

Increased use of telehealth services, medications during pandemic associated with reduced risk for fatal overdose

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The expanded availability of opioid use disorder-related telehealth services and medications during the COVID-19 pandemic was associated

with a lowered likelihood of fatal drug overdose among Medicare beneficiaries, according to a new study.

"The results of this study add to the growing research documenting the benefits of expanding the use of telehealth services for people with [opioid](#) use disorder, as well as the need to improve retention and access to medication treatment for opioid use disorder," said lead author Christopher M. Jones, PharmD, DrPH, director of the National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. "The findings from this collaborative study also highlight the importance of working across agencies to identify successful strategies to address and get ahead of the constantly evolving [overdose](#) crisis."

Published today in *JAMA Psychiatry*, this study is a collaborative research effort led by researchers at the National Center for Injury Prevention and Control, a part of CDC; the Office of the Administrator and the Center for Clinical Standards and Quality, both part of the Centers for Medicare & Medicaid Services (CMS); and the National Institute on Drug Abuse, a part of the National Institutes of Health.

"CMS is committed to ensuring that the beneficiaries we serve can access the high-quality behavioral health services they need," said senior author Dr. Shari Ling, M.D., deputy chief medical officer at CMS. "This study shows that many beneficiaries were able to utilize opioid use disorder-related telehealth services during the pandemic, but we need to continue our efforts to broaden the use of telehealth, particularly in underserved communities."

In this national study, researchers analyzed data among two cohorts of Medicare beneficiaries to explore receipt of opioid use disorder-related telehealth services, receipt of medications for opioid use disorder, and fatal overdoses before and during the COVID-19 pandemic. To do this, they compared data from two cohorts of Medicare beneficiaries across

two time periods.

The first [cohort](#) was constructed with data from September 2018-February 2020 and included 105,162 Medicare beneficiaries with opioid use disorder (the "pre-pandemic cohort"). The second cohort was constructed with data from September 2019-February 2021 and included 70,479 Medicare beneficiaries with opioid use disorder, (the "pandemic" cohort). In addition, the researchers conducted an analysis to examine the demographic and clinical characteristics associated with fatal overdose in the pandemic cohort.

Key findings of this study include:

- Medicare beneficiaries that began a new episode of opioid use disorder-related care during the pandemic and received opioid use disorder-related telehealth services were found to have a 33% lower risk of a fatal drug overdose.
- Medicare beneficiaries who received medications for opioid use disorder from opioid treatment programs and those who received buprenorphine, one of the medications for opioid use disorder, in office-based settings also had reduced odds of a fatal drug overdose of 59% and 38%, respectively.
- Mortality rates (classified as all-cause mortality and drug overdose mortality specifically) were higher in the pandemic cohort compared to the pre-pandemic cohort; however, the percentage of deaths due to drug overdose were similar between the two cohorts.

"At a time when more than 100,000 Americans are now dying annually from a drug overdose, the need to expand equitable access to lifesaving treatment, including medications for opioid use disorder, has never been greater," said Wilson Compton, M.D., deputy director of the National Institute on Drug Abuse and senior author of the study. "Research

continues to indicate that expanded access to telehealth is a safe, effective, and possibly even lifesaving tool for caring for people with opioid use disorder, which may have a longer-term positive impact if continued."

Although the results of this study were able to identify the positive impact opioid use disorder-related telehealth services had on lowering the risk for fatal [drug](#) overdose in the pandemic cohort, the authors note that only 1 in 5 Medicare beneficiaries in the pandemic cohort received OUD-related telehealth services. Similarly, only 1 in 8 beneficiaries in the [pandemic](#) cohort received medications for [opioid use disorder](#). These findings underscore the need for continued expansion of these potentially life-saving interventions across clinical settings.

More information: Christopher M. Jones et al, Association of Receipt of Opioid Use Disorder–Related Telehealth Services and Medications for Opioid Use Disorder With Fatal Drug Overdoses Among Medicare Beneficiaries Before and During the COVID-19 Pandemic, *JAMA Psychiatry* (2023). [DOI: 10.1001/jamapsychiatry.2023.0310](https://doi.org/10.1001/jamapsychiatry.2023.0310)

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