RESEARCH BRIEF

Opioid agonist treatment prescribing in provincial prisons in Ontario

There is a substantial burden of opioid-related morbidity and mortality in people who are incarcerated in Canada. Opioid agonist treatment (OAT) is the first-line treatment for opioid use disorder (OUD) and the standard of care across Canada. We used whole population prescribing rates for people in provincial prisons and in the community between 2015 and 2018 to explore OAT prescribing patterns for people during incarceration.

KEY FINDINGS:

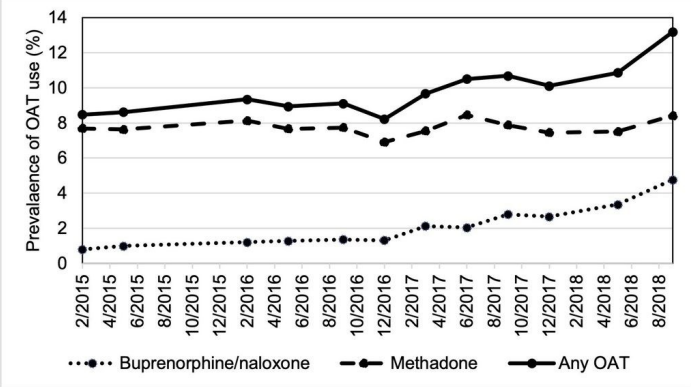
- In prison over the study period, 6.9%–8.4% of people were prescribed methadone; 0.8% to 4.8% were prescribed buprenorphine/naloxone; and 8.2% to 13.2% were prescribed either treatment.
- The prevalence rate of buprenorphine/naloxone prescribing increased in prisons by 1.70 times per year (95% CI 1.47 to 1.96), which was significantly higher than the increase in community prescribing rates: 1.20 (95% CI 1.19 to 1.21).
- Rates of OAT prescribing varied widely between provincial prisons; especially for buprenorphine/naloxone prescribing.

BOTTOM LINE:

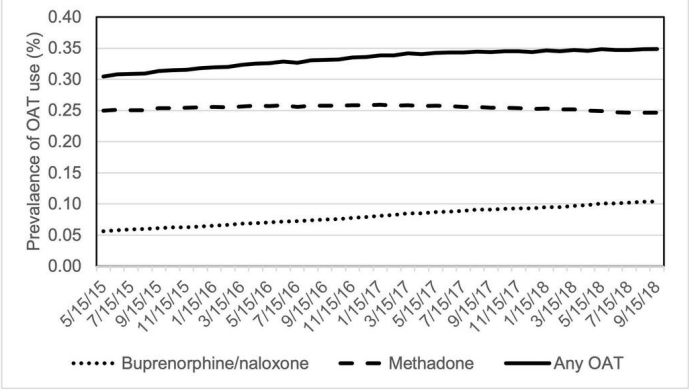
- Although OAT prescribing rates are much higher in prison than in the community, we lack data on the prevalence of opioid use disorder to determine opioid agonist treatment coverage for people with opioid use disorder.
- Future work should explore why there are differences in OAT prescribing patterns across prisons, and how to promote the uptake of OAT prescribing where treatment gaps are identified.

Percentage of people prescribed OAT in provincial prisons and in the whole population in Ontario, 2015–2018 by OAT type.

Ontario provincial prisons



Ontario general population



Read the full article:

Bodkin C, Bondy S, Regenstreif L, Kiefer L, Kouyoumdjian F. Rates of opioid agonist treatment prescribing in provincial prisons in Ontario, Canada, 2015–2018: a repeated cross-sectional analysis. BMJ Open. 2021 Nov 1;11(11):e048944.

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