

Is there an association between poly-drug use and alcohol consumption in an Irish cohort of methadone maintained patients?

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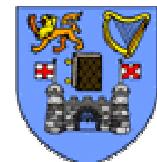


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Background - Irish Context

- ▶ There are approximately 10,000 patients receiving methadone maintenance throughout the Irish Republic (*Central Treatment List, Dublin 2010*)
- ▶ There is a high prevalence of problem alcohol use among patients attending primary care for methadone (*Ryder et al 2009*) see also (*MacManus and Fitzpatrick, 2007*).
- ▶ Addressing problem alcohol use In Ireland has been identified as a priority for population health.



Community-based Addiction Service Users

Unlike primary care difficult to reach group

Bio-psychosocial issues:

- Health
- Education
- Employment
- Forensic

Poly-drug use

In Europe, the concept of poly-drug use dates back to the 1970s.

In its broadest terms, poly-drug use is defined as the use of one or more substances with an illegal drug plus another legal or illegal drug.



Harmful Effects of Alcohol & poly-drug use

- Increased risk of:
 - Premature death
 - Overdose
 - Cocaine Cardiac Death



Current Research Question

- **Aim:** To determine whether there was an association between poly-drug use and alcohol consumption amongst patients accessing community based methadone maintenance clinics.



Method

- ▶ **Participants:** All participants were receiving methadone maintenance.
- ▶ **Measures:**
 - AUDIT
 - Urine analysis: heroin, benzodiazepine & cocaine
- ▶ **Setting:** Three community based methadone maintenance clinics in Dublin



Results AUDIT Screening

Mean Total AUDIT (10 items) scores at baseline

Total pop (n=710)	AUDIT Positive (n=160)	Dependent (n=65)
	(22.5%)	(9.3%)

N=225 31.8% (males=162 females=63).

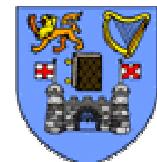


*Was there a significant
association between poly-drug
use and alcohol at baseline?*



Correlation between AUDIT Score & Poly-drug use

- No significant association was found between AUDIT score and opiate ($p=0.8$) benzodiazepine ($p=0.91$) and cocaine use ($p= 0.16$) at baseline.



Pattern of Poly-drug Use

20% (n=45)	Opiates and Benzodiazepine
15% (n=34)	Benzodiazepine alone
15% (n=34)	Opiates, Benzodiazepine and Cocaine
11% (n=25)	Benzodiazepine and Cocaine
39% (n=87)	Random combinations

Characteristics AUDIT Score & Poly-drug use

- 3+ Positive Opiate, Benzodiazepine and Cocaine = lower AUDIT Score at baseline.
- Binge drinkers (6+ Units) ($n=133/59.1\%$) more likely to use cocaine.



Findings

- Binge drinkers were more likely to have caused or acquired an injury in the last year than those who did not binge drink.
- Benzodiazepine users were more likely than heroin or cocaine users to have caused or acquired an injury in the last year than those who used cocaine or heroin alone.

Discussion

- ▶ No statistically significant association between methadone maintained patients' poly-drug use and AUDIT scores at baseline.
- ▶ Trend:
Poly-drug use+ AUDIT scores-
AUDIT scores+ poly-drug use-



Discussion Continued

- ▶ Therefore methadone maintained poly-drug users appear to consume alcohol in a different way to other substances:

- ▶ Less frequently
- ▶ Substitution
- ▶ Binge

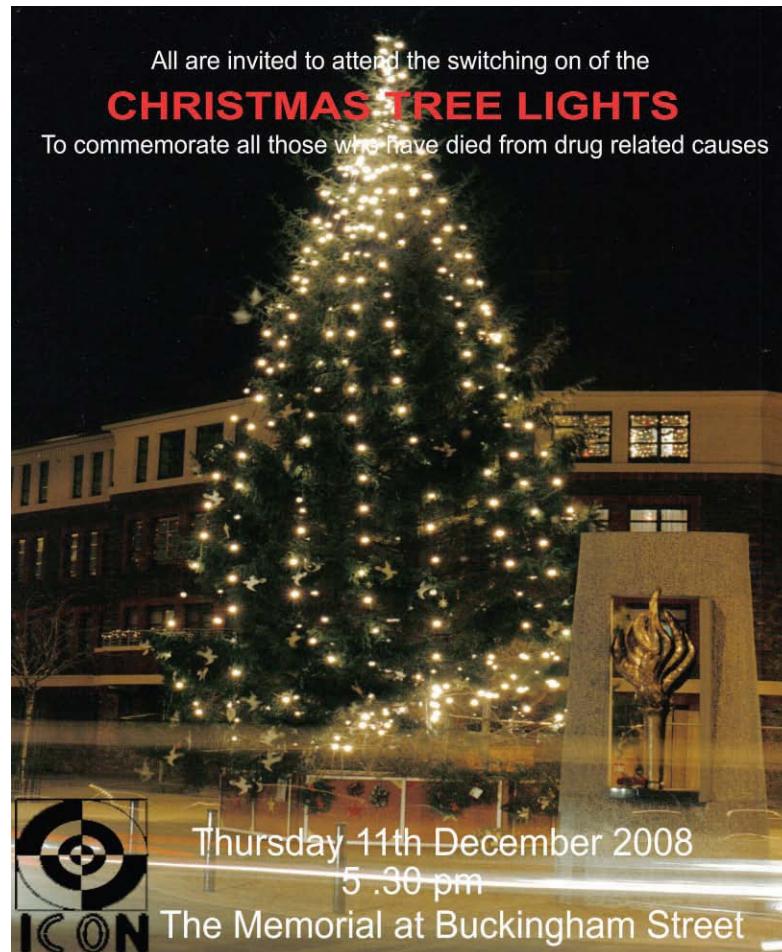


Implications for treatment providers

- High Prevalence problem alcohol use
- Treatment for harmful and hazardous drinking within the addiction services remains secondary priority.
- Integration of routine screening for alcohol misuse in initial care plans.



Commemoration



Finally

- *Many thanks to patients and clinicians for taking part in this research.*



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