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

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Introduction
Since spring 2021, effective vaccines have been developed against COVID-19 infection.
At first, 2 vaccines were available for individuals with severe substance use disorders (SUDs): COMINARTY® in hospital-based settings (because of specific conservation conditions) and VAXZEVRIA®, accessible in community-based centers but restricted to people >55 years old.

We hypothesized that the vaccination coverage of people with severe SUDs would be high with on-site inoculation at the addiction care center.

Method
We compared vaccination coverage across two outpatient settings: one was hospital-based (Care1), using with COMINARTY® vaccine; the other was community-based (Care2), where VAXZEVRIA® was provided.

We collected the characteristics of all vaccinated patients from April 2021 (opening of COVID vaccination to psychiatric patients) to August, 11 2021. We used Chi², Fisher’s and Mann-Whitney tests to compare gender, social status and comorbidity level, with significance set at p < 0.05.

Results
At Care1, 91 patients received at least one injection, compared to eight patients at Care2 (12% vs. 1% of the total population, respectively; p = 9.2 x 10⁻¹⁷, Figure 1).

Mean age at Care1 was significatively lower than at Care2: 47 vs. 58 years (p = 1.24 x 10⁻⁷)

![Figure 1: % inoculated patients at Care1 (left) vs. Care2 (right)](image)

Others: no inoculation on site

Complete immunization was achieved for 45 (49%) vs. 5 (63%) patients, p = 0.72.

Both vaccinated samples were similar in terms of gender (p=1), housing (p=1), psychiatric comorbidity (p=1), main SUD (opioids, p=0.29; alcohol, p=0.63; cocaine, p=0.59). Medication for opioid use disorder was delivered on-site for 38% patients at both settings (Figure 2).

![Figure 2: Characteristics of inoculated patients at Care1 (blue) vs. Care2 (red)](image)

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.

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