



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive

An Oifig Náisiúnta don Chuimsiú
Sóisialta
Rannóg Cúram Príomhúil
Feidhmeannacht na Seirbhíse
Sláinte
Lána an Mhuilinn
Baile Phámar
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National Social Inclusion Office
Primary Care Division
Health Service Executive
Mill Lane
Palmerstown
Dublin 20

5th October, 2017

Deputy Maureen O'Sullivan,
Dáil Eireann,
Kildare Street,
Dublin 2.

PQ 41001/17

* To ask the Minister for Health the number of persons being prescribed methadone in 2017; the number that have been prescribed methadone for more than ten years; and if, since the introduction of methadone in 1971, longitudinal research has been carried out to examine its effectiveness.

Dear Deputy O'Sullivan,

The Health Service Executive has been requested to reply directly to your above Parliamentary Question which you submitted to the Minister for Health for response. I have examined the matter and the following outlines the position:

As of the end of August '17 there were 10,161 patients receiving Methadone Treatment (including prisons).

The most recent available data for length of time in treatment is as of 31st of December 2016. At this time there were 10,087 patients receiving Methadone Treatment (including prisons) of which 3,754 (37%) of patients were in treatment for 10 years or more.

Since the introduction of methadone, there has been a significant longitudinal research study, the ROSIE (Research Outcome Study in Ireland) study. This demonstrated clear evidence that Methadone treatment works. This was a National prospective longitudinal drug treatment outcome study and the outcomes from the ROSIE study showed both that drug treatment works and that investment in drug treatment pays dividends. Significant reductions were shown in the key outcome areas of drug use, involvement in crime and injecting drug use. In addition improvements were seen in employment and training. Thus the ROSIE results are comparable with the positive outcomes reported by similar studies in the US (DARP & DATOS) the UK (NTORS) & Australia (ATOS).

There is international research evidence that increased length of time in OST is associated with improved treatment outcomes (including reduced use of other opioids and reduced criminal

activity) and short-term methadone maintenance treatment is associated with poorer outcomes (Ward J, Mattick RP and Hall W (1998))

Evidence strongly suggests that time limiting Opioid Substitute Treatment may have significant unintended consequences including increasing drug-driven crime (and national crime statistics), increasing heroin overdose death rates and increasing the spread of blood-borne viruses including hepatitis and HIV. Those implementing this approach could also face medico-legal challenges.

I trust this information is of assistance to you but should you have any further queries please contact me.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Joseph Doyle', written in a cursive style.

Joseph Doyle
National Planning Specialist