

### Summary

- The systematic review aimed to examine the risk of infection in PWID exposed to controlled release hydromorphone. Through a thorough search of Embase, Medline and EMB Reviews, we found 5 studies reporting on the relationship between hydromorphone controlled-release and HCV, IE, and/or HIV.

### Key messages

- We found that due to the low number and low quality of studies included in the review, the need remains for further research on the relationship between hydromorphone controlled-release exposure and resulting infections. These results answered the query commissioned by Health Canada.

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### What is the issue?

- It has been suggested that the increasing availability of controlled-release formulation of hydromorphone (HCR) might be associated with contributing to higher rates of hepatitis c virus (HCV), infective endocarditis (IE), and human immunodeficiency virus (HIV) due to contamination and reuse of Injection Drug Preparation Equipment (IDPE), however this association has not been confirmed.

### What was the aim of the study?

- The objective of this systematic review was to examine the risk of IE, HCV and/or HIV in people who inject drugs (PWID) exposed to controlled release hydromorphone compared with other opioids, as well as to determine the characteristics of individuals exposed to controlled-release hydromorphone experiencing these infections.

### How was the study conducted?

- MEDLINE, EMBASE, EBM Reviews, and grey literature was searched for relevant studies.
- References of relevant systematic reviews and included studies were also scanned.
- Title/abstract screening, full-text screening, and data abstraction were carried out by two reviewers independently, with discrepancies solved by a third reviewer.
- Risk of bias appraisal was completed at the outcome level, carried out by two reviewers, and used the Newcastle-Ottawa Scale (NOS) and the Effective Practice and Organization of Care (EPOC) risk of bias tool. Discrepancies were resolved by a third reviewer.

### What did the study find?

- 5 studies fulfilled the eligibility criteria and were included, which indicates a lack of evidence in this area.
  - All studies were found to be of very low quality and to have a high risk of bias.
  - Three studies were based on retrospective data.
  - The associations were heterogeneous. One retrospective cohort study found an association between HCR and IE, whereas a case-control study found no evidence of an association. One retrospective cohort study found an association between the number of HCR prescriptions and prevalence of HCV.
  - Two studies focused on hydromorphone overall and not the controlled-release formulation, which makes interpretation difficult.

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