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

Céline Couton[1,2]*, Romain Icick[1,3,4], Catherine Péquart[2,4], Florence Vorspan[1,3,4]

[1]Assistance Publique - Hôpitaux de Paris (AP-HP), Groupe Hospitalier Saint-Louis – Lariboisière – Fernand Widal, Département de Psychiatrie et de Médecine Addictologique, Paris F-75010, France;
[2]CSAPA "Association Charonne - Oppelia", 9 Quai d'Austerlitz, 75013 Paris, France;
[3]Université de Paris, INSERM U1144, Paris, F-75006, France;
[4]Fédération Hospitalo-Universitaire "NOR-SUD", Paris F-75010, France;
*Correspondence: celine.couton@aphp.fr

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 VAXZEVARIA®, 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})

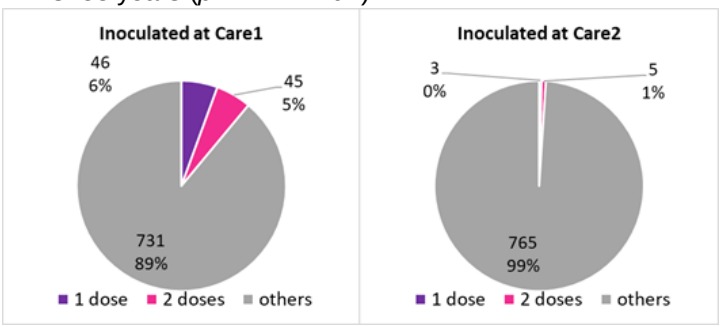

Figure 1: % inoculated patients at Care1 (left) *vs.* Care2 (right)
Others: no inoculation on site

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**).

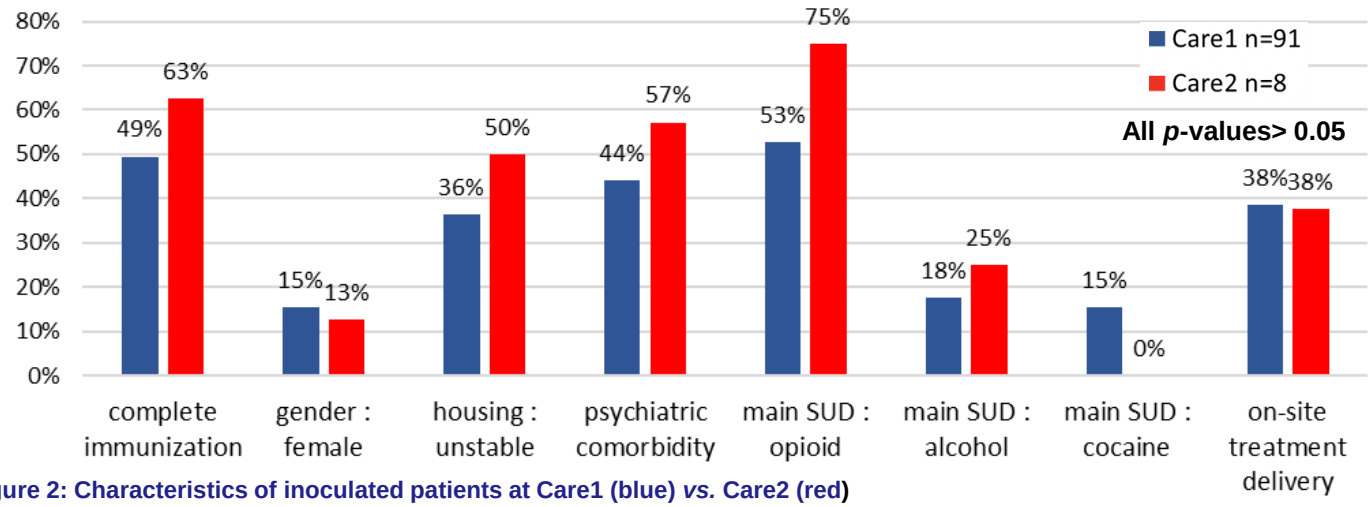

Figure 2: Characteristics of inoculated patients at Care1 (blue) *vs.* Care2 (red)

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.**

No conflict of interest in the subject matter