

Opioid Agonist Therapy Doses Amongst a Sample of People Who Inject Drugs

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Introduction

Opioid Agonist Therapy (OAT) provides the most effective response for people experiencing problems associated with opioid dependence. ¹

National guidelines recommend dose ranges and takeaway doses.

Guidelines were last updated in 2014. 1

State and Territory policies vary considerably. 1

There exists limited data on dosing patterns; understanding patterns and variations in demographics can better inform guidelines and improve equity in access.



Aim: Analyse pharmacotherapy dose characteristics and takeaway dose access among participants recruited through the 2025 Illicit Drug Reporting System (IDRS).



Method

Data Source: Illicit Drug Reporting System (IDRS) 2025.

Participants: 865 people over 18 years of age who regularly inject drugs, recruited from capital cities in each state and territory.

Analysis:

- Descriptive statistics to examine dose among those who reported methadone, oral buprenorphine and LAIB preparations.
- Linear regression to assess the association between methadone dose, age, gender, and state/territory of residence.
- Logistic regression to assess the association between methadone takeaway dose, age, gender and state/territory of residence.

Pharmacotherapy type, dose characteristics and takeaway doses

OAT type	n	Last dose (mean mg)	SD	Last dose (median mg)	IQR
Methadone	162	66.5	36.4	60	40-90
Buprenorphine	12	18.7	11.7	16	8-32
Buprenorphine - naloxone	34	19.1	12.8	16	10-24
LAIB weekly	6	40.3	43.7	27	21-32
LAIB monthy	57	116.6	64.7	96	87-150

Table 1: Last dosage by OAT type, among IDRS participants, 2025

Association between last methadone dose with age, gender and state/territory

	Last methadone dose - mean (mg)	Coefficient (95% CI)	p			
Age						
<30	96.7	Ref	-			
30-39	76.3	-29.87 (-79.94-20.21)	0.240			
40-49	66.6	-39.01 (-86.07-8.05)	0.104			
50+	64.1	-39.24 (-85.74-7.25)	0.097			
Gender						
Female	62.2	Ref	-			
Male	68.4	6.39 (-6.06-18.84)	0.312			
State / territory						
NSW	73.7	Ref	-			
ACT	65.2	-10.87 (-28.40-6.67)	0.223			
VIC	72.1	-1.36 (-16.82-14.10)	0.863			
TAS	82.5	11.56 (-40.24-63.36)	0.660			
SA	61.9	-8.65 (-33.49-16.19)	0.493			
WA	45.2	-26.16 (-45.666.66)	0.009			
QLD	63.2	-10.17 (-36.92-16.57)	0.453			

Table 2: Association between last methadone dose and selected variables

Association between methadone takeaway dose receipt with age, gender and state/territory

	% receiving takeaway methadone dose	Adjusted OR (95% CI)	p			
Age						
<30	50	Ref	-			
30-39	77.78	2.96 (0.26-33.25)	0.379			
40-49	68.49	2.17 (0.25-18.88)	0.483			
50+	82.08	6.18 (0.70, 54.43)	0.101			
Gender						
Female	76.12	Ref	-			
Male	76.12	0.72 (0.32-1.61)	0.418			
State / territory						
NSW	76.19	Ref	-			
ACT	70.97	0.80 (0.27-2.35)	0.68			
VIC	90.2	3.44 (1.04-11.39)	0.043			
TAS	16.67	0.05 (0.01-0.30)	0.001			
SA	92.31	2.85 (0.32-25.64)	0.350			
WA	64.29	0.47 (0.16-1.41)	0.18			
QLD	87.5	2.37 (0.56-10.00)	0.239			

Table 3: Association between last takeaway dose and selected variables



There is currently significant variation in OAT prescribing and in takeaway doses between jurisdictions, rather than patient characteristics.



Conclusion

- Variation between jurisdictions has important implications for equity in access.
- Findings warrant further investigation.
- Reinforce the need for updated national guidelines.





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Thank you

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