**SERAF REPORT 1/2023**

**Status Report 2022 (translated into English with UiO’s Chat GPT-4)**

**First Year with the new LAR (MAR) Guidelines**

**Linda Nesse, Philipp Lobmaier, Ivar Skeie, Pål H. Lillevold and Thomas Clausen**

**Norwegian Centre for Substance Abuse and Addiction Research, SERAF**

**Introduction**

SERAF prepares an annual national status report for Medication-Assisted Rehabilitation (MAR) on assignment from the health directorate. The status report is based on a survey conducted by all MAR initiatives once a year. The purpose is to survey the patients' situation, treatment, and treatment outcomes in MAR. This survey has been conducted over the last 23 years, and has shown that MAR over time has developed into a well-established, standardized treatment for most with opioid-dominant addiction.

The status report summarizes central findings about the situation of patients in MAR, current treatment status, medication treatment (including choice of medication and dosage), psychosocial follow-up (such as treatment goals, individual plan, responsibility group meetings and treatment for mental health problems), mental health problems and drug use last four weeks, and drug use and health-related conditions last year, and satisfaction with the treatment. In addition, findings on deaths among patients in MAR the past year are presented. Ivar Skeie has analyzed mortality data and followed the MAR initiatives closely in order to include complete numbers on overdoses, suicide and natural deaths.

This year's status report is based on responses from 18 different MAR initiatives spread over five regions. The introduction of the electronic journal system Helseplattformen at St. Olavs hospital and in North-Trøndelag has led to challenges that have made these MAR initiatives unable to carry out the status survey. This means that the figures presented for the Midt region cannot be compared with last year's figures for the same region, and that the national averages do not include St. Olavs Hospital and North-Trøndelag.

In 2022, new MAR guidelines were introduced, and this is the first status report to be carried out after this. In addition, this year's status report contains several new elements. MAR initiatives that use the electronic journal system DIPS Arena have answered a somewhat further developed version of the status survey that includes new supplementary information. The initiatives in question are Oslo, Bergen, Fonna and Førde. The new questions include perceived side effects of MAR medication, and various questions about physical health, diseases and treatment last year. The questions have been answered by about 1 in 4 patients in MAR, and contribute to further developing knowledge about the treatment and about the patients' situation. At the same time, it is the first time patients undergoing heroin-assisted treatment (HAT) participate in the state survey. One of the chapters summarizes the main findings for patients in HAT.

We see that the increase in the average age in MAR continues this year as well. We would like to remind you that an aging MAR population is considered a success in itself. MAR has allowed many people with opioid addiction to age with the disease. At the same time, we aim to strengthen conditions for good living habits, available assessment and treatment for mental disorders, examination and treatment for somatic diseases such as hepatitis C, and regular medical examinations in the future. It is important that MAR continues to be a treatment model that is accessible, enjoyable over time, with high professional quality and defensibility. At the same time, it is important to support the majority of patients in having reasonably good substance use management. This balancing act constitutes the everyday life of patients and treatment providers in MAR.

This report is the result of significant effort in each MAR initiative. We thank the efforts of patients in MAR who have answered the status survey, MAR staff across the country for their work in collecting responses, and for a good collaboration with the MAR initiatives and with the Health Directorate.

Oslo, 2023

Linda Nesse, Philipp Lobmaier, Ivar Skeie, Pål H. Lillevold, and Thomas Clausen