**Demonstrating the benefits and impact of bivudal / long acting buprenorphine (LAB)**

Just for heroin users and for financial years from 2020/2021 to 2023/24 (just annual numbers)

**Overall for LAB in in latest journey**

* Total number in treatment
* Total number and % that have been on a long acting buprenorphine (LAB) script in the last 12 months
* Total number and % that have been on a LAB script in their latest journey
* Successful completion number and rates for those that had LAB in latest journey
* Successful completion number and rates for those that didn’t have LAB in their latest journey
* 6 and 12 month representation rates for those that had LAB in latest journey
* 6 and 12 month representation rates for those that didn’t have LAB in their latest journey
* Treatment effectiveness number and rates for those that had LAB in latest journey
* Treatment and effectiveness number and rates for those that didn’t have LAB in their latest journey
* As a sub set of the above the opiate abstinence rates for those that had a LAB script in th
* 12 week retention rate for new presentations that started on LAB script (or had a LAB script in the first 12 weeks?)
* 12 week retention rate for new presentation that didn’t have LAB in first 12 weeks
* Deaths during treatment number and rates for those that had LAB in latest journey
* Deaths during treatment number and rates for those that didn’t LAB in their latest journey
* Number and rate of those that had prison treatment rates for those that had LAB in latest journey (look at whether people show up in prison treatment during the year – using prison start date so people not counted in more than one financial year)
* Number and rate of those that had prison treatment rates for those that didn’t have LAB in latest journey (look at whether people show up in prison treatment during the year – using prison start date so people not counted in more than one financial year)

**Overall for LAB in last 12 months**

* Can the same outputs as above be run but this time where there was a record of LAB in the last 12 months – before we proceed with this though can I suggest we wait and see what the outputs for the latest journey analysis are and also if there is much difference between the latest journey and last 12 month number

**Complexity**

* Can the analysis above then be rerun for complexity of opiate users (fine to use the old approach with the scoring / code as previously in the rehab work if that that is easier or also to update or come up with a new method). Again can I suggest waiting to see what the above outputs look like before proceeding.

**Notes:**

Prioritise 6 month re-pres and in journey rather than last 12 months, as more easily available

**Results:**

Output:

[Depot buprenorphine SR output v5.xlsx](https://healthsharedservice.sharepoint.com/:x:/r/sites/PPMEATSR202413253/Shared%20Documents/Long%20acting%20buprenorphine/Depot%20buprenorphine%20SR%20output%20v5.xlsx?d=w60eb2b5a5c594ab68c37733718c4d916&csf=1&web=1&e=jGR2P9)

Summary:

* LAB numbers increasing, although increase slowed in 2023-24
* Really strong results for successful completions, although not a controlled experiment
* Good results for deaths too, although small numbers
* Need to bear in mind the non-LAB cohort includes all other heroin users, even if not prescribed anything, who might disproportionately drop out or die in treatment. Might be better compared against those prescribed non-depot buprenorphine.
* Good results for effective treatment, although not many new presentations and because SIR data is limited most of those are in “LAB at start” category
* Worse than non-LAB for SCNR, i.e. a LAB successful completion is more likely to re-present to treatment, although small numbers
  + Also higher re-presenting rate could be positive, e.g. more likely to be alive, more likely to regard treatment as worth trying again
* Better treatment progress measure results
* Better opiate abstinence rate