

Racial Disparities in Opioid Use Disorder Treatment

Black and Latino patients were less likely than white patients to receive and fill prescriptions for treatment for opioid use disorder.

May 16, 2023 By Laura Schmidt

White patients are significantly more likely to receive and fill prescriptions for medications used to treat [opioid use disorder \(OUD\)](#) compared with Black or Latino patients following OUD events such as [overdose](#) or infection, according to a study published in [The New England Journal of Medicine](#).

The study, led by Harvard T.H. Chan School of Public Health researchers, aimed to address racial disparities in overdose and OUD treatment.

“Opioid overdoses are rising faster in the Black population than in any other racial group,” lead study author Michael Barnett, MD, an associate professor of health policy and management, said in a [Harvard news release](#). “In 2021, they surpassed overdose rates in the white population for the first time in decades. And rates of overdose in the Hispanic population have recently risen by 40%.”

“We need to understand barriers to obtaining lifesaving addiction treatment for minority populations to address this huge demographic shift and public health crisis,” he added.

While previous studies have shown racial disparities in OUD treatment, few have focused on available OUD medications, such as [naloxone](#) or [buprenorphine](#), or accounted for non-recommended medications, such as opioid analgesics or benzodiazepines, which have been associated with increased overdose and mortality risk for OUD patients, according to the news release.

For this study, researchers observed 23,370 Medicare beneficiaries with disability and active OUD symptoms who experienced at least one high-risk OUD event, such as overdose or infection. A total of 25,904 OUD-related events were observed: 3,937 (15.2%) among Black patients, 2,105 (8.1%) among Hispanic patients and 19,862 (76.7%) among white patients.

After 180 days of follow-up, researchers found that Black patients received and filled a prescription for buprenorphine 12.7% of the time, Latino patients 18.7% of the time and white patients 23.3% of the time. Naloxone was distributed at rates similar to buprenorphine: Black, Latino and white

patients received and filled a prescription 14.4%, 20.7% and 22.9% of the time, respectively.

Researchers also found that, regardless of race, opioid analgesics prescriptions were received and filled after 23% of OUD-related events, despite well-known and substantial risks associated with opioid analgesics and benzodiazepines.

“Skyrocketing rates of overdoses in minority groups are unlikely to shift without a major overhaul in the addiction treatment system,” Barnett said. “Addressing the overdose crisis and racial disparities in addiction will likely require community-specific interventions that engage with minority populations and the clinicians who serve them to reduce stigma and bolster trust.”

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