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Introduction:

The opioid crisis continues to be a growing public health concern across the United States. Americans struggling with Opioid Use Disorder (OUD) can seek different resources to help curtail their addiction. These include abstinence -based programs such as Narcotics Anonymous and Specialty treatment facilities including methadone and suboxone clinics. It has been shown that increased availability of drugs to treat opioid use addiction, such as methadone and buprenorphine, is linked to a lower likelihood of relapse and fatal overdoses. Therefore, medication assisted treatment (MAT) is a valuable asset because it combines behavioral therapy and medications to treat opioid use disorder. Despite the potential benefit of primary care MATs, there are factors leading to low access and utilization of these programs. They include limited number of trained prescribers, policy barriers such as insurance coverage, and both and provider stigma associated with MAT. Demographics from the MAT program of Project HOME Health Services of Philadelphia were reviewed for this project.

Objective:

To conduct a retrospective review of MAT program participant demographics at Project HOME Health Services in North Philadelphia. The goal is to identify the key demographics of patients enrolled in the program from July 2017- July 2018.

Methods:

A review of an Electronic Medical Record database from a population of 108 patients enrolled in the MAT program at Project HOME Health Services from July 2017-2018. The planned analysis is demographic descriptive statistics.

Results:

The age range of patients was 27-71. Of the 108 patients, 39 were considered active participants in the program (21 male, 18 female). Twenty-five percent of the patient population reported their homeless status as shelter, street, transitional, supportive housing, or formerly homeless. Sixty-nine patients received a hepatitis C virus antibody test, with 26 reporting results suggesting of a possible Hepatitis C, 8 positive, and 20 with negative testing. In the total population, there were 39% reported hypertension, 54% reported depression, and 94% reported current tobacco use.

Conclusion:

The reported findings describe the demographics of the MAT participants of Project Home of Philadelphia. This data will be utilized in conjunction with other research that assesses adherence to MAT programs and quality of life. Future areas for research involve statistical comparisons to determine factors leading to patient retention in the program. Another project would be to review the patients' urine toxicology screens for additional information, including the number of months in the program until only the prescribed drugs are in the urine and how many drug screens were positive for fentanyl. Finally, further research may determine specific additional primary care needs of the participants.