

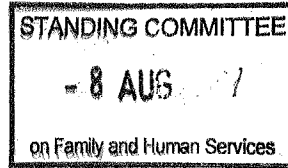
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Australian Government

Department of Health and Ageing



SECRETARY

Mr James Catchpole
Secretary, Standing Committee on Family and Human Services
PO Box 6021
Parliament House
Canberra ACT 2600

Dear Mr Catchpole

Estimates of the costs of methadone maintenance treatment programs

Thank you for your request of 29 June 2007 for further information about the cost to Government of methadone maintenance treatment programs. In particular you were seeking an update on information provided in the 1995 report: *Review of methadone treatment in Australia*.

The 1995 report was the result of an extensive review process conducted by consultants for the Department. A review of this magnitude and detail has not been performed since this date, so it is not possible for the Department to provide the Standing Committee on Family and Human Services with updated information to directly compare with the data set out in the 1995 report.

We have therefore drawn on a range of data sources to provide you with some information about the current cost of methadone maintenance treatment programs.

The Australian Institute of Health and Welfare has recently published the Alcohol and Other Drug Treatment Services National Minimum Data Set (AODTS – NMDS) for the 2005 -2006 financial year. The full report can be found at <http://www.aihw.gov.au/publications/index.cfm/title/10431>.

This report indicates that on 30 June 2006, 27,588 clients received methadone treatment in Australia. Data from the Pharmaceutical Benefits Scheme (PBS) shows that the Australian Government spent \$4.2 million on methadone for the treatment of opioid dependence during the 2005 -2006 financial year. During the same period, \$3.0 million was spent on the analysis of urine, blood or other bodily fluids for the detection and / or quantitation of a drug or drugs of abuse, or therapeutic drugs on a sample from a patient participating in a drug abuse treatment program¹.

¹ Methadone maintenance treatment programs only comprise a portion of all drug abuse treatment programs.

As you are aware, State and Territory Governments are primarily responsible for the provision of drug and alcohol treatment services, including methadone maintenance treatment programs. Information on the cost per client in public programs would need to be obtained directly from State and Territory Governments. The Government does not hold data which could answer your query in relation to private sector costs.

The Medicare Benefits Schedule does not have a separate item code that identifies medical consultations for patients participating in methadone maintenance treatment programs and consequently it is not possible to provide an estimate of these costs.

In addition to methadone, there are other pharmacotherapy treatment options for people with opioid dependence, including buprenorphine (Subutex®) and a buprenorphine / naloxone combination product (Suboxone®), which are available in tablet form.

Buprenorphine is considered effective in the treatment of heroin dependence because:


- it substitutes for heroin, preventing the emergence of opioid withdrawal symptoms and reducing cravings;
- it diminishes the effects of additional opioids because it has a high affinity for opioid receptors in the body, and occupies these receptors for prolonged periods, blocking the action of heroin;
- it is long acting, allowing daily (or less than daily) dosing.

The Australian Government also subsidises the use of Subutex® and Suboxone® for the treatment of opioid dependence, under the PBS. On 30 June 2006, 9,162 people received buprenorphine treatment in Australia. The cost to the Australian Government of Subutex® and Suboxone® for the 2005 – 2006 financial year was \$18.1 million.

Therefore a total of 38,659 people were receiving pharmacotherapy for opioid dependence on 30 June 2006 and the total cost of providing these therapies via the PBS over the 2005 – 2006 financial year was \$22.3 million.

I trust that this information is helpful to the Standing Committee on Family and Human Services.

Yours sincerely



Jane Halton
Secretary

20 July 2007