INTRODUCTION

- Opioid Use Disorder (OUD) in Veterans is associated with serious harms including overdose and suicide.
- Only 1/3rd of Veterans receive buprenorphine and methadone treatment, which can prevent these harms.

- Comorbid diagnoses of other Substance Use Disorders (SUDs) can impact clinicians’ willingness to use these medications.
- Little is known about comorbid SUDs among Veterans with OUD and their impact on treatment.

- This study aims to 1) compare patients with OUD only and those with other comorbid SUDs and 2) examine the association between comorbid SUDs and receipt of medication and other outpatient treatment for OUD.

RESULTS

- 65,741 Veterans with OUD received care from the Veterans Health Administration (VHA) in Fiscal Year 2017.

Analyses

Aim 1: Compare patient characteristics among those diagnosed with OUD only with those diagnosed with one other SUD and with multiple SUDs.

Aim 2: Examine relationship between comorbid SUDs and receipt of buprenorphine, methadone, and SUD clinic treatment during one year follow-up, adjusting for demographics and clinical conditions.

CONCLUSIONS

- The majority of Veterans with OUD have at least one comorbid SUD; many have multiple SUDs.
- Despite higher likelihood of a SUD clinic visit, having an additional SUD is associated with lower likelihood of buprenorphine treatment.
- Additional efforts are needed to understand barriers to medication treatment for the majority of Veterans with OUD who have comorbid SUDs.
- Comorbid SUDs must be addressed within efforts to expand medication treatment access for OUD.