

AMSAODD NEWS

American Medical Society on Alcoholism & Other Drug Dependencies

Vol. III, No. 6

November - December 1988

Published Bi-Monthly

AMSAODD Recertification Policies

The AMSAODD Board approved these recertification policies in Chicago on Nov. 6.

Certification Chair is Anthony Radcliffe, MD.

- 1) Recertification will be available seven years after the date of certification, and will be **required after ten years.**
 - 2) Recertification will be by examination, the same exam as given that year for initial certification. Some additional feedback and analysis of performance will be provided to recertification candidates.
 - 3) If a recertification candidate fails the exam three times, additional education will be required before he/she can take a fourth exam.
 - 4) There is no limit on the duration of certification. The initial certification designation will not be withdrawn if someone is not recertified. Even after the ten-year period has expired, the designation "Certified in 19xx" will remain in each issue of the AMSAODD Membership Directory. A recertified member's listing will be expanded to include "Recertified in 19xx."
- The Board agreed that in the future, AMSAODD should consider imposing a time limit on the duration of its certification.
- The AMSAODD Examination Committee will be responsible for the recertification examination. The AMSAODD Credentialing Committee will be responsible for recommending the requirements for sitting for recertification.
- The task force that assembled these recertification policies will continue to serve on an ad hoc, as needed, basis.

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Reminder:

**NO AMSAODD
Certification Exam
in 1989**

◆
AMSAODD is a society of 3,500 physicians who are concerned about alcoholism and other drug dependencies, and who care for persons affected by these illnesses.
◆



AMSAODD's 3rd National Forum on AIDS and Chemical Dependency

"Integrating AIDS Prevention and Treatment with Chemical Dependency"

February 2-5, 1989

Omni International Hotel, Miami, Florida

Chairpersons

Lori Karan, M.D.

Melvin Pohl, M.D.

Faculty

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 Harry W. Haverkos, M.D.
 Mark Hochhauser, Ph.D.
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Max Schneider, M.D.
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 Larry Siegel, M.D.
 James Sorenson, Ph.D.
 Stephan Sorrell, M.D.
 Edith Springer, ACSW
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Presented by: The American Medical Society on Alcoholism and Other Drug Dependencies. CME's will be applied for. A limited number of exhibit booths are available - please contact our office for details.

For a complete conference agenda with registration materials call or send in the coupon below.

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Facility _____

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Mail to: Conference Information, AMSAODD National Forum on AIDS, P.O. Box 81691, Atlanta, GA 30366. Telephone 1-404-458-3382.

(Cont. from p. 1)

AMSAODD Certification

Criteria to Sit for the 1990 Exam

The following requirements were approved by the AMSAODD Board in 1987.

For 1990 the requirements are:

- 1) A member in good standing of AMSAODD, with dues paid through the current year and for the year of the examination, and
- 2) Licensed in good standing to practice medicine in the licensing jurisdiction in which he/she practices, both at the time of the application and of the examination, and
- 3) In good standing in his/her community as evidenced by letters of recommendation, and
- 4) Successful completion of a residency training program approved by the ACGME in any recognized medical specialty, and
- 5) One year full-time involvement (or one FTE) in the field of alcoholism and/or other drug dependencies, in clinical patient care, teaching or research, of which at least half must be in clinical care.

These requirements must be completed by June 30 of the year in which the application is submitted.

Applications for the 1990 exam will be mailed to AMSAODD members toward the end of 1989. Deadline for submitting completed applications will be early in 1990. (The 1988 application deadline was Feb. 10.)

Nonmembers of AMSAODD can call or write the New York office for pertinent information.

Criteria to Sit for the Exams After 1990

Numbers 1 - 4 (1990 criteria above) remain the same. Number 5 was changed to one of the following (a, b, or c):

- a) Two years full-time (or 2 FTE's) involvement in the field of alcoholism and other drug dependencies, at least half of which must be in clinical patient care and the remainder can be in teaching, supervision, research, learning experiences, administration, or consultation, or
- b) Successful completion of a one-year fellowship in the field of alcoholism and other drug dependencies which is registered* with AMSAODD; at least half of the fellowship year must be in clinical patient care; the remainder can be in teaching and supervision, research, learning experiences, administration, or consultation, or
- c) One year of clinical patient care experience in the field of alcoholism and other drug dependencies, plus 90 hours of Category I CME in alcoholism and other drug dependencies taken in the last three consecutive years.

* To "register" with AMSAODD, the director or sponsor of a training program need only complete a questionnaire and return it to the New York office of AMSAODD. Registration does not necessarily indicate "approval" by the society.

Warning Labels on Alcoholic Beverages

Soon the American public will see warning labels on their liquor bottles. The Anti-Drug Abuse Act of 1988 provided, among many other measures, a requirement for labels that read:

GOVERNMENT WARNING:

1) According to the Surgeon General, women should not drink alcoholic beverages during pregnancy because of the risk of birth defects.

2) Consumption of alcoholic beverages impairs your ability to drive a car or operate machinery, and may cause health problems.

As a physicians' organization, AMSAODD can take some of the credit for this achievement, because of our work with NCA (National Council on Alcoholism) and other groups in educating the Congress over many years. Back in 1979, AMSA (our name at the time) polled the membership and received a clear mandate in favor of health warning labels. We testified in favor of the measure at a U.S. Senate hearing in 1979, and we continued to support the labeling concept, even when the Congress failed to enact the proposed legislation. (It passed in the Senate but not the House.)

AMSAODD's Prevention Policy Statement (Oct. 1984), our first to include both alcohol and other drugs under our new name and mission, recommended labels. In August of this year, Dr. LeClair Bissell and I testified again, lending the medical-scientific wisdom of AMSAODD to support a Senate bill requiring five rotating labels. That hearing made a real difference, as did individual members writing to their senators.

The legislative process, with its give and take, modified the original proposal. It removed warnings about cancer, hypertension, liver disease, interaction with other drugs, and addiction. But we *will* have labels on all alcoholic beverages, including wine coolers. The legislation also asks for a Treasury Department report, due in two years, on the need for additional labels. This gives us a chance to keep up the pressure, to continue to educate the public and our representatives.

To those of you who doubt that we can make a real difference, this story should provide reassurance. *Get involved!*

Sheila B. Blume, MD, Chairperson
Public Policy Committee

President Reagan Signs Warning Label Bill

On Nov. 18, President Reagan signed this legislation which was part of a comprehensive drug bill (HR-5210).

According to *The Alcoholism Report*, more than 100 organizations were to some degree involved in the decade-long effort to require warning labels. The labels will appear on all containers that hold at least one-half of one percent alcohol by volume.

The warning label comes 15 years after Drs. Kenneth L. Jones and David W. Smith first named the fetal alcohol syndrome (FAS) in print.

The NIAAA estimates that between one and two newborns per 1,000 have FAS. As one of the three most frequent causes of birth defects associated with mental retardation (the others are Down's Syndrome and spina bifida) FAS is the only one that is completely preventable.

Hence the Surgeon General's warning to abstain from alcohol during pregnancy.

(AMSAODD has a new "Position Statement on the Use of Alcohol and Other Drugs During Pregnancy." This will be published in the newsletter when space permits; meanwhile, copies are available from the New York office.)

"Willful Misconduct" Ruling Remedied by Congress

AMSAODD contributed to another recent piece of legislation that was passed in October by the House and Senate: a provision that in an extension of the eligibility time for VA education and rehabilitation benefits, "the disabling effects of chronic alcoholism shall not be considered to be the result of willful misconduct" (VA Bill S-2409).

Last April 20, during the Medical-Scientific Conference in Washington, DC, 350 AMSAODD members signed a statement that protested the Supreme Court's decision that day to uphold the authority of the Veterans' Administration to designate alcoholism as "willful misconduct" rather than as a disease, in extending benefits (*AMSAODD News*, May 1988).

AMSAODD's statement, which was circulated to legislators and to the media, included the society's official 1983 position, titled "Alcoholism as a Primary Disease":

"Based on many years of clinical experience, reinforced by recent and continuing research into the genetic, biochemical and physiological aspects of the effects of alcohol on living systems and of alcoholics and their families, the American Medical Society on Alcoholism and Other Drug Dependencies finds that alcoholism is a complex primary physiological disease, and neither a primary behavior disorder nor a symptomatic manifestation of any other disease process."

ABOUT AMSAODD

Members Voting on Name Change

The AMSAODD Board voted unanimously Nov. 6 to recommend to the membership a name change for the society:

- from **AMSAODD** - *American Medical Society on Alcoholism & Other Drug Dependencies*,
- to **ASAM** - *American Society of Addiction Medicine*.

The change was endorsed by the Executive Committee in July, which asked that arguments on both sides be summarized for the Board and for the membership.

Reasons for name change

- The field of practice for our members is becoming known as "addiction medicine" and has been broadening to encompass a broad range of addictive diseases.
- Other organizations, such as the National Association of Addiction Treatment Providers, have changed their names to incorporate the word "addiction."
- Our present name and acronym (AMSAODD) are too cumbersome and awkward.
- The proposed name is consistent with the names of other medical specialty societies, such as those in internal, preventive, and emergency medicine, and thereby conveys a greater sense of legitimacy.

Reasons against name change

- Our present name is now well-recognized and accepted.
- Keeping "alcoholism" in the name is important so as to emphasize that this is the disease which does the most damage and is uppermost in our concern.
- The word "addiction" has pejorative connotations.
- Changing the society's name twice within five years would reflect on our stability as an organization.

This proposed amendment was mailed to the membership November 22, with votes to be returned to the New York AMSAODD office by December 22.

Chair of the Constitution & Bylaws Committee, in charge of this constitutional amendment, is Max A. Schneider, MD.

AMSAODD members who pass the 1988 exam (given Dec. 17) will be issued certificates in the name of AMSAODD.

Committee Update

AMSAODD is forming a committee on the problems of adolescents and youth, name to be determined.

Any member interested in joining this committee please contact: Peter D. Rogers, MD, Glenbeigh Hospital of Cleveland, 18120 Puritas Road, Cleveland, OH 44135.

Phone: (216) 476-0222.

The Finance Committee seeks an AMSAODD member to chair a **Resource and Development Committee for AMSAODD**.

Contact: Claire Osman, AMSAODD, New York.

AMSAODD will sponsor the **Second National Nicotine Dependence Conference Sept. 21-24, 1989, in Chicago**. Conference chair will again be Richard D. Hurt, MD, of the Mayo Medical Center.

Info: Hermese Bryant in the AMSAODD Chicago office.

The Tobacco Committee's name has been changed to the **Nicotine Dependence Committee**. Chair is John Slade, MD.

New committee **Medical Care in Recovery** met for the first time in Washington last April. Chair Marigail Wynne David, MD, reported that 33 people attended, with another 16 expressing interest. Committee met again in Chicago Nov. 4.

New committee: **Members-in-Training**. Co-chairs Daniel Glatt and David Gastfriend, MD. Includes medical students, house officers, fellows, foreigners in their first year of medical practice.

Sites for three AMSAODD **1990 Review Courses** are set: Atlanta, Chicago, and New York. Site for a Review Course in California will be announced later.

Reminder: the **1989 AMSAODD Review Course** will be held next year in **Orlando, Florida, Oct. 19-21**.

The California Society (CSTOADD) will hold a Review Course in cooperation with AMSAODD in San Diego in Nov. 1989, exact dates to be announced.

Exec. Director Search Continues

Applications for consideration as new AMSAODD executive director are still being accepted by the Search Committee. Qualifications were outlined on p. 3 of the Sept.-Oct. *News*. Send c.v. to Claire Osman, AMSAODD, 12 West 21 St, New York, NY 10010.

Talbott Wins AMA Award

The American Medical Association awarded G. Douglas Talbott, MD, its Distinguished Service Award at the October 1988 AMA Impaired Health Conference. The award is the first of its kind to be presented by the AMA.

Dr. Talbott is an AMSAODD Board member.

AIDS Forum Program Set

AMSAODD's 3rd National Forum on Aids & Chemical Dependency will offer practical yet innovative solutions to many of the dilemmas posed by the AIDS epidemic. The conference, to be held in **Miami Feb. 2-4**, will include four major sessions:

- targeting special populations
(adolescents, Blacks, gay men, women/pediatrics, Hispanic/multicultural minorities, psychiatric/dual diagnosis)
- HIV testing
(pros and cons; update on methods and technologies)
- problems in combining treatment modalities
(methadone vs. abstinence, IV stimulant dependency, clean/free needles, pain management in a CD [chemically dependent] person with AIDS)
- issues (in CD treatment) for the patient, program, and staff.

Each discussion will begin with didactic presentations about integrating AIDS prevention and treatment with CD treatment. Small groups will brainstorm strategies to overcome the barriers involved.

Registration fees: \$250 AMSAODD members; \$275 non members; \$100 spouses, companions, medical students, house officers, fellows. Daily conference rate at Hotel Omni International: \$85 single or double. Each registrant will receive a syllabus. (More information on page 2.)

New AMSAODD Award

AMSAODD will award \$1,000 for the best paper presented by a young investigator at the 1989 Annual Medical-Scientific Conference.

Marc Galanter, MD, conference chair, told *AMSAODD News* that "the award will be designated on the basis of the highest score conferred by the Program Committee for a research paper submitted by an investigator, as primary author, who is within five years of completing his/her residency (for an MD) or a doctorate (for a PhD)."

AMSAODD's meeting in Atlanta next April 28-30 is the society's 20th Annual Medical-Scientific Conference, and the 35th anniversary of AMSAODD's founding.

Eleven disciplines or specialties were represented by the 625 registrants at the 1988 conference in Washington last April. About a quarter of those returning evaluations were in addictions, another quarter in internal medicine, nearly one-third in psychiatry, and 14% in general and family practice.

Requested topics on the evaluations included updates on marijuana, methadone, eating disorders, genetics, CD and chronic pain, addiction and pregnancy--all of which are included in the April 1989 Atlanta program.

Deadline for submission of conference abstracts for the 1989 Atlanta meeting was Nov. 10.

Conference manager: Louisa Macpherson, (203) 227-7084.

Results of Journal Poll

Somewhat less than 10% of our membership responded to the questionnaire, published in the May issue of this newsletter, about their possible desires for a new journal for AMSAODD.

Although a majority appeared to favor an official AMSAODD house organ, and even an entirely new journal--one which would be totally responsive to the needs of our membership--the size of the majority was modest when the issue of willingness to add substantively to our dues was raised.

Your Publications Committee felt that this was not at the present time a clear 'mandate' from our membership in favor of such an expensive undertaking.

On the other hand, our program of offering our membership a large number of journals and texts at a reduced rate is obviously alive and well! A good many of us take advantage of these relatively inexpensive resources by which to remain current and informed in our field. No one asked for a change in the availability of these publications. [See list below]

We will continue to poll you about these issues, and we'll change our current course whenever so directed. In the meantime, let me wish each of you a joyous Holiday Season.

Stanley E. Gitlow, Chairperson
Publications Committee

Journal Subscriptions at Discount

The following subscriptions will be available to AMSAODD members at the listed discount prices, if ordered when paying 1989 dues by Feb. 28, 1989. Dues notices will be mailed to members in mid-December.

AMSAODD's Annual Review: Recent Developments in Alcoholism, Vol. VII	\$42.25
ALCOHOLISM: Clinical & Experimental Research*	70.00
Advances in Alcohol & Substance Abuse	22.50
Alcohol and Alcoholism	40.00
American Journal of Drug & Alcohol Abuse	25.00
Digest of Addiction Theory & Application (DATA)	43.00
Drug & Alcohol Dependence	58.00
Journal of Substance Abuse Treatment	28.00
Journal of Psychoactive Drugs	42.00
Substance Abuse (official publication of AMERSA)	43.00
The Addiction Letter	78.00
The Alcoholism Report	87.00
The Drug Abuse Report	115.00

*Members of RSA (Research Society on Alcoholism) receive this journal at no charge with payment of RSA membership dues.

1989 Charter Peachford National Symposium



“Professionals and Their Addictions”

... an interdisciplinary forum

April 5-8, 1989 – The Waverly Hotel, Atlanta, GA

A special 3 day educational symposium that will explore the unique problems of alcohol and drug abuse treatment for doctors, nurses, counselors, pharmacists, lawyers, clergy and others in high-risk professions.

Featuring: Lectures, workshops and panel discussions covering important aspects of evaluation, intervention, detox, treatment, aftercare and beyond; A special hospital tour and dinner at Charter Peachford Hospital; “Theater in the Round” - an on-stage review of a treatment team at work; and much, much more! Plus, a specially edited textbook will be

prepared from this forum for use by individuals and treatment teams dealing with recovering professionals.

For: Physicians, nurses, program directors, counselors, and all others involved with the organizing, running or administering treatment or treatment programs for high-risk professionals.

And for personnel directors, employers and supervisors of legal and medical professionals, clergy, flight personnel and others in high stress / high addiction occupations.

Our Distinguished Faculty:

Robert Ackerman, Ph.D.
 LeClair Bissell, M.D.
 Reverend John Bolton, M.Div.
 Mitzie Cofer, R.N.,BSN
 Anne Geller, M.D.
 The Honorable Michael Hanrahan
 Michael Healy, M.D.

Thomas Hester, M.D.
 Michael Liepman, M.D.
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Mail to: Conference Information, “Professionals and Their Addictions”,
 P.O. Box 71568, Marietta, GA 30007-1568. Telephone 1-800-451-2151.

Nicotine Inhaler Test Marketing Report

Reports about *Premier*, R. J. Reynolds' new nicotine inhaler, indicate that its test marketing is hardly a hit.

The three test areas, Tucson, Phoenix and St. Louis, received hundreds of thousands of cartons in October, according to the *New York Times*. But initial sales were "slow" and repeat sales even worse.

Last May, AMSAODD officially urged the FDA to regulate this product under the Federal Food, Drug and Cosmetic Act. Among the reasons: that the device "is not a cigarette; its purpose is to deliver the drug nicotine to the user in a dose sufficient to maintain a nicotine dependence." (*AMSAODD News*, May 1988).

In September, AMSAODD's Nicotine Dependence Committee chair John Slade, MD, warned at AMSAODD's 1st National Conference on Nicotine Dependence in Minneapolis that "if it is marketed as a cigarette, *Premier* will make it more difficult to bring under control the terrible epidemic and death caused by tobacco."

The *Times* described the device as "the size and shape of a conventional cigarette. At the burning end, however, a small piece of charcoal-like carbon is all that ignites and burns. The smoker, by inhaling, draws the hot air from the burning piece of carbon" through an oblong-shaped aluminum capsule. The

capsule, embedded in a small amount of tobacco, contains nicotine and flavorings. Each pack costs 20 to 30 cents more than regular cigarettes. Four-packs come with a free lighter and a plastic container for "expired cigarettes."

Among smokers' complaints: unpleasant smell, lacks flavor, doesn't burn like a normal cigarette, too hot to hold.

"...unpleasant smell, lacks flavor, doesn't burn like a normal cigarette, too hot to hold."

State health officials who

are trying to ban this product from their states include the Arizona Board of Pharmacy and the Missouri Department of Health. The FDA is reportedly trying to determine whether *Premier* should be classified as a "drug." AMSAODD President Bean-Bayog wrote to Washington officials again last month, urging FDA regulation of *Premier*.

The U. S. Surgeon General, the NIDA director, and the National Cancer Institute chief are among top federal officials who have written the FDA commissioner urging regulation of the device, according to *The Wall Street Journal*. All are reportedly worried that *Premier* will be even more addicting than cigarettes.

If the FDA decides to regulate the device, an RJR spokesperson told the *Times* that this would be "an effective ban on *Premier* and that it would be withdrawn from the market."

MEDICAL DIRECTOR

The Memorial Hospital of Danville, a 400-bed general acute care hospital, operates a 30-bed inpatient chemical dependency program for adults. We need a physician willing to work part-time as our Medical Director while operating private practice. In addition to salary, the hospital will assist in the development of a successful private practice. The position will include direct patient care, clinical supervision, program planning, marketing and public relations, staff development, and professional training. The Medical Director should be board certified in his/her respective specialty; certification as an addictionologist is desirable. A thorough understanding of the diseases of alcoholism and addictions and treatment methods are essential. Recovering physicians are encouraged to apply. Danville is a city of about 60,000 persons located in Southern Virginia near the mountains and the coast. Nearby metropolitan areas include Greensboro and Raleigh, NC, and Roanoke, VA.

Please direct your inquiries to:

David J. Schwemer

Director of Psychiatry & Substance Abuse
The Memorial Hospital, 142 South Main Street
Danville, VA 24541

(Telephone: 804-799-4423)

EOE M/F

MEDICAL DIRECTOR

Rockford Memorial Hospital, a 473-bed acute care hospital, operates a 40-bed inpatient program for adults. It also operates a 15-bed adult and adolescent facility in Beloit, Wisconsin, as well as two satellite outpatient programs, which offer intensive treatment programs for chemically dependent adults, adolescents, respective family members, and adult children of alcoholics.

We are looking for a full-time Medical Director, whose duties are to include:

Direct patient care, clinical supervision, training and marketing. Applicants need to be board certified in their respective specialties. Certification as an Addictionologist is desirable. Extensive knowledge of chemical dependency and various treatment modalities is essential. Recovering physicians are encouraged to apply. Rockford is located in northern Illinois, approximately 90 miles from Chicago, Milwaukee and Madison.

Please direct inquiries to:

Gary Halbach, Executive Director
Addiction Treatment and Education Program
Rockford Memorial Hospital

Rockford, IL 61103

815/968-6861, Ext. 5201

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Situation Wanted

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ADDICTIONOLOGIST -
AMSAODD Cert, Board Cert, Family Practic. Desire full or P/T med director in CDU. 8 yrs personal recovery. Prefer West Coast area. Write CJS, 2721 SW 108th, OKC 73170. Tel(405)691-0044.

CONFERENCE CRUISE

3rd Annual "Sailing Sober Salts" Jan. 14-21. Special guest speaker Fr. Joseph Martin. Wm Caribbean ports. 10 hrs CEU, CAADAC provider #3N88-132-290. Phone 800-227-1899; outside Calif. 800-247-1899. Write Dean Duncan, Cruise Host, 535 E. Harvard, Fresno, CA 93704.

SUBSTANCE ABUSE PHYSICIAN

FELLOWSHIP. San Francisco VA Med. Center, 2-yr, effective 7/1/89. Need unrestricted medical license; be board eligble/certified. Salary range beg. \$35,800. Contact: Peter Banyas, M.D., VA Medical Center (116E), 4150 Clement St, San Francisco, CA 94121. (415)750-2127

IN MEMORIAM

Psychiatrist **Russell L. Gould, MD**, 72, of Fremont, California, died Sept. 17 of complications from heart bypass surgery in May. He was medical director of two different CD treatment centers in the Bay area from 1973 to 1986.

General practitioner **O. Sune Byren, MD**, of Lidingo, Sweden, died last August.

Lois W., 97, widow of AA's co-founder **Bill W.**, died Oct. 5 in Mt. Kisco, New York. Lois Burnham Wilson was a founder in 1936 of what later became the Al-Anon Family Groups.

Al-Anon's estimated 500,000 members belong to 30,000 groups in 100 countries around the world.

Lois's autobiography, *Lois Remembers*, was first published in 1979. Her last major public appearance was July 5, 1985, in Montreal for AA's 50th birthday and Al-Anon's first international convention. An audience of nearly 40,000 gave Lois an unforgettable standing ovation in the Olympic Park Stadium that night.

Bill Wilson died in 1971.

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BOOKSHELF

Cermak, Timmen L., MD: *Co-Dependence: The Joy of Recovery* (video, 30 minutes) The Johnson Institute, Minneapolis, \$495.

Farley, William J., MD, (moderator): *Intervention Techniques For the Chemically Dependent Adult - The Do's and Don'ts* (video, 45 minutes) Hampton Press Publishing Co., Norfolk, VA, \$195.

Siegel, Larry, MD: *AIDS: Alcohol and Drugs - Perceptions versus Reality* (video, 32 minutes) Healthcare Network, Naples, FL, \$195.

Earle M., MD: *Physician, Heal Thyself! 35 Years of Adventures in Sobriety by an AA 'Old-Timer'* (250 pp.) CompCare Publishers, Minneapolis, \$9.95

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To assure listing of new books, booklets, films, videos, tapes, journals, by AMSAODD members, please send announcements to AMSAODD News, 15 Ridge Road, Cold Spring Harbor, NY 11724. Send review copies to same address for consideration by Publications Committee.

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REGIONAL NEWS

State Chapters Forming

Approval to become the official AMSAODD state chapter was granted to petitioning members in four states by the AMSAODD Board Nov. 6.

California, Florida, Georgia, and Maryland had all submitted the required "Application for Charter as a Chapter of the American Medical Society on Alcoholism & Other Drug Dependencies." Next step: AMSAODD members in those four states will get letters asking if they approve. If a majority do, the AMSAODD Board can bestow official certification.

Signatures of at least ten AMSAODD members are needed for each state petition.

More information is available from the AMSAODD New York office.



Region III Annual Meeting

Region III (seven states in the northeast) held its annual meeting on Nov. 12 in Andover, Massachusetts. "An enthusiastic group of 28 physicians met to share clinical data concerning their work with nicotine dependence, sexual abuse victims, impaired physicians, microcomputers for interactive learning, alcoholism screening in general hospitals, and a variety of other addiction treatment-related subjects," writes conference chair Allan W. Graham, MD, of St. Johnsbury, Vermont.

"The intimate scale of the meeting provided a truly unique opportunity for us to get well acquainted and to build professional bridges. We encourage other regions to consider staging their own annual meetings. 'Small can be especially beautiful,' particularly in medical education."

Region III chair is David Mee-Lee, MD.

"Small can be beautiful, particularly in medical education"



Florida Chapter 2nd Annual Symposium

The Florida Medical Society on Alcoholism & Other Drug Dependencies (FMSAODD), which represented the first state to apply to AMSAODD to become a state chapter, will hold its second annual scientific symposium on Saturday, Jan. 28, at the Bahia Mar Resort in Fort Lauderdale.

Speakers will include three AMSAODD board members: Drs. Sheila B. Blume, Max A. Schneider, and Charles L. Whitfield, as well as Drs. Kenneth O. Johnson, of the National Psychopharmacology Laboratory in Knoxville, and Irl Extein.

Seven hours of CME's are applied for. Registration fee of \$75 includes lunch.

FMSAODD will hold a chapter business meeting after the scientific portion of the day. The group's current president is David P. Myers, MD; president-elect is Richard Tyson, MD.

Information: Art Auer, Conference Coordinator, PO Box 15691, West Palm Beach, FL 33416. Phone: (407) 881-8082.



California Society Announces Two 1989 Meetings

The California Society for the Treatment of Alcoholism and Other Drug Dependencies (CSTAODD), which also has applied to become a state chapter of AMSAODD, will hold its 16th annual meeting on Saturday, March 4, 1989, at The Grand Hotel in Anaheim (near Disneyland). The topic for the CME program is "Psychiatry and Addiction Medicine: Practical Applications in the Treatment of Chemically Dependent Patients."

Another meeting "Legal Aspects of Addiction Medicine - How the Law and Regulations Affect Chemical Dependence Treatment Programs" will be offered Friday and Saturday, June 22 and 23, at the Sir Francis Drake Hotel in downtown San Francisco.

Further information: California Society, 3803 Broadway, Suite 2, Oakland, CA 94611. Phone: (415) 428-9091.



Please send regional news for this column to Editor, AMSAODD News, 15 Ridge Road, Cold Spring Harbor, NY 11724.



LETTERS TO EDITOR

Dear Editor:

Dr. Massman expresses concern that relapse to alcoholism or to other addictions might be more likely if nicotine dependence is treated concurrently (*Letters to Editor*, July 1988).

His concern is appropriate, but such reservations should not become an obstacle which prevents us from exploring how to best deal with a serious addiction, one which affects up to 80% of individuals presenting for help with alcoholism.

The norm in our specialty for many years has been to overlook tobacco. It is often said that this is because so many professionals in the field are still addicted to nicotine, but it also reflects the phenomenal degree to which tobacco use has seemed to be the norm throughout the culture. This is a period of change, and many in the field are reexamining old assumptions and testing new ideas.

While I do not doubt that individual examples can be found in which abstinence from tobacco is blamed for producing a relapse to alcohol, empiric data about the risk is scanty. Reports presented at the First National Conference on Nicotine Dependence in Minneapolis, in fact, suggested grounds for optimism on this issue, especially in the work of Janet Bobo, MSW, and the preliminary report presented by Anne Joseph, MD, MPH.

Systematic studies of this issue need to be done, but a number of clear needs have already been identified. These include:

1. Staff should not smoke at work, and those who smoke off the job should be offered help for becoming abstinent.
2. Nicotine dependence should be explicitly diagnosed when it is present in patients and the staff should formulate a treatment plan for this problem, just as they do for every other problem each patient has.
3. Environments which support abstinence from tobacco, and support systems for recovery from nicotine dependence, should be encouraged within each unit and in the community at large.

Tobacco is not a small problem, and coming to terms with it will take effort and creativity. The Minneapolis conference has shown that there is enormous interest in this, and also that those most active in exploring this clinical challenge are doing so with care and with concern for all the varied problems that our patients have.

John Slade, MD, Chairman
AMSAODD Committee on Nicotine Dependence
Skillman, NJ

Dear Editor:

I am concerned about the combination of codeine and glutethimide [Doriden] known as "Hits, Loads, Doors and Fours." There are a few reports in the literature, but why is glutethimide still available? I have practiced emergency medicine since 1977 and psychiatry for the last three years, and I can think of no medical reason for the use of glutethimide other than for the detoxification of glutethimide dependency.

May I suggest a campaign to eliminate the production of glutethimide, similar to the one conducted against Quaalude? I am willing to help, if you think this would be a reasonable project for AMSAODD to support.

I am a fellow in addictive disorders at Fair Oaks Hospital.
Steven D. Martin, MD
Summit, NJ

AMSAODD Wants Your Opinion

Are there any specific psychotropic drugs which, in your opinion, offer little or no therapeutic purpose?

See Below!

From the Editor:

Regarding the above letter from Dr. Steven Martin, the AMSAODD Board wants to "poll" the membership concerning psychotropic drugs.

AMSAODD wants to know which psychotropic drugs members believe:

- offer little or no therapeutic purpose;
- lack unique properties so as to warrant clinical availability.

Substances with the ability to produce dependence are of particular interest. Some members suggest that this society might develop a dialogue with the FDA in reevaluating the presence of such substances in the U.S. pharmacopoeia.

Please send your comments to Claire Osman, AMSAODD, 12 West 21st Street, New York, NY 10010.

LETTERS

Dear Editor:

On September 15, 1986, President Reagan issued an Executive Order mandating a drug-free federal work place. Some of us expressed considerable concern with the definition of the term "drug" (excluding the drug called ethanol), as well as with the concept of urine testing in general. But this program's development has led recently to circumstances which may have long-reaching effects on the certification processes in our field of addiction medicine.

On July 11, 1987, Congress passed legislation implementing the President's Executive Order (#12564) in Section 503 of the Supplemental Appropriations Act of 1987 (Public Law 100-71).

The required technical and scientific guidelines were published by the Secretary of DHHS in April of this year.

The mandatory guidelines note that a clinical review of positive laboratory findings, along with a medical review of the employee's history and relevant biomedical factors, are essential to the program. Obviously, this requires a physician (Medical Review Officer, or MRO) to be a key and responsible party for the entire algorithm.

A few weeks ago, I received a copy of the *Medical Review Officer Manual*. The exact responsibilities of MRO's are spelled out in this September 1988 guide for implementing the mandatory guidelines for federal work place drug testing programs (DHHS Publication No. [ADM] 88-1526). The *Manual* specifies that an MRO must be a licensed physician with knowledge of substance abuse disorders.

The wisdom of such a requirement, for reasons of diagnostic accuracy, reliability, and perhaps even of confidentiality, must go to the credit of those who helped to prepare the guidelines.

For our purposes, however, the federal government clearly recognizes that physicians, who are responsible for diagnosing and advising care for patients suffering from one of the most common illnesses in this country today, should have special expertise and training in the field of addiction medicine.

How will the authorities who are responsible for such assignments appoint MRO's? On what basis? And if the federal government recognizes such special(?) training, can the rest of us be far behind?

Stanley E. Gitlow, MD
New York, NY

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We are always delighted to hear from AMSAODD readers. Please write a Letter to the Editor - this is your column!



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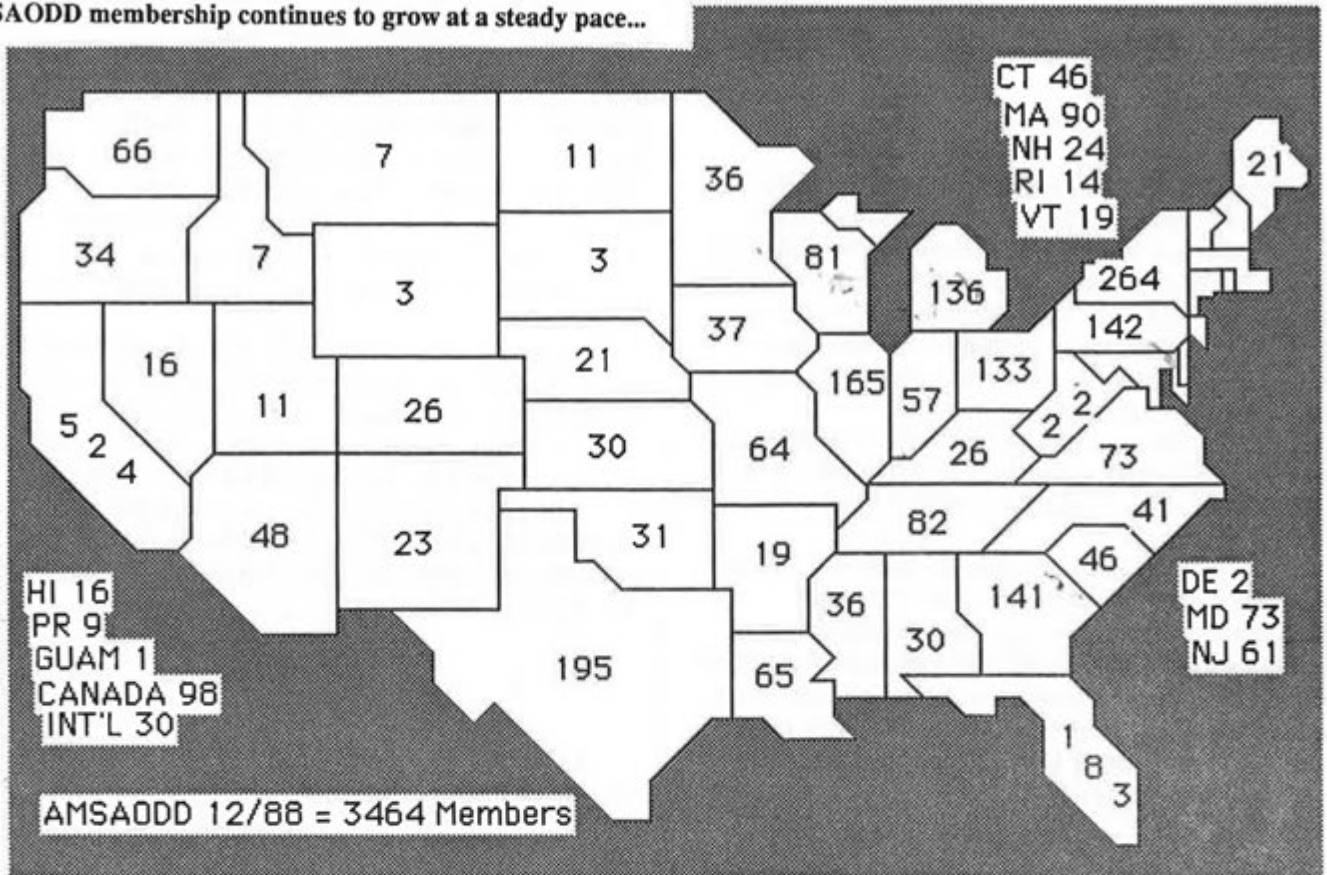
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MEMBERSHIP

New Members

The following physicians joined or rejoined AMSAODD after the September-October issue of *AMSAODD News* went to press:

In September:

Eugene S. D. Archangelo, Calgary, Canada
 Robert N. Baker, Case BC, Canada
 Joel S. Betesh, Philadelphia, PA
 Arthur D. Boxer, Plymouth Meeting, PA
 Cecil Arthur Bradley, Union City, CA
 William M. Burke, West Roxbury, MA
 George Edward Casey, San Jose, CA
 Luther T. Clark, Brooklyn, NY
 Peter J. Clark, Milan, MI
 I. C. Corvalan, St. Louis, MO
 Timothy E. Davis, Elkhart, IN
 William M. Doak, Nashville, TN
 John P. Epling, Leeville, LA
 Karen M. Erde, Portland, OR
 Kathleen Farinacci, Laguna Niguel, CA
 Andres R. Fernandez, Key Biscayne, FL
 Daniel Fields, Elk Grove, CA
 Ronald B. Fleming, Cleveland Hts, OH
 Johnny B. French, San Angelo, TX
 Manuel Edrique Garcia, Miami, FL
 David D. Goldberg, Dayton, OH
 Richard A. Golden, Keyport, WA
 Corwin Peter Groom, Pocatello, ID
 William J. Gross, Brooklyn, NY
 Paul Grossman, Santa Monica, CA
 Christopher F. Hannum, Philadelphia, PA
 John Harsany, Jr., Hemet, CA
 Donnie Joe Holden, Lubbock, TX
 Glen A. Johnston, Detroit, MI
 Thomas Kane, Southfield, M

(Continued next column)

September (cont.)

Andrea L. Key, Oklahoma City, OK
 Robert V. Kiel, Erie, PA
 T. Scott Laird, Gilroy, CA
 Neil S. Levy, Garland, TX
 Jack F. Lynch, Mission Hills, CA
 Lawrence D. Mass, New York, NY
 Olen Dale Maxwell, Lithia Springs, GA
 William M. McConahey, South Boston, VA
 Robyn J. Mitchell, Coronado, CA
 Charles G. Perl, Pompano Beach, FL
 Rashanida Petchprapa, Staten Island, NY
 Joseph A. Piszczor, Chicago, IL
 Richard H. Reel, West Des Moines, IA
 Bernice Roberts, Tucson, AZ
 Brian M. Roberts, San Luis Obispo, CA
 Edward Robinson, Rancho Palos Verdes, CA
 Richard Ross, Baltimore, MD
 Joy P. Ruiz, Seattle, WA
 Michael Edward Scott, Tucson, AZ
 Danny R. Sessler, Baraboo, WI
 David James Silas, Jr., Jonesboro, AR
 Joel Franklin Smith, Palm Beach Gardens, FL
 Alan E. Sosin, Philadelphia, PA
 Bruce R. Steinberg, Sherman Oaks, CA
 John A. Stocks, New Orleans, LA
 James B. Talmage, Cookeville, TN
 Kenneth W. Thompson, Leesburg, FL
 Donald D. Van Dyken, Reno, NV
 Sara C. Vizcay, Temple, FL
 C. Kevin Watt, Springfield, MO
 Edward J. Weiner, Dallas, TX
 Malcolm C. Young, Augusta, MI

In October:

Lloyd Roberts, Southport, CT
 Thomas Jay Quam, Las Vegas, NV
 Jean Manzi, Montreal, Canada
 Leonard S. Brahen, Woodmere, NY
 James E. Hines III, Baton Rouge, LA
 Charles E. Curtis, Lake Park, FL
 Robert Goebel, Southbury, CT
 Gregory Barclay, Memphis, TN
 Charles D. Bess, Sarasota, FL
 Mark S. Noveck, Lawrenceville, NJ
 Narashimhan L. Narashimhan, Queens Village, NY
 Olivia Madrid Elia, Troy, MI
 James A. Turner, Terre Haute, IN
 Roy H. Morton, Vancouver, Canada
 Robert O. Morton, Waurika, OK
 Chris Dombrowski, Margate, NJ
 Cheryl Paizis, Glendale, CA
 Cholette Pierre, Montreal, Canada
 Robert A. Wolf, Detroit, MI
 Radwan R. Khuri, Memphis, TN
 Louis Frederick Vossel, Jr., Cookeville, NJ
 Steven E. Rubin, Marblehead, MA
 Joseph Paladino, Palm Desert, CA
 Shyam M. Puppala, Chicago, IL

Med Students, House Officers

Membership chair LeClair Bissell, MD, urges members to recruit medical students and house officers, particularly now that there is a new Members-in-Training Committee.

Annual dues for these categories are relatively modest: \$10 for medical students, \$30 for house officers and fellows.

Retired Members

At its November 6 meeting, the AMSAODD Board approved 18 physicians for "retired member" status.

Retired members pay no annual dues.

**AMSAODD
CALENDAR**

Meetings sponsored or co-sponsored by AMSAODD
(one-time listing for co-sponsored conferences).

To assure listing, please send information to Lucy B. Robe, Editor.

- ◆
- **Early Diagnosis for Alcohol and Other Drug Problems:**
A National Video Teleconference: Jan 24, 1989
(previously scheduled for Dec. 7, 1988).

Program leader: David C. Lewis, MD.
Brown University DATA, Seminar Division, 80 S. Early St,
Alexandria, VA 22304.
Phone: (800) 336-4776.

- ◆
- **2nd Annual Symposium & Annual Meeting:**
Ft. Lauderdale, Jan. 28

Sponsored by Florida Medical Society on Alcoholism &
Other Drug Dependencies. Art Auer, Conference Coordinator,
PO Box 15691, West Palm Beach, FL 33416.
Phone: (407) 881-8082.

- ◆
- **AMSAODD's 3rd Annual Forum on AIDs and Chemical
Dependency: Miami, Feb. 2-4.**

Conference Information (AIDS),
PO Box 81691, Atlanta, GA 30366
Phone: (404) 458-3382.

- ◆
- **AMSAODD Board Meeting: Miami, Sunday, Feb. 5.**
Some AMSAODD committees will meet that weekend.
- ◆

- ◆
- **10th Annual Training Institute on Addictions:**
Clearwater Beach, FL, Feb. 9-14.
Institute for Integral Development, PO Box 2172,
Colorado Springs, CO 80901.
Phone: (719) 634-7943.
- ◆

- ◆
- **Psychiatry and Addiction Medicine: Anaheim, Mar. 4**
California Society for the Treatment of Alcoholism and Other
Drug Dependencies, 3803 Broadway, Suite 2, Oakland, CA
94611.
Phone: (415) 428-9091.
- ◆

- ◆
- **Current Trends - Cocaine: Cleveland, Mar. 31-Apr. 1**
Christopher L. Adelman, MD, Saint Vincent Charity Hospital,
2351 East 22 St, Cleveland, OH 44115.
(216) 363-2580.
- ◆

- ◆
- **1989 AMSAODD Medical-Scientific Conference**
(also the NCA Forum): **Atlanta, April 27-30**
AMSAODD Board: Apr. 26
Ruth Fox Course: Apr. 27
AMSAODD Annual Breakfast Meeting: Apr. 28
AMSAODD Awards & Certificate Ceremony
Luncheon: Saturday, Apr. 29
AMSAODD, 12 West 21 St, New York, NY 10010.
Phone: (212) 206-6770.
- ◆

- ◆
- **AMSAODD 2nd National Conference on Nicotine
Dependence: Chicago, Sept. 21-24**
AMSAODD, 6525 West North Ave, Oak Park, IL 60302.
Phone: (312) 848-6050.
- ◆

- ◆
- **AMSAODD Review Course: Orlando, FL, Oct. 19-21.**

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