

# Virtual Primary Care for People with Opioid Use Disorder: A Scoping Review

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## BACKGROUND

The use of virtual primary care (VPC) for communities that experience structural marginalization, such as people with opioid use disorder (PWOD), needs to be better understood.

Thus, we conducted a scoping review to explore how virtual modalities have been integrated into care for PWOD and the barriers and facilitators to the use of VPC for this patient population.



Figure 1. Core Concepts.

## METHODS

We constructed a search strategy focused on the core concepts (Figure 1) of the research objective for the following databases: MEDLINE (OVID), CINAHL, EMBASE (OVID), and Web of Science. Articles that included ALL three core concepts were included for screening, provided they were in English. We registered our protocol on Open Science Framework [1] and uploaded search results into Covidence. Data extraction components are shown in Figure 2.



Figure 2. Data extraction components.

## RESULTS

After full text review, 29 studies met our inclusion criteria (Figure 3). Among them 26 were conducted in the United States, 1 in the Republic of Ireland, 1 in Canada, and 1 was not specified. Studies could include several overlapping care settings; the most common care settings where virtual modalities were used to connect with PWOD were stated as primary care (n=20), rural settings (n=11), and community health centres (n=8). Study types, virtual care modalities, nature of care, and themes are described in Figures 4-7.

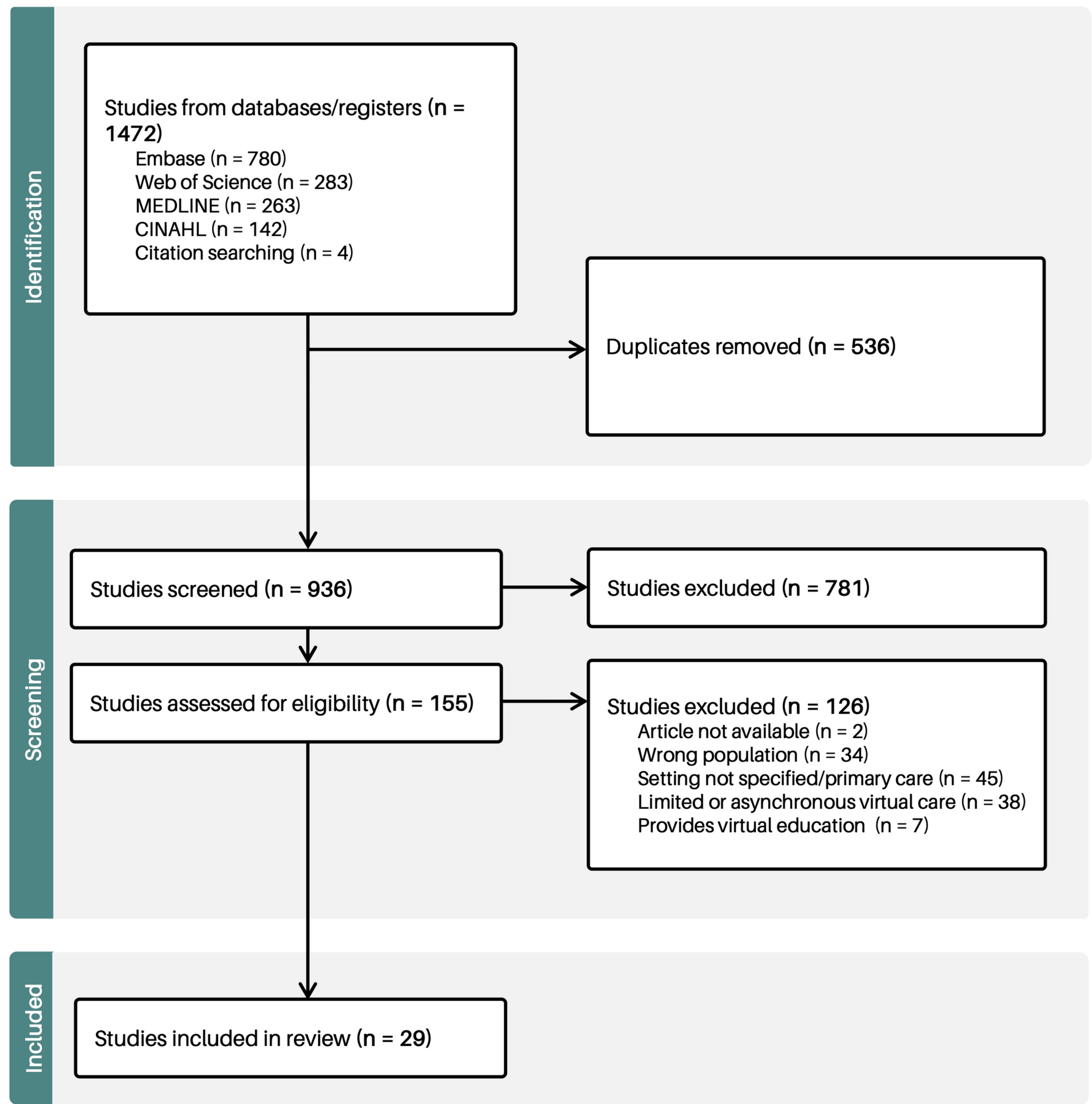
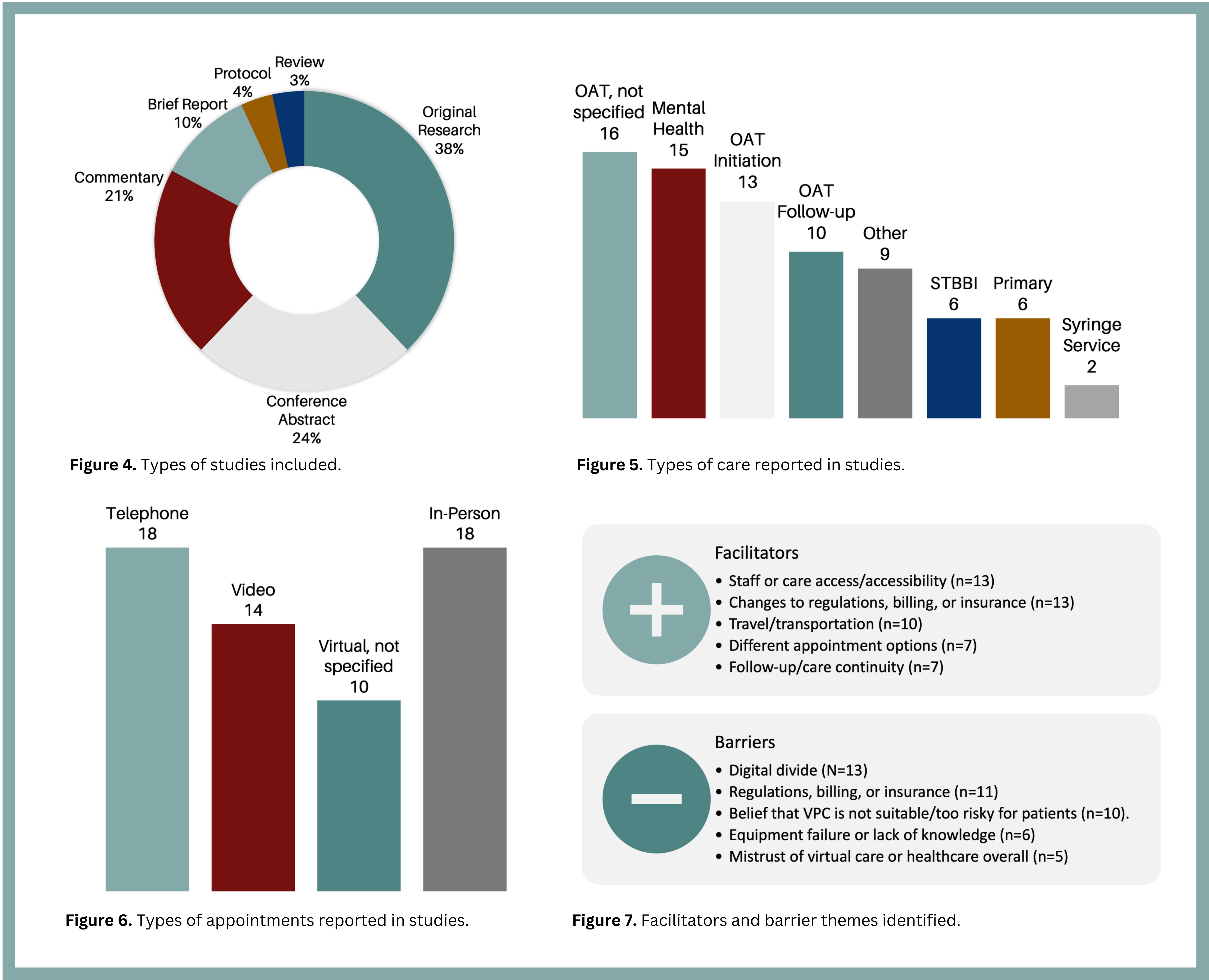


Figure 3. PRISMA flow diagram.

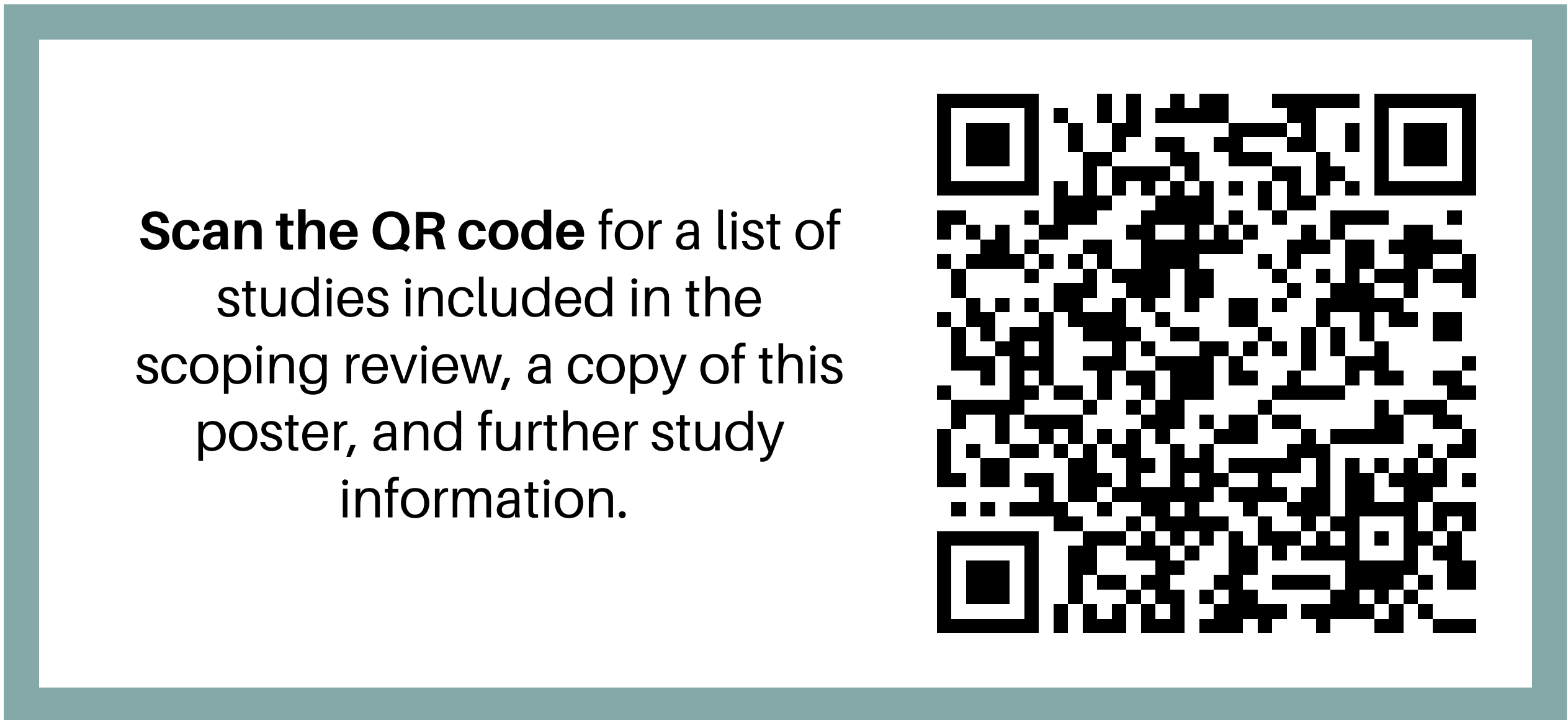


## DISCUSSION

- The only mixed methods project was the protocol for our larger project [2]
- No other Canadian studies
- Substantial variability in methodology
- Limited cohesiveness in data reporting
- Lack of consistency in the way primary care was described (i.e., opioid treatment programs)
- OAT and mental healthcare were well represented
- Limited research on other primary care needs
- Common reported benefit was improved access to care
- Studies reported clinicians not utilizing VPC due to patient appropriateness
- Common concern was the digital divide (i.e., disadvantaged populations lack access to technology)
- Proposed solution was often hybrid approach (i.e., in-person and virtual care)

## CONCLUSION

This scoping review provides insights into the use virtual modalities to support PWOD. The lack of PWOD experiences captured in this review, however, suggests the need for future research to engage and capture patient perspectives. This review also shows that our broader research project (VPC OUD), is novel in its mixed-methods approach and will address a current gap in the literature on Canadian experiences of VPC for PWOD.



Land Acknowledgements: Simon Fraser University respectfully acknowledges the xʷməθkʷə́yəm (Musqueam), Skwxwú7mesh Úxwumixw (Squamish), səlilwətaʔ (Tsleil-Waututh), ǵíɬə́y (Katzie), kʷikʷə́ləm (Kwkwetlem), Qayqayt, Kwantlen, Semiahmoo and Tsawwassen peoples on whose unceded traditional territories our three campuses reside. The University of British Columbia Point Grey Campus acknowledges that the land on which we gather is the traditional, ancestral, and unceded territory of the xwməθkwə́yəm (Musqueam) People. The University of Victoria acknowledges and respects the lək̓ʷəŋən peoples on whose traditional territory the university stands and the Songhees, Esquimalt and W̱SÁNEĆ peoples whose historical relationships with the land continue to this day.

## REFERENCES

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