Access to Medications for Opioid Use Disorder Within the Continental U.S.: A Cross-Sectional Study

Research Objective

How is a community's ability to respond to natural disasters and infectious disease outbreaks related to their current access to MOUD?

Methods

Cross-sectional geospatial analysis—cool maps! Calculated access to MOUD for little sections called zip code tabulation areas (ZCTA) across the U.S. Compared rural, suburban, and urban areas.

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- Various factors (the area's income level, how many people are below poverty, unemployed, or have no high school diploma)
- Household composition (how many people are aged 65 or older, aged 17 or younger, and number of single-parent households)
- Language (demographics and language preferences)
- Housing type and transportation (the number of multi-unit structures, mobile homes, crowding, number of homes with no vehicle, and number of group quarters such as worker dormitories, skilled nursing facilities, or college dorms)

Access to MOUD

Drive time in minutes from the population-weighted center of the zip code tabulation areas to the zip code tabulation area of the nearest treatment location for buprenorphine, methadone, extended-release naltrexone, and dialysis

Total number of treatment locations within 30-minute drive time

Findings

Urban ZCTAs: Geographic access may not be as important a barrier to MOUD treatment in these communities.

Suburban ZCTAs: Those with fewer resources or households with more children, seniors, or individuals with medical concerns had less geographic access.

Rural ZCTAs: Factors did not matter because geographic access was uniformly poor in these areas.

TAKEAWAYS

Some communities have less geographic access to methadone, buprenorphine, and extended-release naltrexone, which should make us question current disaster preparedness. Must develop proactive measures to increase services within these communities in the event of a disaster and not rely on coordination of existing opioid treatment programs.

Sources: Joudrey, P. J., Kolak, M., Lin, Q., Paykin, S., Anguiano, V., & Wang, E. A. (2021). Community social vulnerability and access to medications for opioid use disorder within the continental U.S.: A cross-sectional study. *medRxiv*