



SNAPSHOT

Injectable Opioid Agonist Treatment (iOAT) in Ontario

In the four years between 2016 and 2019, more than 15,400 people died from opioid use, making it the most enduring public health crises in recent Canadian history.¹ The COVID-19 pandemic has intensified the opioid poisoning crisis in Ontario.² Effective treatment for opioid dependence is one of several key strategies to address this crisis. Like other conditions, there are different forms of treatment available, depending on individual needs, the severity of issues, and how individuals respond to treatment. For individuals with severe dependence, injectable opioid agonist treatment (iOAT) has been shown to be effective and safe. Despite this evidence, and the increasing harms from the opioid crisis and the COVID-19 pandemic, iOAT is not widely available in Ontario. This snapshot describes what we know about iOAT and focuses in on its availability in Ontario.

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THINGS TO KNOW ABOUT iOAT

iOAT is a life-saving and life-enhancing medical treatment

For many individuals with severe opioid dependence, research suggests that iOAT is the most effective medical treatment in reducing illicit drug use and connecting and keeping individuals in treatment.³ Research has also shown that iOAT improves physical, psychological and social health and gives individuals stability and freedom to “organize, set goals, and plan for life... with a sense of hope and meaning.”⁴



iOAT is safe

iOAT begins with a thorough medical assessment and self-injection of medication is done under supervision. Several large clinical trials in various countries have found iOAT to be a safe alternative to OAT, and it has been part of standard care in various European countries for decades.³ iOAT is also a far safer alternative to dangerous illicit street drugs, which is currently a major driver of the opioid crisis in Canada and Ontario.



iOAT is cost effective and good for communities

Without access to effective treatment, individuals with severe opioid dependence are at high risk of incredibly distressing and sometimes life-threatening withdrawal symptoms. Out of a desperation to avoid withdrawal, some resort to criminal activity to buy illicit drugs. By reducing the need to use illicit street drugs, iOAT also reduces criminal activity, making communities safer where iOAT programs are offered.⁴ Because of these positive impacts, iOAT is also more cost effective than methadone.⁵





COVID-19 HAS INCREASED: ²



Opioid-related harms



Isolation for people who use opioids



A tainted drug supply



Barriers to effective treatment



INJECTABLE OPIOID AGONIST TREATMENT (iOAT) IN ONTARIO

There is only one iOAT program in Ontario and the waiting list to get into it is full.

Many of the training and professional regulations needed to expand iOAT in Ontario are already in place.

Recent consultations with a broad range of stakeholders, including people with lived/living experience of drug use and service providers, highlighted the critical need to expand availability of iOAT in Ontario.

Affordable access to medications is a major barrier to expanding iOAT in Ontario. Diacetylmorphine, one of two iOAT medications, is not listed on the provincial drug plan despite being a recommended evidence-based treatment. The other medication, hydromorphone, is not listed at high enough doses.

There is an opportunity for provinces/ territories to work together to negotiate lower costs for iOAT medications, including through domestic production.

"There's no neighborhood too small or too big or too privileged. People will be surprised how many of their own children, friends, parents are part of this situation...this opiate crisis."

- iOAT client

This snapshot was developed as part of a project led by Addictions and Mental Health Ontario (AMHO), with funding from Health Canada's Substance Use and Addictions Program (SUAP). The goals of the project are to assist provincial governments and health authorities in determining whether iOAT programs should be expanded in Ontario, and, where the need for expansion is identified, to develop resources to support planning. For more information and resources regarding iOAT in Ontario visit amho.ca/our-work/iOAT.

¹ www.canada.ca/en/health-canada/services/substance-use/minister-letter-treatment-safer-supply.html

² www.publichealthontario.ca/-/media/documents/o/2020/opioid-mortality-surveillance-infographic.pdf?la=en

³ Strang, J., et al. (2012). New heroin-assisted treatment: Recent evidence and current practices of supervised injectable heroin treatment in Europe and beyond. Luxembourg, European Monitoring Centre for Drugs Drug Addiction. www.emcdda.europa.eu/publications/insights/heroin-assisted-treatment_en

⁴ <https://static1.squarespace.com/static/578c88eae3df28207e624909/t/58978f3129687ff9f4ccc121/1486327601521/siOAT+one+pager+.pdf>

⁵ Bansback, et al. (2018). Cost-effectiveness of hydromorphone for severe opioid use disorder: findings from the SALOME randomized clinical trial. *Addiction*, 113(7), 1264-1273.

