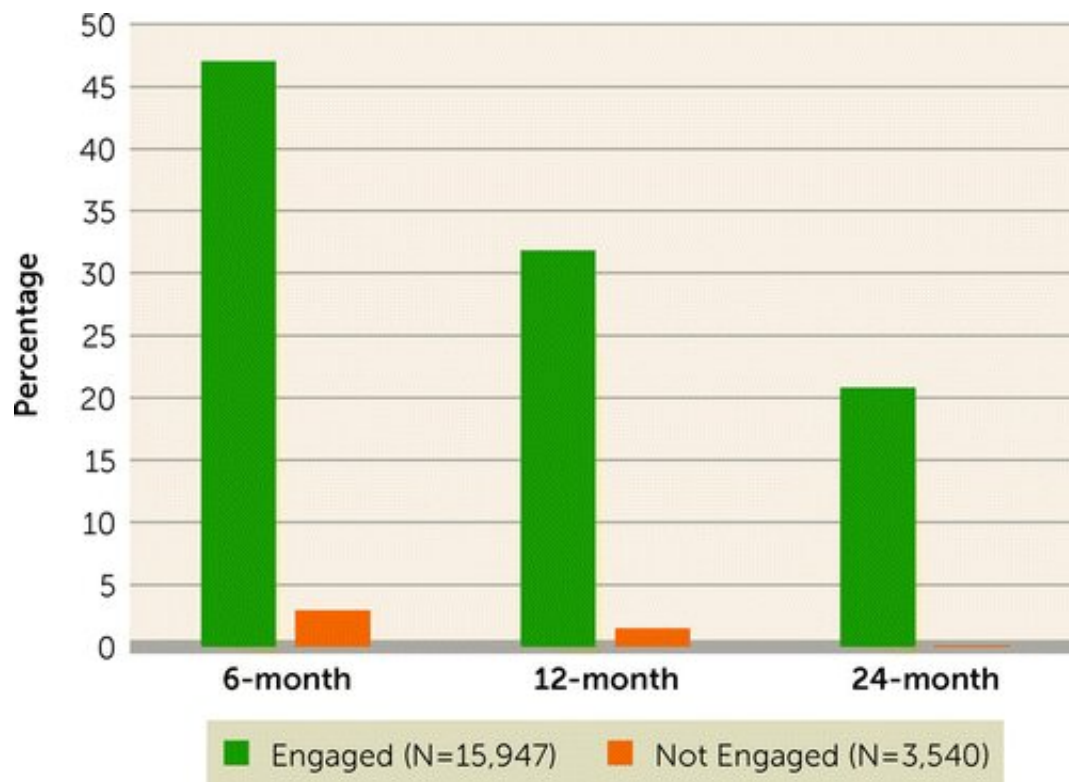


Outpatient visits are critical to success of treating opioid-use disorder, researchers find

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Retention rates at 6, 12, and 24 months among patients initiating buprenorphine, by engagement. (Engagement = two additional in-person outpatient clinical visits within 34 days of the intake visit.). Credit: *American Journal of Psychiatry* (2022). DOI: 10.1176/appi.ajp.20220456

People with opioid-use disorder who enter treatment are at risk for relapse, overdose or death if they engage in less than two outpatient

visits in their first month of care, according to a study coauthored by Rutgers researchers.

The study, published in the *American Journal of Psychiatry*, examined the likelihood of [patients](#) continuing treatment for opioid-use disorder during their first month in care based on how often they engaged in outpatient visits or other professional services.

"Engagement in outpatient visits or professional services appears to be a necessary condition for adequate care retention," said study coauthor Stephen Crystal, the director of the Center for Health Services Research at the Rutgers Institute for Health, Health Care Policy and Aging Research and Distinguished Research Professor at the Rutgers School of Social Work. "Monitoring this engagement may help identify and address barriers and disparities in outcomes."

Starting an individual on medication for opioid-use disorder and then retaining them in professional care are two evidence-based interventions for reducing overdoses, according to the National Academies of Sciences, Engineering and Medicine. Researchers said patients participating in outpatient visits during treatment can be a measure of success for care retention, but there is a need to assess how this measure applies specifically to individuals with opioid-use disorder who are receiving medication, such as buprenorphine, as part of treatment.

Using data reported between 2011 and 2019 from a multisite buprenorphine clinic throughout eight states, researchers examined the relationship between participating in outpatient visits and care retention in nearly 20,000 individuals. The patients were predominately male and non-Hispanic, which is broadly representative of people nationwide who are using buprenorphine for opioid use disorder treatment, according to prior research from study authors.

Researchers found that nearly half of patients who participated in multiple outpatient visits in their first month of care remained in treatment for a minimum of six months, whereas 2.9 percent of patients who didn't participate in multiple visits remained in treatment after six months.

"This finding is critically meaningful and could guide intervention development to prioritize stabilization of high-risk patients early in treatment," said Arthur Robin Williams, lead author of the study and an assistant professor at Columbia University Department of Psychiatry. "Without early engagement, the great majority of patients will be lost to relapse and possible death."

The study's findings align with the priorities of organizations such as the Substance Abuse and Mental Health Services Administration, which support care coordination and peer navigation services early in treatment to help stabilize patients who otherwise might be lost to follow up.

"Many of these services are not currently reimbursable by payers, so insurance plans need to create bundled rates to be more innovative," Williams said.

More research is needed to identify patients at the greatest risk for overdose, said the researchers, adding that further research can demonstrate the importance of milestones in opioid-use [treatment](#) to develop care-performance measures.

More information: Arthur Robin Williams et al, Performance Measurement for Opioid Use Disorder Medication Treatment and Care Retention, *American Journal of Psychiatry* (2022). [DOI: 10.1176/appi.ajp.20220456](#)

Provided by Rutgers University

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