

MMT: evolving a system

Dan Reist
Assistant Director (Knowledge Exchange)
Senior Policy Analyst



**University
of Victoria**

Centre for Addictions
Research of BC

BC Review 1996-2008

Why?

- media attention to financial abuses

What?

- qualitative study
- quantitative study
- policy analysis



When it comes to complex systems ...

"There is always an easy solution to every human problem – neat, plausible, and wrong."

(H. L. Mencken, "The Divine Afflatus")



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Solid evidence base

Compared to opioid withdrawal or placebo, MMT

- dramatically reduces illicit opioid use
- increases retention in treatment

Observational studies demonstrate, MMT

- dramatically reduces mortality (one third compared to out of treatment)
- appears to reduce risk of HIV infection and seroconversion rates by about 50%





challenging issues

- complexity
- capacity
- standards, training
- coordination
- phenomenology



Models

Family Physicians

- Potential to maximize access, integrate MMT into mainstream health care services and ensure comprehensive medical care
- In practice, not normalized in primary care and often not integrated in family medicine

Multidisciplinary Models

- Various attempts to integrate methadone prescribing with multidisciplinary services
- Some narrow the client group and some narrow the service bundle
- Sustainable access ???



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graph LR; quality --- balance; access --- balance; balance --- retention;
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quality

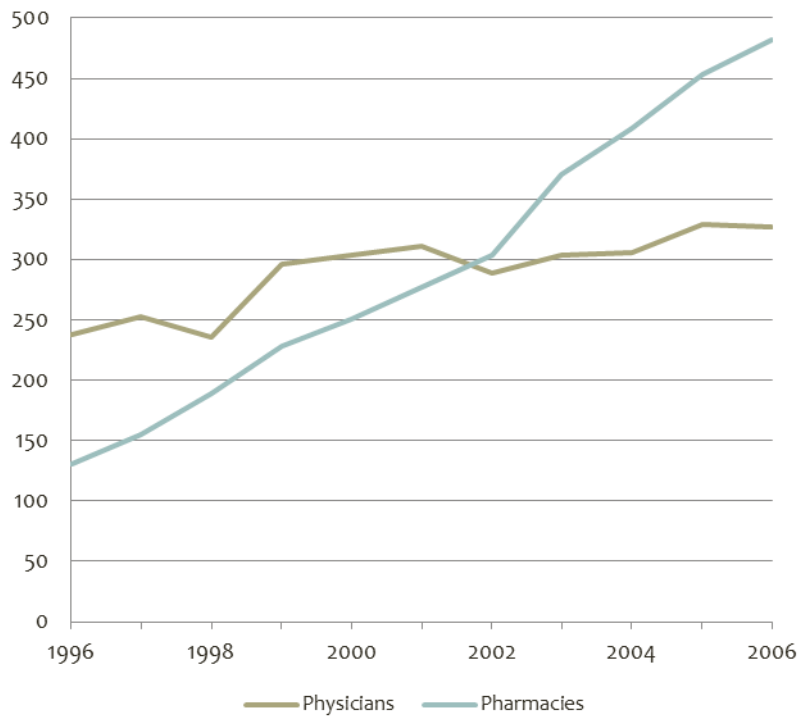
balance

retention

access



Access



much less
outside
metro

inter-
system
barriers

better
than in
1990s



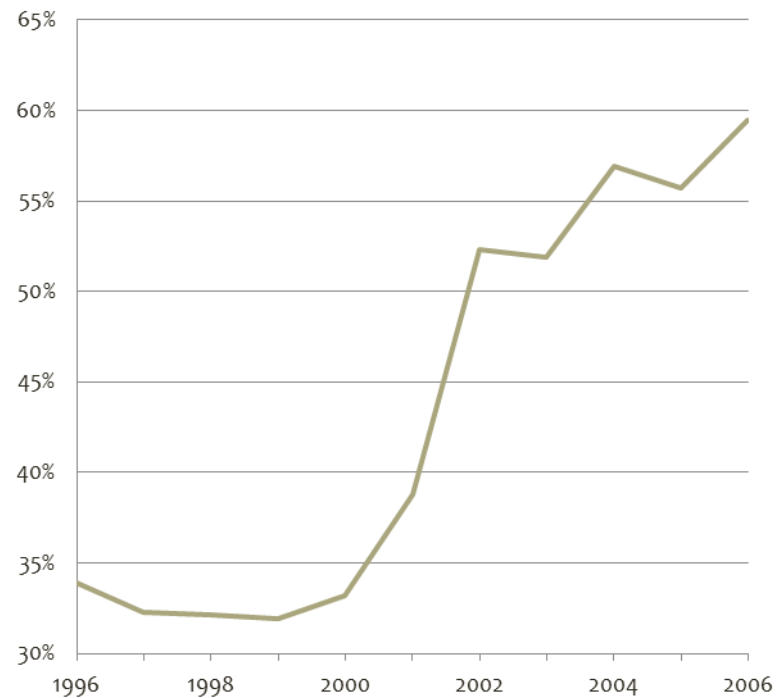
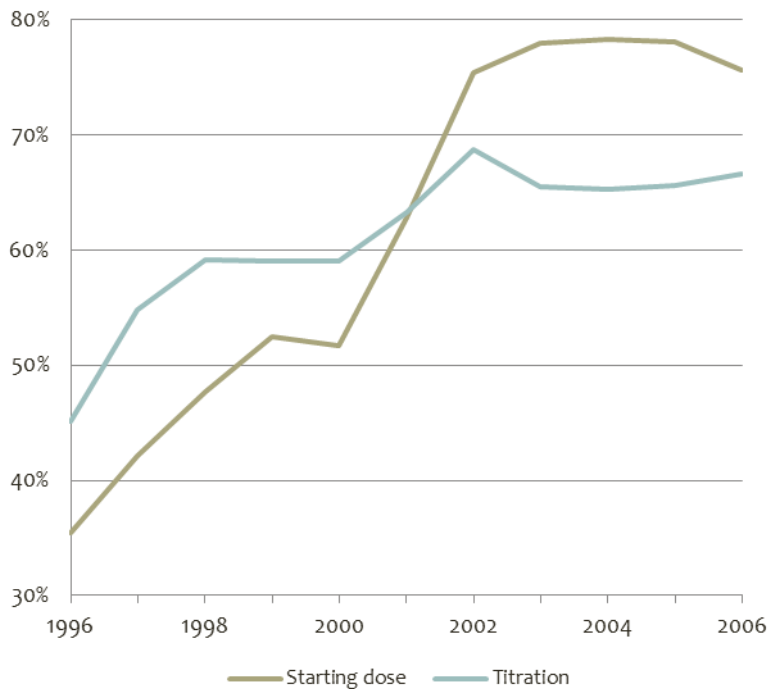
12-Month Retention

- Common measure of treatment effectiveness
- Associated with decreased illegal activity, better health and lower levels of mortality



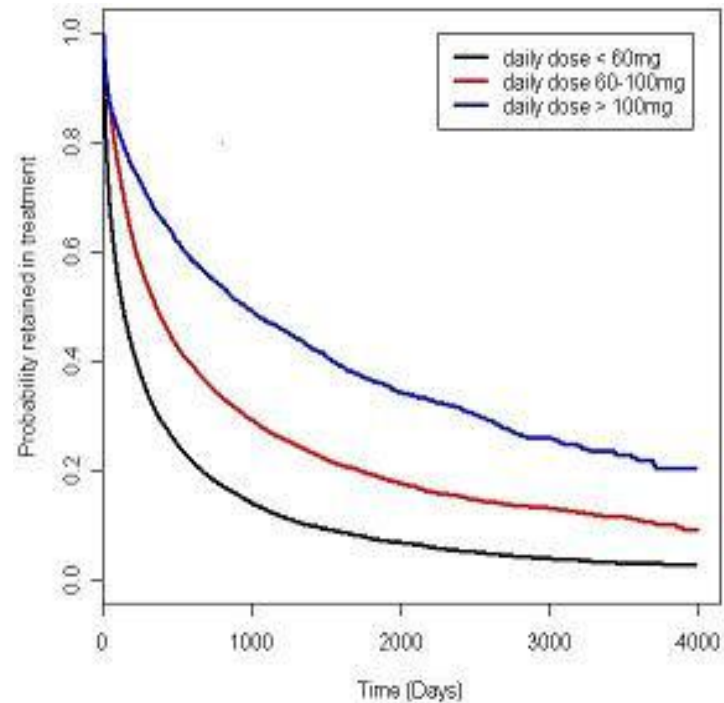
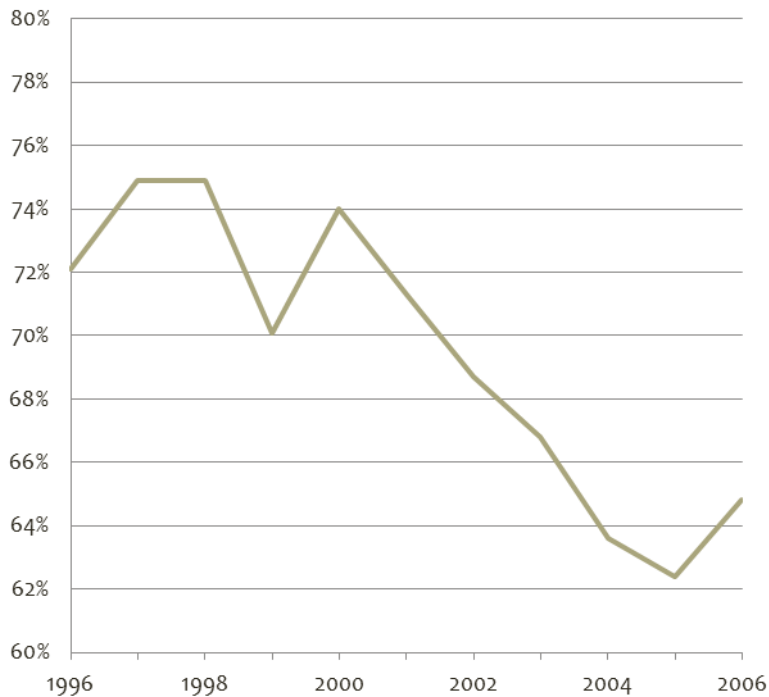
What's the story?

growing compliance on starting dose, titration & carries



What's the story?

decreasing compliance with effective dose guidelines



Phenomenological aspects of Retention

- Clients report they do not receive the information they need for informed decision-making
- Logistical constraints make it difficult to integrate into normal life and this is accentuated by controlling and punitive practices
- Clients experience little support in dealing with physical, emotional and social challenges including side effects to treatment



What is quality?

- Safety?
 - Some practitioners felt there was an over emphasis on minimizing potential for methadone related deaths and preventing diversion
- Public trust?
 - Problems related to the practice of some pharmacies, clinics and housing providers has led to a loss of faith in the system
- Standard of care?
 - Clients value compassion and respect but often experience stigma and discrimination
- Outcome?





Recommendations

1. Coordination of the system – responsibility and accountability across components
2. Monitoring and reporting
3. Multidisciplinary workforce development
4. Coordinated funding strategy



Thank You

Visit us at
www.carbc.ca

Dan Reist
dreist@uvic.ca
(604) 408-7753



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