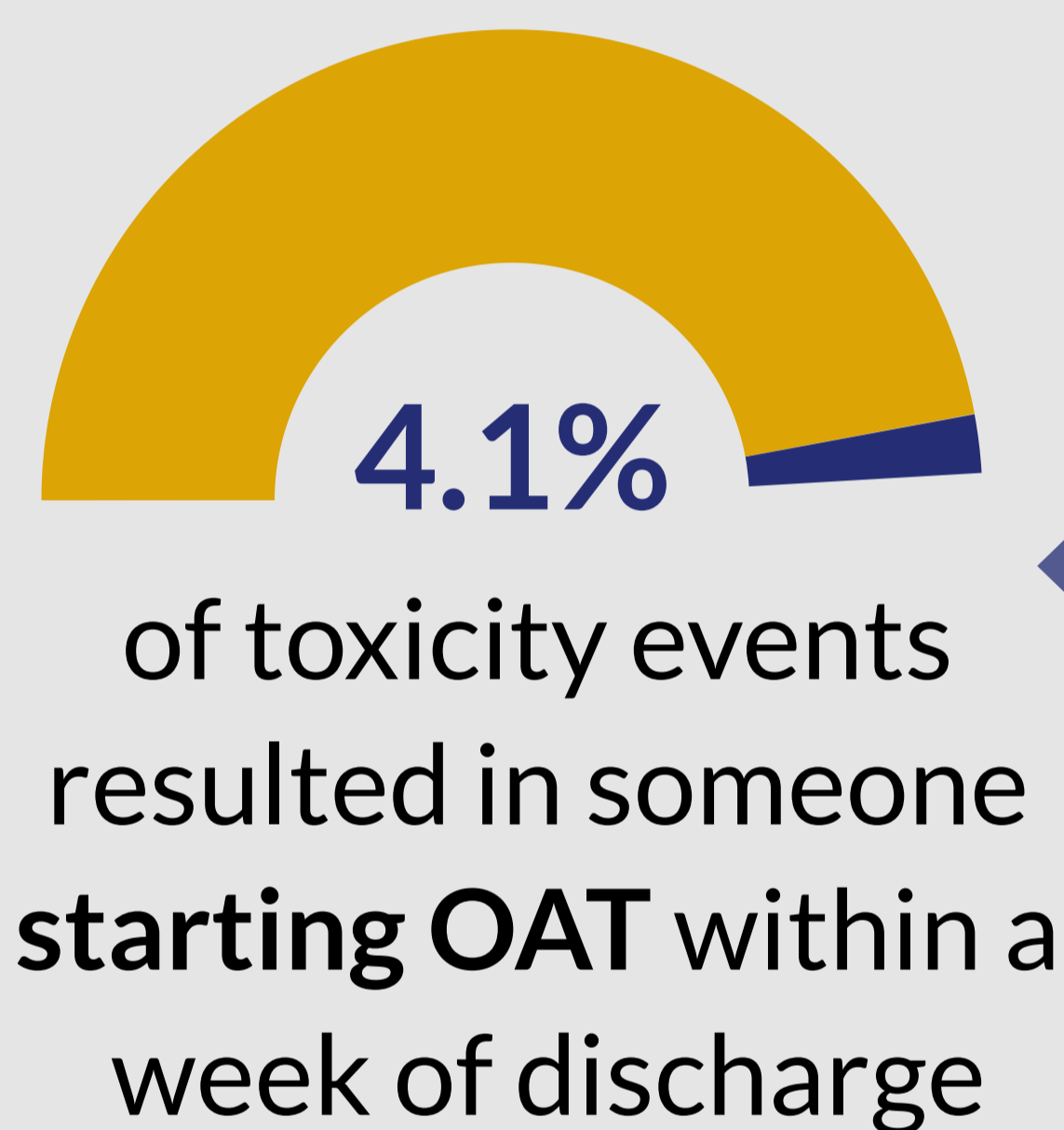


# Missed Opportunities to Initiate OAT Among People With OUD in Ontario





Opioid agonist therapy (OAT) is shown to be an effective way to reduce harms among people with opioid use disorder (OUD)

Between January 1, 2013 and March 31, 2020

There were over **20K** hospital visits for opioid toxicity among **14K** individuals



People starting OAT were more likely to:

-  Be younger
-  Live in the highest neighbourhood income quintile
-  Have an opioid toxicity episode in the previous year
-  Have been treated with OAT in the past year (but not the past month)

Despite small increases over time, starting OAT after an opioid toxicity remained **low**



The week after hospital discharge for an opioid toxicity event:



**22%** had an outpatient physician visit

**18%** visited the ED

**3%** were admitted to hospital

*Key finding: OAT initiation remains low, despite connection to healthcare for many in the days after an opioid toxicity event*