There is a dearth of systematic evidence on the effectiveness of opioid agonists in improving mental health in opioid use disorder. Randomized clinical trials were included if they compared opioid agonists with each other or a placebo in substitution treatment of opioid use disorder and reported at least one mental health outcome using a validated measure. Studies with comprehensive psychiatric interventions, or those primarily focused on adjunctive interventions were excluded. In September 2018, we did a systematic literature search (protocol: https://www.crd.york.ac.uk/prospero/, CRD42018109375). Of the total 6034 citations retrieved, 27 published studies have been included in the review comparing: methadone with diacetylmorphine, slow-release morphine, dihydrocodeine, levo-alpha-acetyl-methadol, placebo and buprenorphine; hydromorphone with diacetylmorphine, buprenorphine ± naloxone with waitlist/placebo, methadone with different administration methods, buprenorphine with different administration methods and different dosing schedules, and levo-alpha-acetyl-methadol with different doses. Studies varied considerably regarding dropout rates, dosing, psychosocial services, duration, and severity of opioid use disorder. Risk of bias was moderate to high in most studies, 5 studies assessed mental health status but did not provide the results, and most others provided insufficient data to make a meta-analysis possible at this time. Overall, it appears that opioid agonists improve mental health measures significantly during treatment, and are superior to placebo or waitlist; however, it is unclear if any opioid agonist is superior to the other. Considering the extent of mental health problems in this population and that substitution treatment comprises the mainstay of treatment options, more attention is required toward mental health outcomes in such clinical trials.

Themes:

Check (highlight) the most applicable theme according to the abstract.

| Innovation and Technology | X Health and Wellness | Culture and Society | Sustainability and Conservation |

Comments: