

Buprenorphine cuts risk for death after nonfatal, opioid-involved overdose

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Buprenorphine treatment after nonfatal opioid-involved overdose is

associated with significant decline in the risk for opioid-involved overdose death, according to a study published online March 10 in the *American Journal of Preventive Medicine*.

Hillary Samples, Ph.D., from the Rutgers Institute for Health in New Brunswick, New Jersey, and colleagues used national Medicare data to identify 81,616 adult (aged 18 to 64 years) disability beneficiaries who received inpatient or [emergency treatment](#) for nonfatal opioid-involved overdose in 2008 to 2016.

The researchers found that only 6.5 percent of the sample (5,329 patients) had opioid use disorder treatment after the index overdose. Use of buprenorphine (4.6 percent) was associated with a significantly lower risk for opioid-involved overdose death (adjusted hazard ratio, 0.38; 95 percent confidence interval, 0.23 to 0.64). Opioid use disorder-related psychosocial treatment (2,405 patients; 2.9 percent) was, however, not associated with the risk for death (adjusted hazard ratio, 1.18; 95 percent confidence interval, 0.71 to 1.95).

"Within the [health care system](#), we need to expand availability and use of buprenorphine in general medical settings, including emergency departments and telehealth visits," Samples said in a statement.

"Interventions that focus specifically on disadvantaged groups are needed to address disparities in treatment access. This is particularly important for patients with disabilities who potentially face greater barriers to care, like transportation difficulties or scheduling challenges related to individual or caregiver obligations at home and work."

More information: Hillary Samples et al, Buprenorphine After Nonfatal Opioid Overdose: Reduced Mortality Risk in Medicare Disability Beneficiaries, *American Journal of Preventive Medicine* (2023). [DOI: 10.1016/j.amepre.2023.01.037](https://doi.org/10.1016/j.amepre.2023.01.037)

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