

Accessibility to COVID-19 vaccine in two different outpatient addiction care settings

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Abstract =300 words

INTRODUCTION:

Effective vaccines have been developed against COVID-19 infection, especially severe forms of which mental disorders are a major risk factor. We hypothesized that vaccination coverage of people with severe substance use disorders (SUDs) would improve with on-site inoculation at the addiction care center.

METHOD:

We compared vaccination coverage across two outpatient settings: one was hospital-based (Care1), with COMINARTY® vaccine easily provided, the other was community-based (Care2), where they provided VAXZEVRIA®. We collected the characteristics of all vaccinated patients from April 2021 (opening of COVID vaccination to psychiatric patients) to August, 11 2021. We used Fisher’s exact test to compare gender, social status and comorbidity level, with significance set at $p < 0.05$.

OUTCOME:

At Care1, 91 patients received at least one injection, compared to eight patients at Care2 (12% vs. 1% of the total population, respectively; $\chi^2 = 69.76$, $p = 6.7 \times 10^{-17}$). Complete immunization was achieved for 45 (49%) vs. 5 (63%) patients, $p = 0.7$. Both vaccinated samples were similar in terms of gender (23% vs. 14%, $p = 0.56$), housing (unstable in 36% vs. 50%, $p = 0.49$), psychiatric comorbidity

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(56% vs. 57%, $p = 0.7$), main SUD (opioids 53% vs. 75%, $p = 0.29$; alcohol 18% vs. 25%, $p = 0.6$; cocaine 15% vs. 0%, $p = 0.59$). Medication for opioid use disorder was delivered on-site for 38% patients at both settings.

DISCUSSION:

The availability of vaccine at Care1 was met with high demand as 12% patients benefited from on-site inoculation. The hospital provided the logistics required by COMINARTY®, conversely to the community-based setting. Differences in access to vaccination was not explained by clinical nor sociodemographic characteristics, although Care2 patients were all aged > 55 years according to VAXZEVRIA® specifications. This observational study shows that people with severe social and clinical conditions benefit from integrated care, provided that appropriate means are available.