

Survey shows majority of physicians favor allowing telehealth to treat opioid-use disorder

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A survey of more than 1,000 registered physicians who used telehealth services to treat patients with opioid-use disorder during COVID-19



found that an overwhelming majority favor making telehealth a permanent part of their practice.

The findings of the Yale School of Public Health (YSPH) study provide new support for the use of telehealth technology in treating opioid-use disorder. Policymakers currently are debating whether existing regulations allowing for telehealth during the COVID pandemic should be extended temporarily as the pandemic wears on—or made a permanent part of treatment practice options.

"Recent exposure to telehealth due to the COVID-19 pandemic has promoted the perspective among the physicians surveyed that it is a viable and effective treatment option for patients," said the study's lead author Tamara Beetham, MPH, a Ph.D. student in <u>health policy</u> and management at YSPH. "Findings like these could have major implications for the future of telehealth regulation. Continued flexibility would allow more individuals to access life-saving treatment."

A staggering 107,622 people in the U.S. died of <u>drug overdose</u> in 2021, a 15% increase from 2020, according to the U.S. Centers for Disease Control and Prevention. Physicians frequently prescribe buprenorphine to treat opioid-use disorder and reduce the risk of overdose. Patients must regularly follow up with their provider as part of their treatment.

Social distancing and other mandates intended to reduce infections during COVID-19 made it difficult for many individuals to access their medication and participate in the required follow-up visits. To address this challenge, telehealth regulations were loosened, which allowed medical providers to offer their patients virtual appointments.

The Yale study surveyed 1,141 publicly registered physicians who treat opioid-use disorder. The survey asked physicians about their current and retrospective use of telehealth and whether their perceptions of



telehealth effectiveness and policy preferences changed during the COVID pandemic. Many of the physicians surveyed used telehealth for the first time during the early stage of the pandemic, from less than onethird having used telehealth to two-thirds.

Over half of the respondents found telehealth to be more effective than expected compared to only 1 in 6 finding it less effective. Six out of seven physicians were in favor of making temporary telehealth flexibility permanent and over three-quarters of those surveyed said they would like to continue using telehealth after the COVID pandemic, regulations permitting. The researchers cautioned that like all surveys without full participation, the responses may not be representative of all physicians treating opioid use disorder.

YSPH Professor of Public Health (Health Policy) Susan Busch, senior author of the study, said the findings demonstrate a need for more investigation of medical providers' perspectives regarding telehealth flexibility.

"That so many doctors found telehealth to be effective after using it suggests the importance of this innovative method of delivering treatment," said Busch.

Beetham agreed.

"Given the increasingly alarming mortality risk, it is critical to consider the accessibility of evidence-based treatment especially relative to that of the unpredictable, illicitly manufactured opioids that are driving overdose fatalities," Beetham said. "Having a <u>telehealth</u> option may help alleviate barriers to life-saving care."

The study appears in The American Journal of Managed Care.



More information: Physician response to COVID-19–driven telehealth flexibility for opioid use disorder, *The American Journal of Managed Care* (2022). DOI: 10.37765/ajmc.2022.89221

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