

Appendix 2. Details of studies included in the review

| Author (year), title, country | Aim | Population and sample size, OAT prescribers, study design |
|--|---|---|
| Barry et al (2009), 'Integrating buprenorphine treatment into office-based practice: A qualitative study', USA | '... to identify perceived facilitators and barriers to the potential or actual implementation of buprenorphine maintenance treatment by office-based physicians.' | Two articles for one study Office-based physicians: 23 participants. Demographic data for 20 participants. |
| Barry et al (2010), 'Opioids, chronic pain, and addiction in primary care', USA | '... to examine physicians' attitudes and experiences treating chronic noncancer pain.' | Five were OAT prescribers. One is listed as 'primary care' and not OAT prescriber. Semi-structured interviews |
| Payne et al (2011), 'Primary care providers' perspectives on psychoactive medication disorders in older adults', USA | '... to determine [primary care providers] perceptions regarding the prevalence and clinical manifestations of psychoactive medication misuse/abuse among older primary care patients.' | Two sites treating older adults 22 PCWs (including 17 physicians) OAT prescribing status unknown Focus groups |
| Mattias et al (2013), "'I'm not abusing or anything": Patient-physician communication about opioid treatment in chronic pain', USA | '... to understand how physicians and patients with chronic musculoskeletal pain communicated about issues related to opioids, particularly in light of the inherent uncertainties associated with opioid treatment.' | Veterans Affairs outpatient primary care clinics Five physicians and 30 patients OAT prescribing status unknown Semi-structured patient interviews, GP and patient consultations |
| Keller (2012), 'Practices, perceptions, and concerns of primary care physicians about opioid dependence associated with the treatment of chronic pain', USA | 'To examine the concerns, perceptions, and practices of primary care physicians about opioid dependence associated with the treatment of chronic pain.' | Practice-based research network, 62 sites 35 (28%) clinicians, family medicine (69%), paediatrics and internal medicine OAT prescribing status unknown. Non-validated cross-sectional survey |
| Kennedy-Hendricks (2016), 'Primary care physicians' perspectives on the prescription opioid epidemic', USA | '... to assess attitudes [among primary care physicians] surrounding the prescription opioid epidemic.' | 1010 physicians (29% response rate), 351 (35%) family practice. 13% prescribed OAT Non-validated cross-sectional survey |
| Sheridan and Butler (2008), 'Prescription drug misuse: issues for primary care', New Zealand | '... to explore prescription drug misuse and diversion in the context of the issues for primary healthcare.' | Three articles for one study 51 metro and rural participants (17 GPs, 16 pharmacists, 18 'key experts' in drug treatment and law enforcement) |
| Butler and Sheridan (2010), 'Innocent parties or devious drug users: The views of primary healthcare practitioners with respect to those who misuse prescription drugs', New Zealand | '... understand issues for primary care health practitioners in relation to prescription drug misuse, by exploring the attitudes and experiences of healthcare professionals' | 53% GP OAT prescribers Report, literature review and semi-structured interviews |
| Sheridan et al (2011), 'Prescription drug misuse in New Zealand: Challenges for primary health care professionals', New Zealand | '... to explore [prescription drug misuse] and diversion in the context of primary care, specifically from the perspective [of general practitioners] and [community pharmacists]' | |
| Sheridan et al (2012), 'Prescription drug misuse: quantifying the experiences of New Zealand GPs', New Zealand | '... to quantify [general practitioners] experiences regarding [prescription drug misuse] in New Zealand' | Random sample of 300 GPs in New Zealand (45.7% response rate) OAT prescribing status unknown Non-validated cross-sectional survey |
| Holliday et al (2013), 'An evaluation of the prescription of opioids for chronic non-malignant pain by Australian general practitioners', Australia | '... to evaluate the quality of opioid analgesia prescribing in chronic non-malignant pain (CNMP) by general practitioners' | Two articles for one study 404 GPs in NSW, Australia (23% response rate) 16% OST prescribers |
| Holliday et al (2013), 'An examination of the influences on New South Wales general practitioners regarding the provision of opioid substitution therapy', Australia | '... to analyse [general practitioners] previously identified motivating factors by describing their frequency and demographic associations' | Non-validated cross-sectional survey |

Table continued on the next page.

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| Holliday et al (2015), 'The pattern of opioid management by Australian general practice trainees', Australia | '... to establish consultation-level prevalence and associations of opioid prescribing' | Audit of 69,621 individual consultations from 645 GP vocational trainees in Australia OAT prescribing status unknown Cross-sectional secondary analysis from a longitudinal multisite cohort study |
| Bates (2017), 'The extent that health professionals suspect and address addiction to medicines in primary care: Findings from a survey in Northwest England', UK | '... to explore the frequency that health professionals within general practice ... and community pharmacy settings suspect and respond to [addiction to medicines] and their perceptions about patients with [addiction to medicines]' | Northwest England primary care 76 PCWs (35 GPs, 19 pharmacists, 3NPs, 2 pharmacy technicians, one dispenser, 16 unknown role) OAT prescribing status unknown Non-validated cross-sectional survey |
| Foley et al (2016), 'Medical professionals' perspectives on prescribed and over-the-counter medicines containing codeine: A cross-sectional study', UK | '... to explore prescribing practitioners' perspectives on prescribed codeine use, their ability to identify dependence and their options for treatment in the UK' | Wales, North Ireland, Scotland and England GPs, nurses and pain specialists 238 GPs (12% response rate), 47.2%/14.6% completed certificate/postgraduate qualification in substance misuse Non-validated cross-sectional survey |
| Foley et al (2018), 'A study of medical professionals' perspectives on medicines containing codeine in South Africa', South Africa | '... to examine medical professionals' perspectives on prescribed and [over-the-counter] codeine, codeine dependence, screening and treatment options in South Africa.' | 238 participants (77.3% GPs, 5.9% specialist in family medicine, 8% pain medicine) in South Africa 4% specialist training in substance misuse Non-validated cross-sectional survey |
| Buchman (2016), 'You present like a drug addict: Patient and clinician perspectives on trust and trustworthiness in chronic pain management', Canada | '... provide an in-depth examination of how trust is negotiated in pain management' | Six physicians (one family physician) at one large urban hospital in Canada OAT prescribing status unknown Semi-structured interviews |
| Webster et al (2019), 'An ethnography of chronic pain management in primary care: The social organization of physicians' work in the midst of the opioid crisis', Canada | 'Our current analysis focuses on physicians' and other primary care providers' reflections on their experiences of providing care to patients with chronic pain.' | Family physicians in community/urban hospitals, family care organisations 19 physicians and eight nurses OAT prescribing status unknown Semi-structured interviews and 40 hours observations of consultations |
| Kennedy et al (2019), "'If you can't see a dilemma in this situation, you should probably regard it as a warning": A meta-synthesis and theoretical modelling of general practitioners' opioid prescription experiences in primary care', UK | '... to identify and synthesise the qualitative literature describing the factors influencing the nature and extent of opioid prescribing by GPs for patients with [chronic non-malignant pain] in primary care' | 13 published studies of physicians from the USA, from the UK and Canada - nine from the US, three from the UK and one from Canada OAT prescribing status unknown Narrative synthesis of published studies of physicians |

GP, general practitioner; NP, nurse practitioner; OAT, opioid agonist treatment; PCW, primary care worker