication and drug screens.

As the data was collected in the course of routine clinical practice, the Trust Senior Research Fellow advised that the approval of the Trust Research Ethical Committee was not required.

# **Findings**

The data of 164 patients were collected

## Components of Patterns Observed

OST doses

Phases: Increasing phase, decreasing phase, interrupted phase, repeated interrupted phase (chaotic behaviour)

Dose Level change: static, ascending, descending, bounce Urine Drug Screens

Continuing use, continuing clean samples, intermittent

These components are useful for monitoring short passages of treatment, but are not illustrated here

# Patterns of Progress Identified

Immediate stabilisation followed detoxification is demonstrated in Figure 1.

A patient who continues to use on top of his script, whatever the dose, over an 11 -year period, is demonstrated in Figure 2.

Progress in treatment is not linear, as shown in Figure 3, where a period of stability is followed by a period of chaotic behaviour

Where change occurs, from using to nonusing, it is abrupt, not gradual, as indicated in Figure 4.

The data of a patient who showed chaotic behaviour throughout treatment is shown in Figure 5. This pattern continued for 20 years

(only 10 years shown here) before the patient went abruptly into recovery

#### Discussion

These observations suggests that progress in OST in not necessarily linear (ie it does not always follow a pattern of stabilisation, detoxification and abstinence), and may not occur at all. When change does happen, it Is abrupt. The patient does not have to be stable to go into recovery.

These data make it possible to postulate that addiction may not be a psychological condition but an abnormal mental state

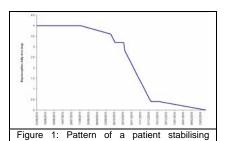
Eastwood B, Strang J, Marsden J. (2018) Continuous opioid substitution treatment over five years: Heroin use trajectories and outcomes. Drug and Alcohol Dependence. in press (https://www.drugandalcoholdependence.com/a S0376-8716(18)30265-5/fulltext, accessed 17 May

#### Declaration

I declare that no conflict of interest exists

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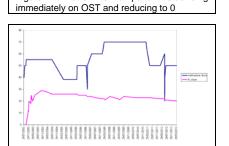
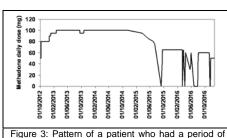


Figure 2: Pattern of a patient who uses on top of his script throughout the period of treatment regardless of dose change



stability followed by a period of chaotic behaviou

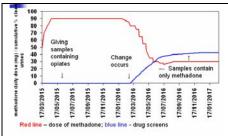


Figure 4: Pattern of change, showing that change is abrupt rather than progressive

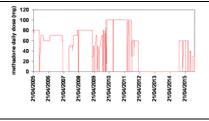


Figure 5: This patient showed a chaotic pattern of progress before abruptly going into recove