



Title:	Use of Treatment History to Identify Drug Use Differences in European Patients
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Meeting:	Europad
Date:	May 2014
Location	Scotland

Abstract:

Introduction: Individuals seeking treatment for opioid dependence are a valuable source of information, particularly about their drugs of choice. As part of a European pilot study in 4 countries, we aim to describe drug use differences between people who are entering substance abuse treatment for the first time and those who previously received treatment for substance abuse.

Methods: Data from the Europad pilot program were used to describe differences in patients who had previously attended a treatment program and those who were entering treatment for the first time. For this analysis we assessed gender, age, self-reported status as a health care professional, primary drug used “to get high,” number of drugs endorsed, and endorsements of past 30-day use of opioid drug substances as well as heroin. Participating sites were located in France, Germany, Italy, and Spain. Statistical significance was assessed at the 0.05 level using Fisher’s exact test for categorical variables and t-tests for continuous variables.

Results: There were 144 survey respondents in France, 158 in Germany, 123 in Spain, and 309 in Italy. Of the patients surveyed during the pilot phase of this study, 45% of patients in Italy reported first-time treatment for opioid dependence, whereas this percentage was much lower in Spain (14%), Germany (23%), and France (28%). In France the proportion of patients endorsing past 30-day use of buprenorphine “to get high” was lower for those who had previously been in treatment compared to those who had not ($p=0.0394$), and they also had a lower mean number of drugs endorsed ($p=0.0382$). In Germany, those who had previously been in treatment were less likely to endorse heroin ($p<0.0001$) as their primary drug and significantly more likely to endorse buprenorphine ($p=0.0032$) and methadone ($p<0.001$). There was a higher proportion who endorsed past 30-day use of methadone ($p<0.0001$) and heroin ($p=0.0349$), and a lower proportion who endorsed past 30-day use of morphine ($p=0.0246$). In Italy and Spain, those who had previously been in treatment were significantly older than those entering treatment for the first time ($p<0.0001$, and $p=0.0002$ respectively). There were no differences in primary drug or drugs endorsed in Spain, however, in Italy a lower proportion of those previously in treatment endorsed codeine and a higher proportion

endorsed heroin.

Conclusions: Although heroin was the most endorsed drug in every country regardless of treatment history, those who were previously in treatment in Spain, Germany and France endorsed a higher number of prescription opioids than those seeking treatment for the first time. However, more patients who had never been in treatment in Italy endorsed more prescription drugs than those who had received treatment previously. These data suggest that patient demographics and drug endorsements vary based upon history of substance abuse treatment; however, the differences themselves are not universal and may vary in different regions of Europe.