



PRESIDENZA DEL CONSIGLIO DEI MINISTRI
Dipartimento Politiche Antidroga



REGIONE VENETO
ULSS 20
VERONA



Regione del Veneto - Azienda ULSS 20
Dipartimento delle Dipendenze

MPF professional and OUTCOME, key tools for the clinical services and research

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Introduction

- Mfp (Multifunctional platform) is an application software for the clinical and operational management of public drug addiction services;
- Currently following its implementation it is possible:
 - to evaluate the days free from drug for each patient
 - to get an extraction (xls file) of the treatment outcome for either a single service or an entire department

Principal aims:

1. What has been obtained through the flow of the *mfp (5.0) OUTCOME* – Output single record Extractor?
2. What is expected from the flow of the *mfp professional OUTCOME* – Output single record Extractor (vers 2.0)?

First question:

What has been obtained through the flow of the *mfp (5.0) OUTCOME* – Output single record Exctractor?

Multifunctional Platform - History and criteria

2000

2014

.....



CRITERIA:

- *Useful*
- *Easy*
- *Appealing*

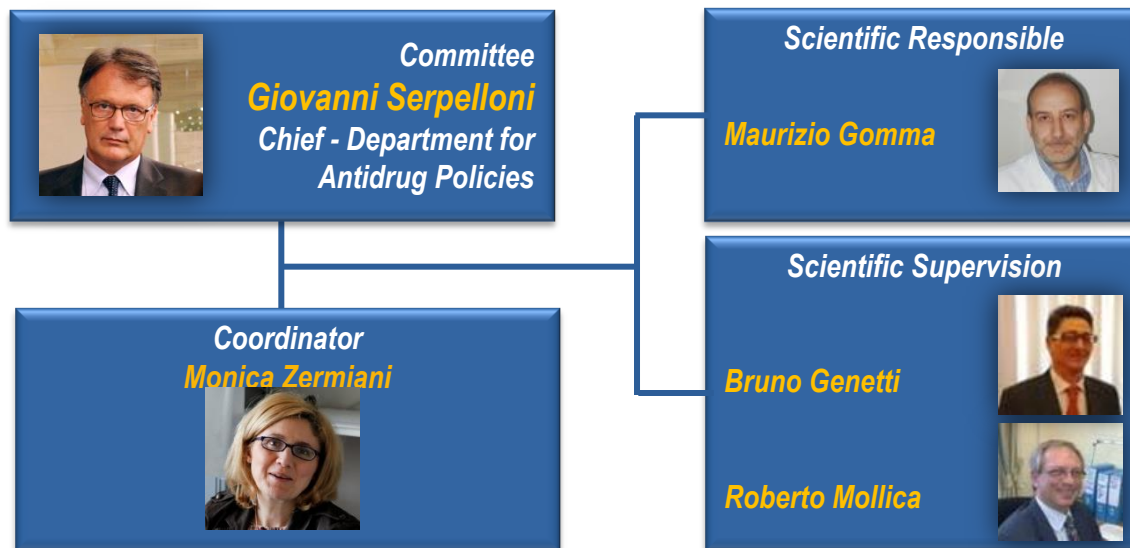
Esportazioni files

Esportazione files CON Consultori Lombardia
Esportazione files AMB SMI Lombardia
Esportazione files AMB Lombardia
Esportazione SIND versione 1.8 XML
Esportazione OUTCOME XML
Esportazione file FILEF Lombardia
Esportazione file FILEF Umbria
Esportazione file FILEF Veneto
Esportazione file FILEDDF 'fase 3' Veneto
Esportazione file SPS (art. 50) Veneto

OUTCOME & NET OUTCOME Project



Working group –Outcome NETWORK



DRUG ADDICTION DEPARTMENTS

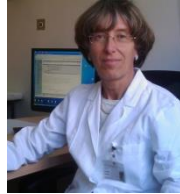


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OUTCOME Projects – Objectives

- **Evaluate the effectiveness of different type of pharmacological treatment currently available to the opiate users in relation with the administered intervention**
- **Develop core methodological and standard procedures for studying the addiction treatment process and follow-up the outcome in natural field setting**
- **Promote the importance of a proper evaluation procedure**

OUTCOME's Indicator

- *Abstinence from primary drug*
- *Abstinence from secondary drug*
- Well- being (psychological and health status)
- Quality of life
- Social functioning (work, house, illegal status and social relation)
- Less or no risks of death due to overdose or other reason linked with the drug addiction
- Decrease or no behaviours at risks for infection diseases

7 Regions, 31 Addiction Departments

11,627 subjects in 2012 , 8.700 in 2011, 8.500 in 2010, 10.000 in 2009 in pharmacological treatment (methadone and buprenorphine) for heroin dependence

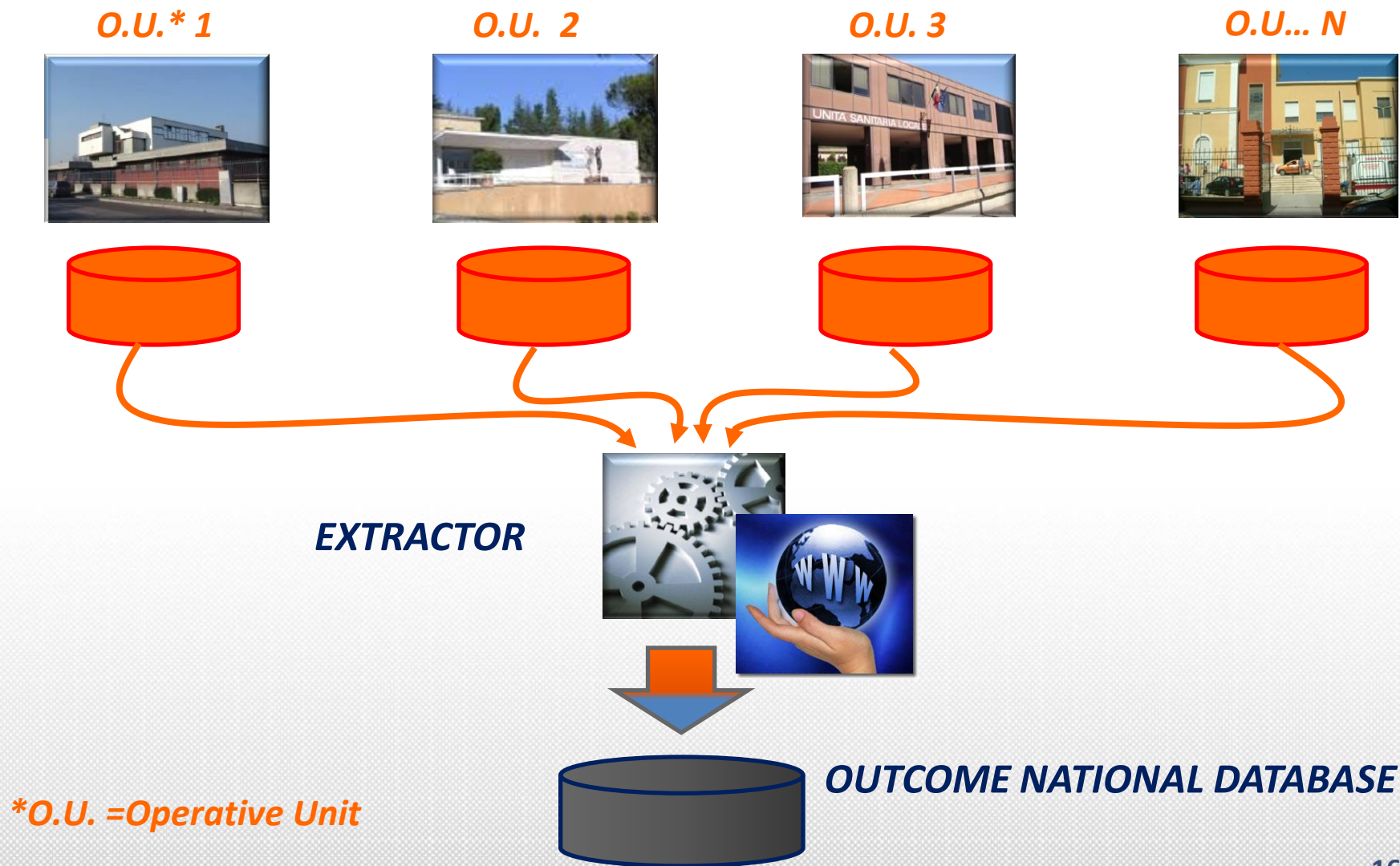


Outcome

References:

Report to Italian Parliament in the years 2009-2013
APA, Philadelphia, 2012
Journal Subst Abuse Treat. 2013 Aug;45(2):190-5

Multifunctional platform – Outcome Exctractor





Principal Outcome Indicator: drug free treatment days

3 principal categories were outlined for the drug free treatment days indicator:

- No Responders: up to 30% “Drug free” days
- Low Responders: from 30% to 60% “Drug free” days
- Responders: Over 60% “Drug free” days

NETOUTCOME 2012 – *Results 2012 (1)*

Subjects for pharmacological treatment, gender and outcome

	No Responder		Low Responder		Responder		Total	
	N	% _c	N	% _c	N	% _c	N	% _c
Methadone								
Male	1.040	83,1	779	80,6	5.337	82,3	7.156	82,2
Female	212	16,9	187	19,4	1.150	17,7	1.549	17,8
Total (% _R)	1.252	14,4	966	11,1	6.487	74,5	8.705	100,0
Buprenorphine								
Male	154	84,2	164	88,6	2.250	88,1	2.568	87,9
Female	29	15,8	21	11,4	304	11,9	354	12,1
Total (% _R)	183	6,3	185	6,3	2.554	87,4	2.922	100,0
Total								
Male	1.194	83,2	943	81,9	7.587	83,9	9.724	83,6
Female	241	16,8	208	18,1	1.454	16,1	1.903	16,4
Total (% _R)	1.435	12,3	1.151	9,9	9.041	77,8	11.627	100,0

NETOUTCOME 2012 – *Results 2012 (2)*

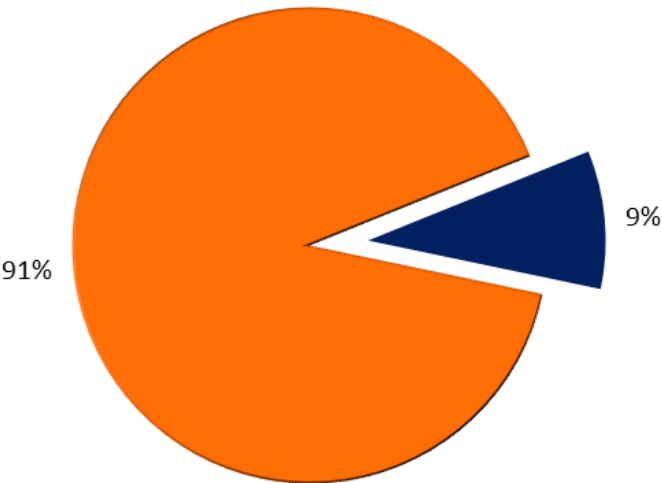
Subjects for pharmacological treatment and age

	No Responder	Low Responder	Responder
Methadone			
Average	37,3	37,4	39,8
Min	17,0	15,0	16,0
Max	63,0	63,0	70,0
Dev. STD	9,0	9,2	9,0
Buprenorphine			
Average	33,6	34,5	38,1
Min	19,0	18,0	16,0
Max	57,0	55,0	69,0
Dev. STD	8,7	9,0	8,9

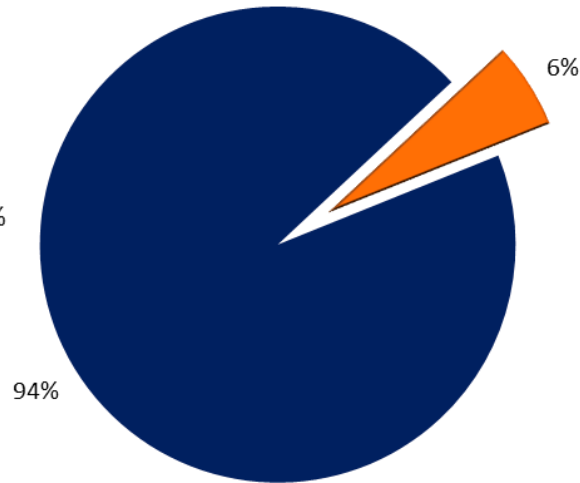
NETOUTCOME 2012 – Results 2012 (3)

Percentage of heroin drug free users

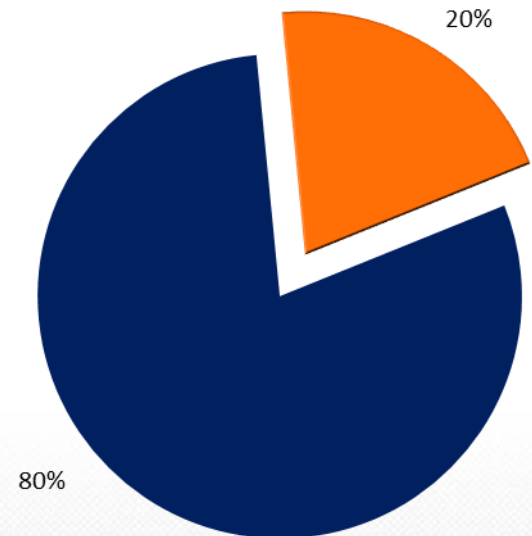
No Responders



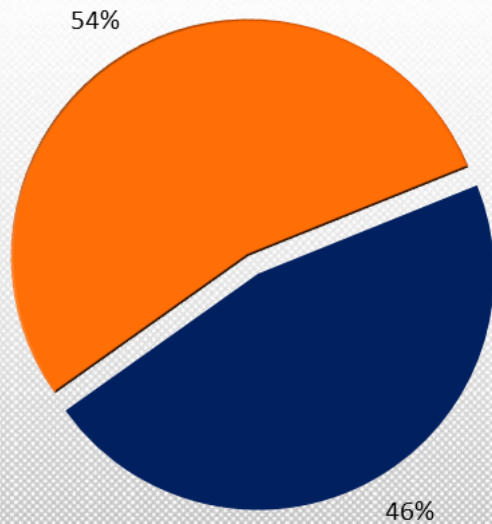
Responders



Total



Low Responders



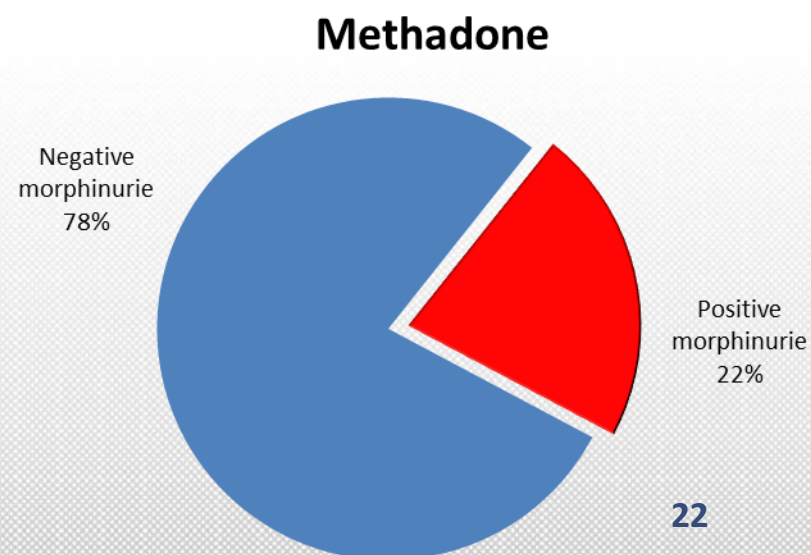
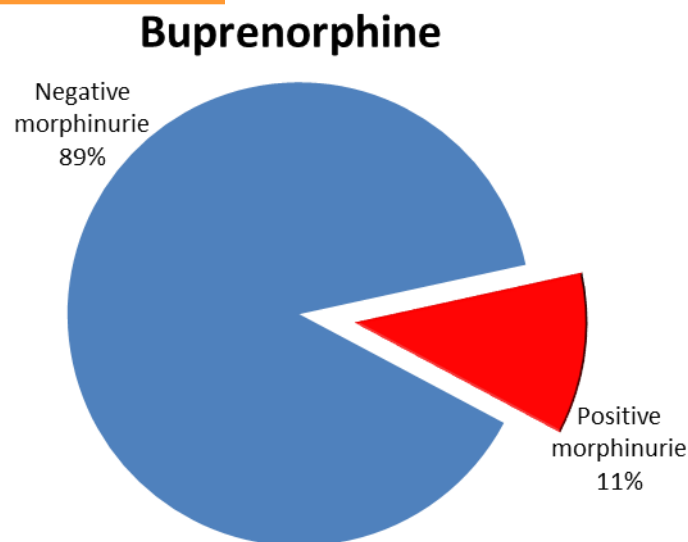
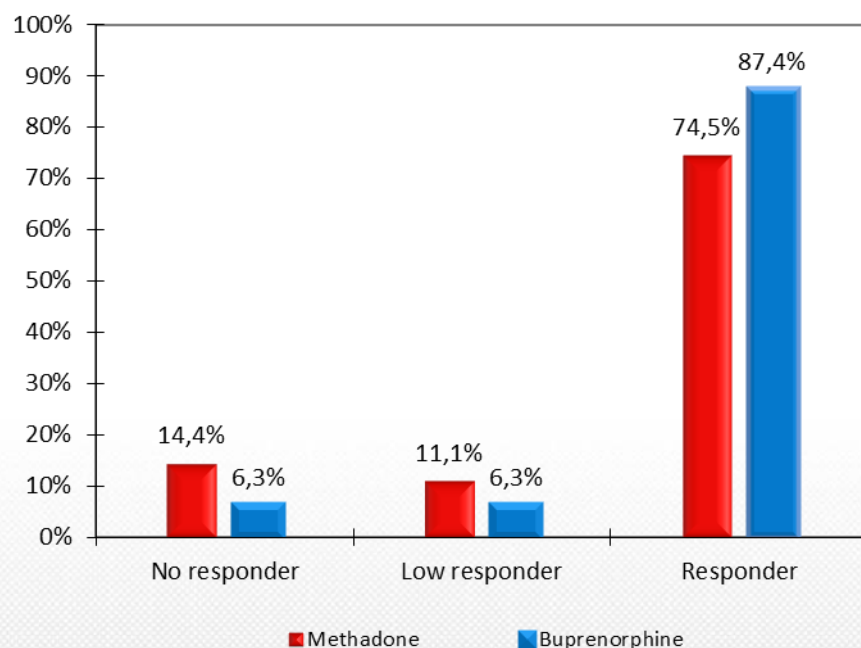
■ opiod free days ■ no opiod free days

Outcome indicator: drug free treatment days

- No Responders: up to 30% "Drug free" days
- Low Responders: from 30% to 60% "Drug free" days
- Responders: Over 60% "Drug free" days

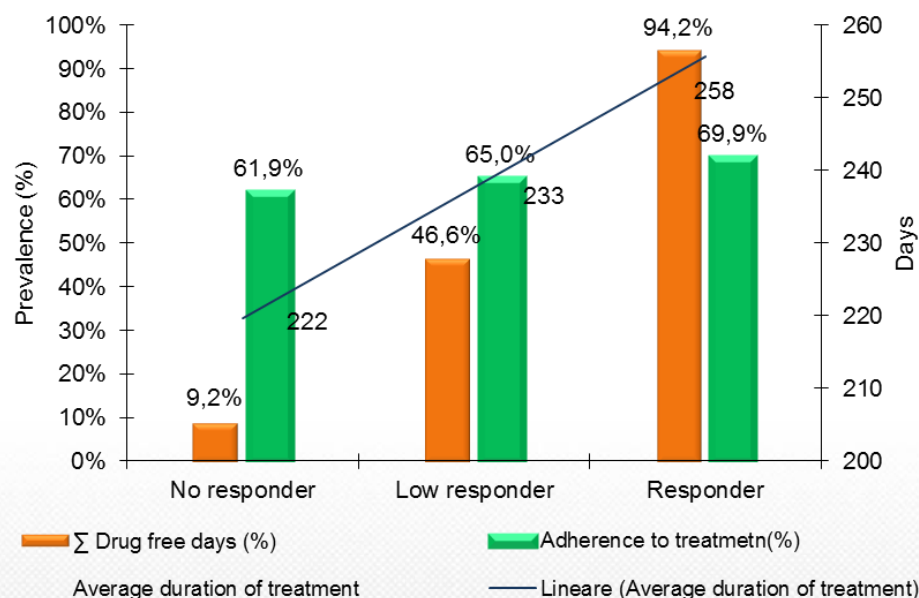
Main Results – Results 2012 (4)

Subject according type of treatment response and pharmacological treatment (%)

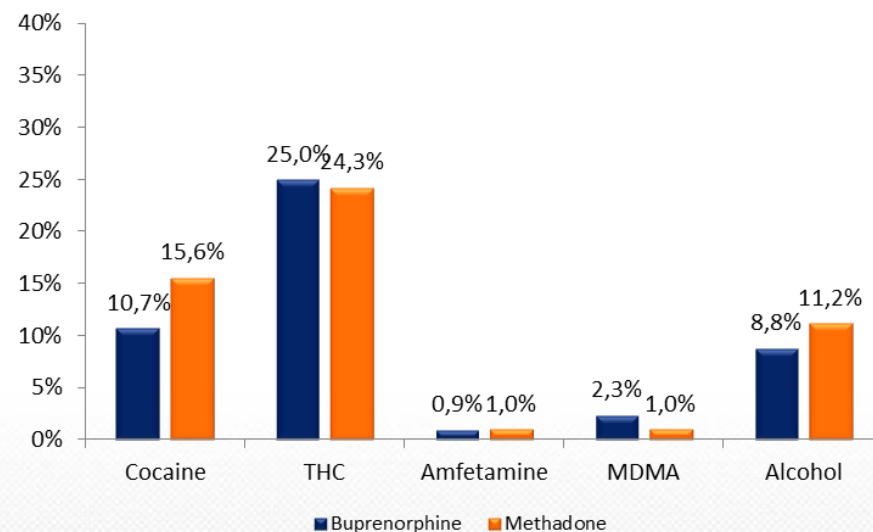


Main results – Results 2012 (5)

Average duration of treatment, percentage of people with negative tests and adherence to treatment

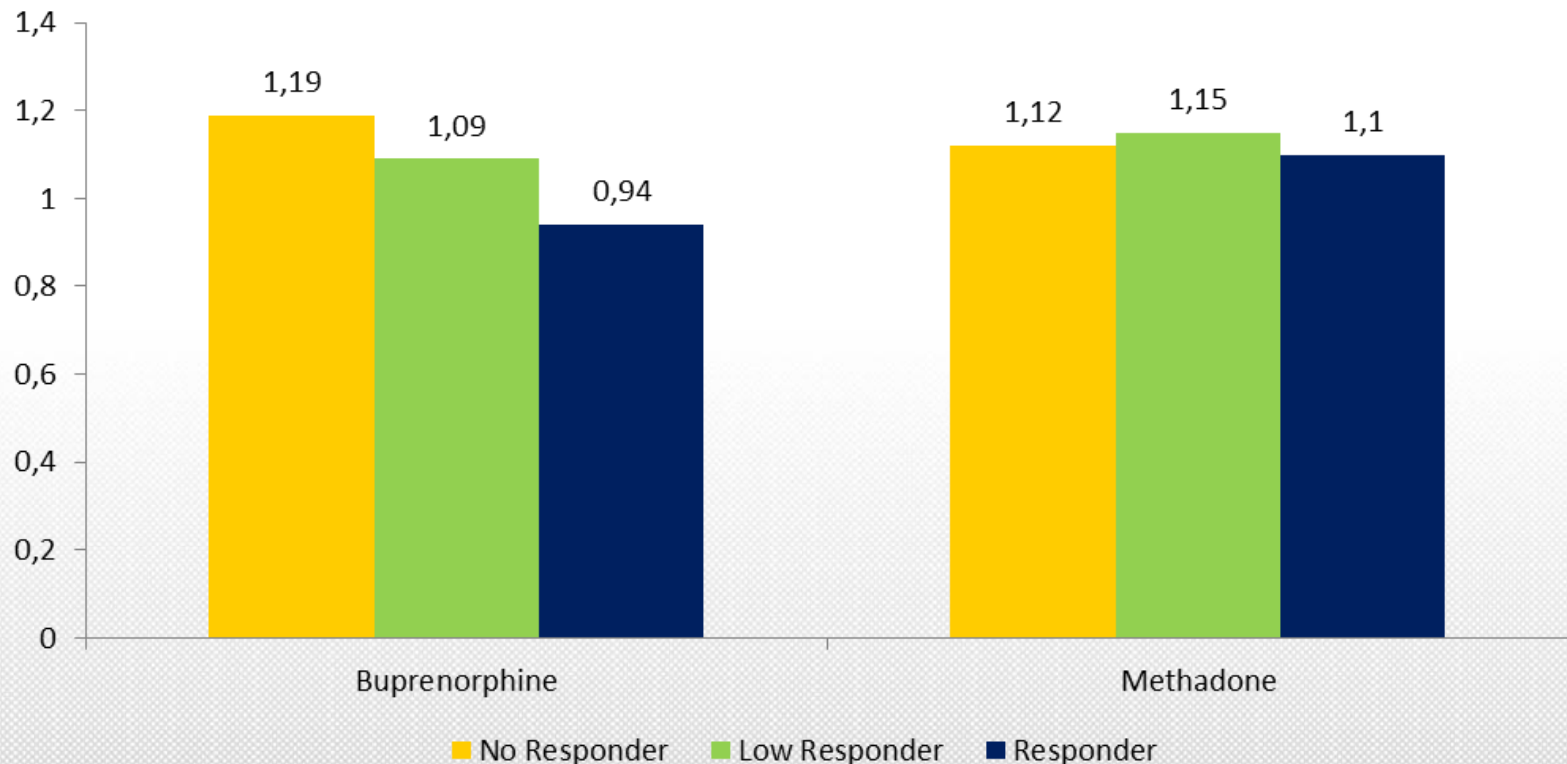


Use of other substances during the “heroin” free period (%)



Main results – Outcome 2012

Rate of services provided on number of treatment days according to pharmacological treatment and response



*Main results – **Hystorical Data***

Number of subjects per treatment per year

	Buprenorphine		Methadone		Total	
	N	% _R	N	% _R	N	% _R
2010	2.257	27,7	5.888	72,3	8.145	100
2011	2.331	26,7	6.392	73,3	8.723	100
2012	2.922	25,1	8.705	74,9	11.627	100

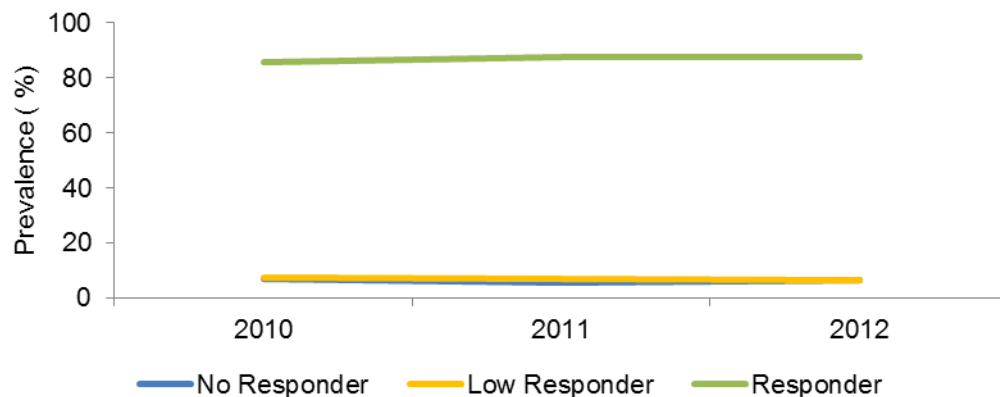
Outcome: Hystorical Data

Indicators according to pharmacological therapy and year

	Buprenorphine			Methadone		
	2010	2011	2012	2010	2011	2012
Number of opiod urine test (mean)	0,39	0,42	0,63	0,64	0,66	0,66
Dose (mean)	8,3	8,4	7,8	51,5	55,0	50,8
Numbers of days in treatment (mean)	240,5	240,0	242,0	248,4	241,0	254,0
Treatment Adherence (%)	62,4	65,3	67,6	71,3	73,0	68,7
Controls Adherence (%)	87,3	85,5	83,3	85,1	81,7	82,1

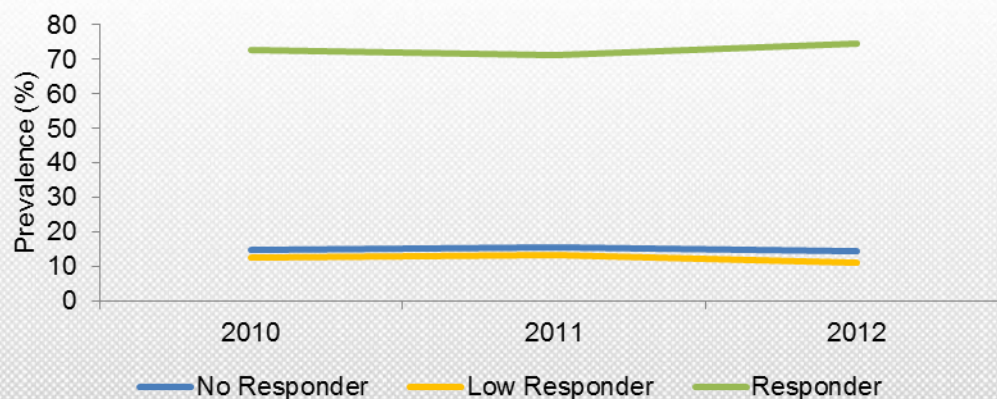
Main results – Trends Outcome (three years period)

Buprenorphine



Subject according type of treatment response in the year 2010, 2011 and 2012 (%)

Methadone



Second question:

2. What is expected from the flow of the *mfp professional OUTCOME* – Output single record Exctractor (vers 2.0)?

First step

1) Improve and monitor the quality of the collected data

A summary table is issued where it is possible to get an overview of the therapies administered as well as it allows a periodic monitoring (quarterly, every six months etc) throughout the treatment period

Methadone/Buprenorphine	N	% _C	Min.	Max	Mean	Median	Dev.std
Admission Date							
Number of days in treatment							
Number of days in treatment in the previous years of observed year's treatment							
Dose (mg)							
Number of drug test in the observed period							
Average number of drug test for week							
Number of drug test in the observed period without results							

Second Step

2) Identify a «cluster» of indicators to stratify the patients according to the severity of illness

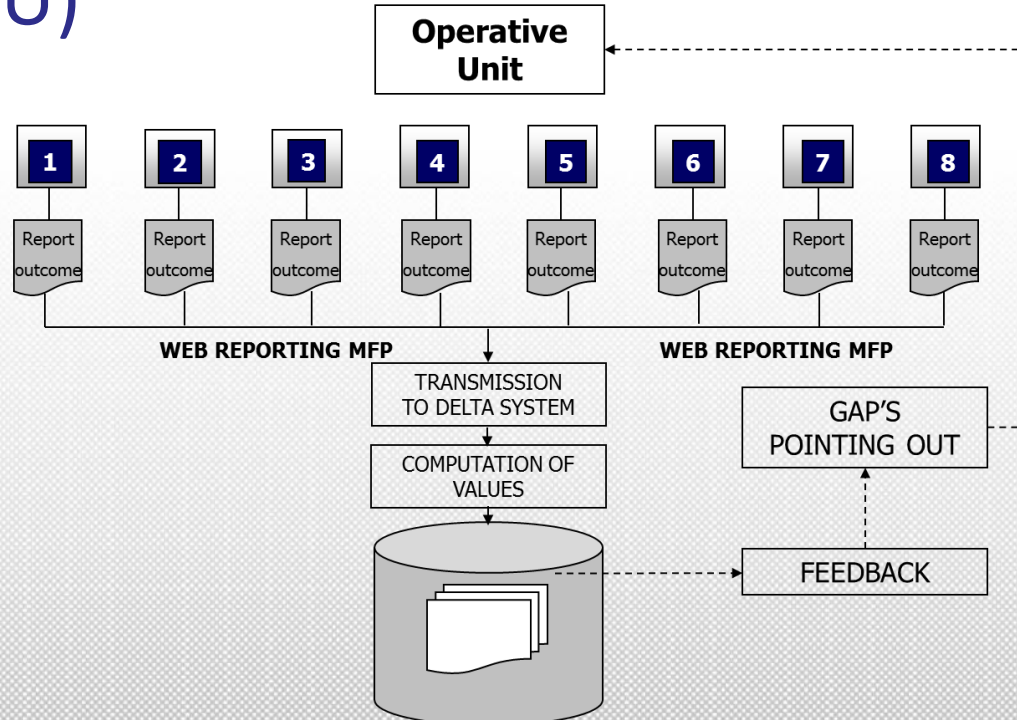
Selection and validation of a sample of indicators based on data already available on the mfp platform

Proposal: positiviness to HCV/HIV marker, psychiatric diseaseas, and imprisonment

Third Step

3) Improve the effectiveness of Delta-System

Through an in depth analyses of the variability among some indicators, i.e. the treatment duration and average doses scheme per Operative Unit (OU)



Fourth Step

4) Improve the rate of services provided on number of treatment days

Harmonise the clinical treatment scheme used by number of personnel involved in the OU

Analyse the outcome of the therapy provided in light of the specific treatment administered

Thanks to:

- *Dipartimento Politiche Antidroga – Presidenza del Consiglio dei Ministri*
- *National Institute on Drug Abuse (NIDA)*
- *Osservatorio Italiano Politiche Antidroga*
- *Operative Unities: Dipartimento Dipendenze Brescia, Dipartimento Dipendenze Varese, Dipartimento Dipendenze Valcamonica, Dipartimento Dipendenze Bergamo, Dipartimento Dipendenze Lodi, Dipartimento Dipendenze Como; Dipartimento Dipendenze Pordenone; ULSS 6, Regione Veneto; ULSS 7, Regione Veneto; ULSS 8, Regione Veneto; ULSS 9, Regione Veneto; ULSS 13, Regione Veneto; ULSS 14, Regione Veneto; ULSS 15, Regione Veneto; ULSS 17, Regione Veneto, ULSS 18, Regione Veneto; ULSS 20, Regione Veneto; ULSS 21, Regione Veneto, Dipartimento Dipendenze Savona, Dipartimento Dipendenze Imperia, Dipartimento Dipendenze Genova, Dipartimento Dipendenze Foligno, Dipartimento Dipendenze Perugia, Dipartimento Dipendenze Terni, Dipartimento Dipendenze Macerata, Dipartimento Dipendenze Enna, Dipartimento Dipendenze Ragusa, Dipartimento Dipendenze Messina, Dipartimento Dipendenze Agrigento, Dipartimento Dipendenze Palermo*

