

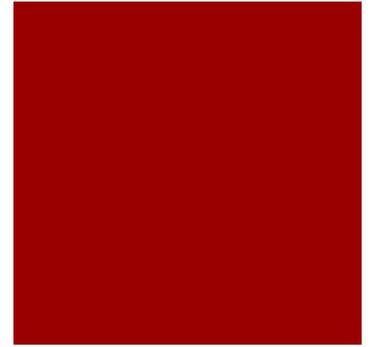


**Illicit stimulant use among patients receiving injectable
opioid agonist treatment:
A qualitative grounded theory study**

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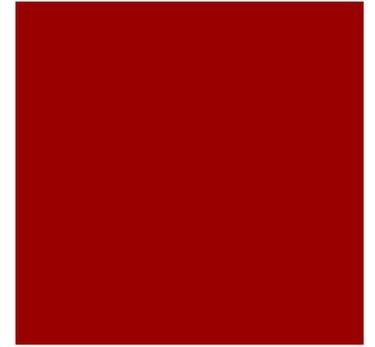
Disclosure Statement

- I have no conflicts to declare.

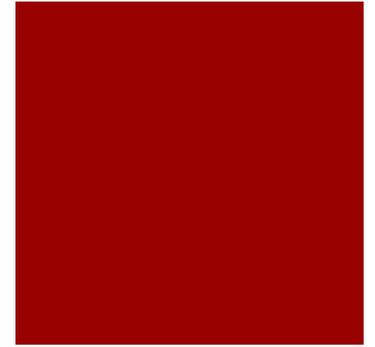


Cocaine use in iOAT

- Cocaine use is prevalent iOAT patients (1-3)
- Treatment outcomes:
 - Lower odds of treatment retention (3)
 - Higher rates of opioid use, poorer retention (4-7)
- Modest declines in cocaine use in iOAT
 - In SALOME trial:
 - 11/30 days at BL
 - 8/30 days at 6 months



Research Question



- What are the processes by which iOAT patients engage in the use of illicit stimulants?

Methods

- Qualitative one on one interviews (n=31)
 - Participants recruited from iOAT cohort study
 - Self-reporting any illicit stimulant use



Grounded theory approach



Direct coding of participants' words

Researcher reflection

**Iterative process of data collection +
analysis**

Developing a theory

Self-managing illicit stimulant use in iOAT



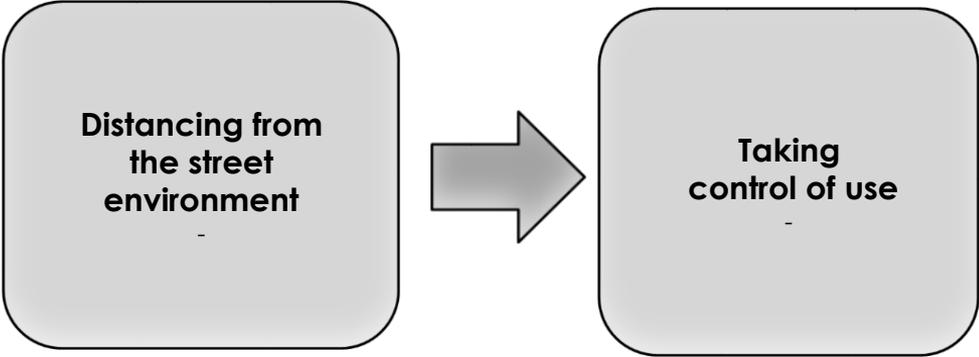
**Distancing from
the street
environment**



“It [iOAT] took me away from the trenches of the street right. I was always a hustler I was always down there, my life was buying dope to sell it to get more dope. Now that I don’t have to do that for the down [heroin] it sort of rubs off on the other drugs too right.”

-63-year old man

Self-managing illicit stimulant use in iOAT

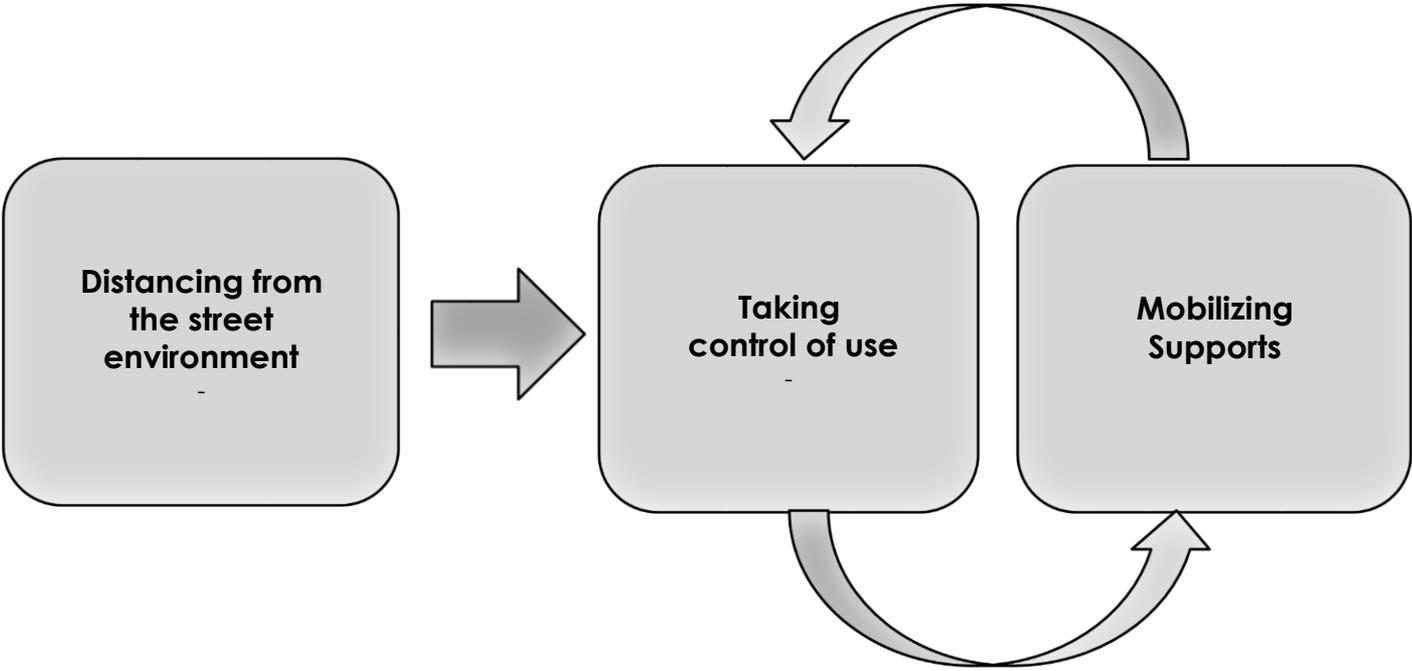




“It is more control, more control over what I am doing. Before if I had money I would spend it. Now we go shopping at Costco for whatever we need and leave money there for if we need it. I still get cravings [for crack cocaine] and I just try to do different things to try to get my mind off it. I go swimming, rollerblading, just going for a walk, I watch TV, or write. I am well so I can do those things again.”

-45 year old woman

Self-managing illicit stimulant use in iOAT





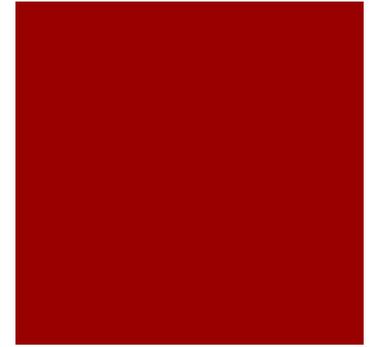
“If there was something for the cravings it would be amazing. That is what I am trying to beat right now. I side track myself and try to do other things to get it off my mind. So maybe I can figure out how to stop doing it.”

-46 year old woman

Discussion

- iOAT access can offer a first step toward stimulant use self-management
- Self-management framework:
 - Role of both individual efforts with external supports
- Evidence supports dexamphetamine for cocaine use in iOAT (Nuijten et al., 2016)

Next Steps

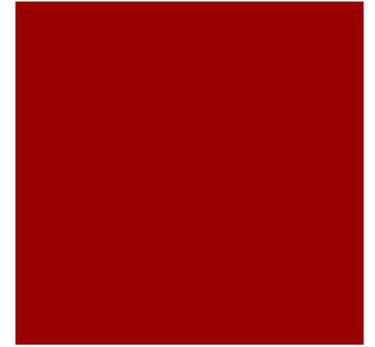


- Clinically:
 - KT project to promote dexamphetamine prescribing in new iOAT clinics
- Research:
 - Explore heterogeneity in stimulant use patterns
 - Individual, social, environmental factors associated with patterns of use

Acknowledgements

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- 1/ Oviedo-Joekes, E., Guh, D., Brissette, S., Marchand, K., MacDonald, S., Lock, K., ... & Marsh, D. C. (2016). Hydromorphone compared with diacetylmorphine for long-term opioid dependence: a randomized clinical trial. *JAMA psychiatry*, 73(5), 447-455.
- 2/Strang, J., Metrebian, N., Lintzeris, N., Potts, L., Carnwath, T., Mayet, S., ... & Charles, V. (2010). Supervised injectable heroin or injectable methadone versus optimised oral methadone as treatment for chronic heroin addicts in England after persistent failure in orthodox treatment (RIOTT): a randomised trial. *The Lancet*, 375(9729), 1885-1895.
- 3/ Blanken, P., van den Brink, W., Hendriks, V. M., Huijsman, I. A., Klous, M. G., Rook, E. J., ... & van Ree, J. M. (2010). Heroin-assisted treatment in the Netherlands: History, findings, and international context. *European Neuropsychopharmacology*, 20, S105-S158.
- 4/Williamson, A., Darke, S., Ross, J., & Teesson, M. (2006). The effect of persistence of cocaine use on 12-month outcomes for the treatment of heroin dependence. *Drug and Alcohol Dependence*, 81(3), 293-300.
- 5/Roux, P., Lions, C., Vilotitch, A., Michel, L., Mora, M., Maradan, G., ... & Carrieri, P. M. (2016). Correlates of cocaine use during methadone treatment: implications for screening and clinical management (ANRS Methaville study). *Harm reduction journal*, 13(1), 12.
- 6/Marsden, J., Eastwood, B., Bradbury, C., Dale-Perera, A., Farrell, M., Hammond, P., ... & National Drug Treatment Monitoring System Outcomes Study Group. (2009). Effectiveness of community treatments for heroin and crack cocaine addiction in England: a prospective, in-treatment cohort study. *The Lancet*, 374(9697), 1262-1270.
- 7/ Franklyn, A. M., Eibl, J. K., Gauthier, G. J., Pellegrini, D., Lightfoot, N. E., & Marsh, D. C. (2017). The impact of cocaine use in patients enrolled in opioid agonist therapy in Ontario, Canada. *International Journal of Drug Policy*, 48, 1-8.