IMPACT OF DRUG CONSUMPTION ROOMS ON NON-FATAL OVERDOSES, ABScesses, AND EMERGENCY ROOM VISITS IN PEOPLE WHO INJECT DRUGS IN FRANCE: RESULTS FROM THE COSINUS COHORT

Roux P1*, Jauffret-Roustide M2*, Donadille C1, Briand Madrid L1, Kervran C1, Protopopescu C1, Lalanne-Tongio L3*, Auriacombe M3*, and the Cosinus study group

1 Aix Marseille Univ, INSERM, IRD, SESSTIM, Sciences Economiques & Sociales de la Santé & Traitement de l’Information Médicale, Marseille, France
2 CERMES3 (Inserm U988/UMR CNRS 8211/EHESS/Paris Descartes University), Paris, France
3 INSERM 1114, Department of Psychiatry and Addictology, University Hospital of Strasbourg, Fédération de Médecine Translationnelle de Strasbourg (FMTS), 67000 Strasbourg, France
4 Addiction Team (Laboratoire de psychiatrie) / SANPSY, CNRS USR 3413, Bordeaux, France

* equal contribution

Background:
The effectiveness of drug consumption rooms (DCR) dedicated to people who inject drugs (PWID) has previously been demonstrated for HIV-HCV risk practices and access to care for substance use disorders. However, few data exist on the impact of DCR on other health-related complications. This article investigated the impact of exposure to DCR on i) non-fatal overdoses ii) abscesses, and iii) emergency room (ED) visits - all in the previous six months - using data from the COSINUS cohort.

Methods:
We conducted a 12-month longitudinal study among 665 PWID in Bordeaux, Marseille, Paris and Strasbourg. Participants completed face-to-face questionnaires at enrolment, six months and 12 months. A two-step Heckman method was used to limit non-randomization bias by first comparing the DCR group with the control group and then calculating the Inverse Mills ratio (IMR). Three logistic regression models - adjusted for significant factors and for the IMR ratio - were conducted on the three outcomes. Results: Among the 665 participants, at baseline, 6, 21 and 38% reported non-fatal overdoses, abscesses and ED visits, respectively, during the previous six months. Regression models found that DRC-exposed participants were less likely to report the three outcomes (aCoeff=-0.47; 95%CI=[-0.88;-0.07], aCoeff=-0.74; 95%CI = [-1.11;-0.37], and aCoeff=-0.74; 95%CI=[-1.27;-0.20], respectively).

Conclusions:
This is the first study to show the positive impact of DCR on abscesses and ER visits, and confirms DCR effectiveness in reducing overdoses. Our findings strengthen the argument to implement more DCR to improve PWID environment and health.