

Pharmacotherapy Maintenance Treatment in Australia - Media release - 17th August 2009

Two new reports from the Australian National Council on Drugs (ANCD) 'Pharmacotherapy Maintenance Treatment in Australia' and 'The many sides of Australian opioid pharmacotherapy maintenance system' state that the evidence base to support the effectiveness of pharmacotherapy maintenance treatment for the treatment of opioid dependence is compelling and substantial. 

The reports confirm pharmacotherapy treatment as a safe and effective treatment of opioid addiction. Furthermore, they reveal that while pharmacotherapy services in Australia are better than in many other countries, there is still room for improvement.

These commissioned reports, prepared by the Drug Policy Modelling Program (DPMP), are to be launched in Sydney with a half day seminar on the 17th August 2009 at which the authors of the reports and a number of experts within the field will speak.

The reports outline a number of key issues which will resonate with those familiar with pharmacotherapy programs in Australia:

- Of the estimated \$11.73 million dollars per month currently expended on pharmacotherapy services the majority is government funded – States, Territories and to a lesser extent the Commonwealth. However, clients cover the remaining 33% out of their own pockets.
- The total cost of pharmacotherapy services in Australia is substantially less than treating other chronic diseases and more importantly is cost effective in addressing the range of harms associated with not being in treatment.
- All jurisdictions now provide pharmacotherapy treatment with the vast majority of treatment being provided within the private sector through general practice and with clients receiving their medication from community pharmacies.
- There are insufficient treatment places to meet demand
- The availability of pharmacotherapy programs within correctional systems remains very limited with the exception of a few jurisdictions.

Dr John Herron, Chairman of the ANCD said "The commitment to this program by State, Territory and Federal Governments has been vital in the success to date. However, the reports clearly indicate that a significant impediment to improving access to this treatment by people addicted to heroin has been the large client co-contributions to the cost of the treatment. Reducing the client costs will not only improve access but could very well increase the amount of time people spend in treatment, and the evidence is clear that this increases the chances of success."

Associate Professor Alison Ritter, Director of DPMP, commented "While we are clear on the number of people receiving opioid dependence treatment in Australia, there is less accurate estimations on the numbers of dependent users in Australia and the duration of time they spend between treatments. Despite these

uncertainties, our research indicates that there is unmet demand for treatment”.

The reports summarise the key issues for the Australian pharmacotherapy programs. These include:

- Accessibility of treatment (including the different ways treatment is delivered (in clinics or in primary care),
- Affordability of treatment to patients,
- Availability of treatment (number of places), and
- level of stigmatisation experienced by patients as a consequence of participation in pharmacotherapy programs.

Associate Professor Robert Ali, an Executive member of the ANCD, added “The participation of a greater number of GP prescribers and community pharmacy dispensers across the country could be the solution to the problem of accessibility. In regard to affordability this will require some difficult discussions between the Commonwealth and jurisdictional governments, as the ANCD believes that clients cannot continue to be expected to bear such significant costs to participate in treatment. “

The ANCD’s Executive Director Gino Vumbaca further added “The early introduction of the pharmacotherapy maintenance program in Australia helped prevent an HIV epidemic in Australia. This coupled with the clean needle programs have maintained relatively low rates of HIV.

“Recently the United Nations Office of Drugs and Crime identified a substantial increase in heroin production from both Afghanistan and to a lesser extent Burma. This coupled with the recent recognition of an increase in prescription opioid dependence means that it is timely to consider the best mix of services to provide adequate availability, accessibility and affordability of the pharmacotherapy maintenance treatment program.”

A range of experts will speak at the national launch of the report and key findings from the report in Sydney on Monday 17 August located at St Vincent’s Hospital commencing at 10am.

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