Controlled-release oxycodone admissions in public and private substance abuse treatment: Associations with organizational characteristics
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Although non-medical use of controlled-release (CR) oxycodone is increasing, little is known about the substance abuse treatment facilities serving individuals dependent on this medication. This study examines the associations between the characteristics of treatment organizations and two dependent variables: any CR-oxycodone admissions and the number of CR-oxycodone admissions in the past six months. Face-to-face interviews were conducted with administrators of 363 publicly funded and 401 privately funded treatment centers in the US. Publicly funded non-profit organizations were less likely to have treated this population than government-owned, privately funded non-profit, and for-profit treatment centers. Some evidence indicated the availability of pharmacotherapies and detoxification services were associated with the dependent variables. Twelve-step programs were more likely to have treated oxycodone-dependent clients. Rural facilities treated significantly more clients than those in metropolitan areas. The high prevalence of CR-oxycodone admissions suggests the need for widespread training of treatment providers regarding treatment for CR-oxycodone dependence.