



NEWSLETTER

Volume III, No. 3

May 1988

Published Bi-Monthly

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LONG-RANGE GOALS
FOR AMSAODD

When the AMSAODD Executive Committee met as a long-range planning committee last summer, seven major five-year objectives emerged for the society. These have been discussed by the full AMSAODD Board.

1. Achieve recognized board status for certification in chemical dependence. Careful discussion, deliberation, and consultation must take place, to determine its form and structure and how best to bring it about.
2. Chemical dependency fellowships (tied to #1): that would adhere to AMSAODD training guidelines. AMSAODD would help formulate guidelines and would accredit programs through site visits. We would not establish or finance fellowships, but would encourage medical schools and other organizations to do so.
3. A fund-raising program for endowment purposes, and as reserve for possible lean years; also to diversify revenue sources.

4. Recruit at least 500 new members annually. Active and visible committees are one way to attract new people. Setting annual membership goals for each state, rather than an overall national membership goal, might encourage state chairs to be more active in recruiting.

5. Develop additional guidelines and positions on clinical issues. This is a major reason for AMSAODD's existence. A two-track system was proposed: the traditional slow and deliberative track, with its substantive committee consideration and recommendation; and a fast track via the Executive Committee, for a quick or emergency response.

6. Create and disseminate a core curriculum for CME of nonaddiction specialists. Once AMSAODD does this for

physicians, we might introduce our content and process to other health professions.

7. Seek joint projects with research organizations and societies, not necessarily ongoing, but on specific issues and topics. RSA (Research Society on Alcoholism) and CPDD (Committee on Problems of Drug Dependence) are possibilities for this.

We need your feedback, your comments, your criticisms. We welcome your recommendations about other important long-range objectives for AMSAODD. If we hear from you, this newsletter will report your observations. Please write to me at AMSAODD, Suite 204, 6525 West North Ave, Oak Park, IL 60302.

E. M. Steindler
Executive Director

AMSAODD's board of directors had nearly finished a day-long meeting on Wednesday, April 20, in Washington, DC, when the news broke. The U.S. Supreme Court upheld the authority of the Veterans Administration to designate alcoholism as "willful misconduct," rather than as a disease, in extending benefits.

Media interest in this decision was high in general, and of particular interest to the CD field. Fifteen hundred people were coming to Washington for the AMSAODD Medical-Scientific conference and the concurrent NCA Forum. Copies of the 35-page Supreme Court opinion were made available to interested AMSAODD members.

"This litigation does not require the Court to decide whether alcoholism is a disease whose course its victims cannot control," stated the published proceedings in Section IV, p. 16. "It is not our role to resolve this medical issue on which the authorities remain sharply divided."

AMSAODD physicians disputed the Supreme Court's assertion that medical opinion is divided on whether alcoholism is a disease. In 1954, AMSAODD--for many years the only national medical society on alcoholism---began as the New York City Medical Society on Alcoholism. The AMA has long identified alcoholism as a disease, and most other medical organizations have since followed suit.

A group of AMSAODD members drafted a statement that Wednesday afternoon. The executive committee met later to recommend a course of action to the membership.

Thursday afternoon, during the Ruth Fox Course for Physicians, AMSAODD staff circulated an official AMSAODD position statement which was signed by 235 physicians. Over 100 more signed it during the AMSAODD annual breakfast and business meeting Friday morning. This generated a press release, planned at a midday meeting of the executive committee, written, and delivered to Washington media by messengers on Friday afternoon:

AMSAODD'S STATEMENT
TO THE MEDIA

"We, the undersigned members of the American Medical Society on Alcoholism and Other Drug Dependencies (AMSAODD), are physicians who care for alcoholic and drug dependent people.

"We are dismayed and troubled by the confusion which has resulted from the Supreme Court's April 20, 1988, decision which can be interpreted to mean that alcoholism, when it is not a result of underlying mental disorder, can be defined as willful misconduct."

"Medical expertise in this field is not divided on this question. Although there will always be a diversity of views, the vast preponderance of medical practitioners with knowledge and expertise in these areas agree that alcoholism is a primary disease which may have genetic components, symptoms, physical and psychological findings, a course, response to treatment, complications, and--with treatment--an excellent prognosis.

"We, the undersigned (350 physicians) strongly reaffirm AMSAODD's 1983 policy statement:

ALCOHOLISM AS
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."

Nearly 700 participated in AMSAODD's 19th annual Medical-Scientific Conference April 21-24 in Washington, DC (Crystal City). This was almost 100 more than came to last year's Cleveland conference, and nearly 300 more than the 1985 Washington conference, according to program chair Marc Galanter, MD.

Another 800 registered for the concurrent NCA National Alcoholism Forum.

AMSAODD general sessions included Prospective Payments for Substance Abuse Treatment; Psychosocial Aspects of Addiction; New Initiatives in Alcoholism and Other Drug Problems; Biomedical Aspects of Addiction; AIDS, Alcohol and Other Chemical Dependencies; Cocaine Dependence; NIAAA/ARUS Symposium on Biological Markers; Treatment Selection by Patient Groups; Dual Diagnosis: Epidemiology and Patient Characteristics; The Dually Diagnosed: Clinical Management Issues; Nicotine Dependence; NIDA Symposium on Cocaine; After Aftercare--What Then?; Antagonists: Basic Research and Clinical Applications.

Eight courses and five workshops covered other, more specialized subjects, from compulsive gambling and incest to adolescent dual diagnosis and short-time inpatient detox. These attracted from 40 to 100 registrants each.

The annual daylong Ruth Fox Course for Physicians, directed this year by Drs. Lynn Hankes and Charles L. Whitfield, had an all-time record high of 394 registrants on April 21. Eight presentations covered detox, AIDS, tobacco addiction, American Indians, AA, Family, Spousal Abuse and Sexual Assault, and Neurobiology. Ten of the eleven speakers were physicians.

In addition, 23 AMSAODD committees and subcommittees met beginning April 19, as did a number of state groups, the AMSAODD Board, and AMSAODD's general membership.

Many of the conference presentations are available on audiotape, for \$8 each, from Infomedix, 12800 Garden Grove Blvd, Garden Grove, CA 92643.

Phone: (toll-free): 800-367-9286.

The AMSAODD Board approved the following statement, which explains the meaning of AMSAODD certification:

AMSAODD offers a certification examination for physicians who meet the following criteria:

1. Members of AMSAODD.

2. A license, in good standing in the state in which it is issued, to practice medicine.

3. Experience in clinical practice, and involvement in the field of alcohol and/or other drug dependency, as determined by AMSAODD.

The AMSAODD certification process includes an exam which is a test of knowledge.

While certification does not certify clinical skill or competence, it does identify physicians who have demonstrated knowledge in diagnosis and treatment of alcoholism and other drug dependencies.

The AMSAODD certification process is not a Board Certification. AMSAODD is not a member of the ABMS (American Board of Medical Specialties).

REMINDER

No AMSAODD certification exam in 1989, but one is scheduled for 1990.

AMSAODD review courses will be given in 1989.

Next year will be AMSAODD's 20th Annual Medical-Scientific Conference, and the 35th anniversary of AMSAODD, which was founded in 1954 as AMSA (American Medical Society on Alcoholism).

Conference dates: April 27-30, 1989.

Place: Hyatt Regency Hotel
Atlanta, GA.

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CIGARETTES ADDICTIVE:
U.S. SURGEON GENERAL'S NEW REPORT

"Cigarettes and other forms of tobacco are addicting in the same sense as are drugs such as heroin and cocaine," declared U.S. Surgeon General C. Everett Koop, MD, on May 16. Dr. Koop's 618-page, seventh Report on smoking and health reportedly synthesized a review of over 2,000 scientific articles and studies by over 50 scientists. Of the estimated 50 million "tobacco addicts" in this country, the CDC says up to 85%--or 42-1/2 million--claim they want to quit smoking.

The Report cites 171 studies as proof that the nicotine in cigarettes and other forms of tobacco addicts smokers, and that:

- nicotine is a psychoactive drug;
- users develop tolerance to nicotine;
- patterns of tobacco use are regular and compulsive;
- nicotine causes physical dependence characterized by a withdrawal syndrome accompanying abstinence.

NICOTINE AS ADDICTIVE
AS COCAINE

"When the country realizes that nicotine is a drug," says Dr. Koop, "there could be a groundswell to have tobacco regulated."

Asked about an age limit to restrict sales to minors, he quipped, "I would set it at about 75." Dr. Koop is a former smoker.

He has a suggestion for a warning label: "Nicotine is just as addictive as heroin and cocaine."

According to the Surgeon General, the average smoker tries to quit five times before achieving success--a relapse rate echoed by heroin and cocaine addiction.

In the Report, the criteria used to determine that cigarettes and other forms of tobacco are addictive, were "standard" for defining addictive drugs.

"For many smokers, a genuine desire to quit and, if necessary, persistent and repeated attempts to quit may be all that is necessary," said Dr. Koop. "For others, self-help materials, formal treatment programs, and nicotine replacement therapy may be needed and should be readily available."

John Slade, MD, chair of AMSAODD's Tobacco Committee, told AMSAODD Newsletter that

the Report is "thorough and compelling. It includes a detailed review of treatment approaches, and discusses nicotine in terms we're used to when we talk about other drugs." Dr. Slade further said that "of all the Surgeon General's smoking reports, this one is the most directly useful to the membership of AMSAODD."

REPORT AVAILABLE NOW

Write for "1987 Surgeon General's Report" from:

Office of Smoking and Health
Technical Information Center
5600 Fishers Lane
Park Bldg., Room 110
Rockville, MD 20857.

AMSAODD URGES FDA
TO CONTROL NICOTINE DEVICE

On behalf of the 3,200 AMSAODD members, President Margaret Bean-Bayog, MD, wrote the FDA May 6th asking it to regulate the proposed new "smokeless cigarette" under the Federal Food, Drug and Cosmetic Act.

She said the device, developed by the R. J. Reynolds Tobacco Co., "is not a cigarette; its purpose is to deliver the drug nicotine to the user in a dose sufficient to maintain a nicotine dependence."

Dr. Bean-Bayog declared that the proposed smokeless cigarette would be an ideal starter product for teenagers, "the group in which virtually all new tobacco use occurs," and that among current smokers it would "promote denial about the hazards of tobacco use in a powerful way," making it more difficult for them to stop smoking.

She also wrote the FDA that AMSAODD "is concerned that this product may be modified by the user to deliver drugs other than nicotine. It may be possible to inject other drugs of abuse into the product's chamber, permitting their ready inhalation in an undetectable manner."

In recommending that the "smokeless cigarette" be regulated by the FDA, AMSAODD has endorsed the petition filed with that agency by the AMA on April 25.

BOARD APPROVES
AMSAODD POLICY ON
NICOTINE DEPENDENCE & TOBACCO

AMSAODD recognizes that nicotine is the psychoactive drug in tobacco, and that regular tobacco use leads to addiction in a high proportion of users.

Nicotine dependence, the most common form of CD in the U.S., is especially prevalent in alcoholics and other drug dependents.

Chronic tobacco use causes illness, disability, and more than 350,000 premature annual deaths in the U.S. alone.

Tobacco use harms nonsmokers, too.

The general public seriously underestimates the magnitude of tobacco's risks.

Since smoking cessation has beneficial effects on health and longevity, treating nicotine dependence is expected to reduce this addiction's complications.

The widespread notion that nicotine dependence is best left untreated, during the course of treatment for other drug dependencies, lacks empiric support.

Nicotine dependence is best regarded as a primary medical problem, with tobacco-related diseases viewed as direct consequences.

The medical profession's traditional view of tobacco use as a risk factor for other diseases, and not as a primary problem in itself, has impeded developing optimal treatment methods for patients addicted to nicotine.

AMSAODD advocates and supports:

- 1) establishing a 21-year-old minimum purchase age for all tobacco products;
- 2) changing government policies, including:
 - FDA to regulate nicotine-containing products;
 - eliminating subsidies and other assistance which encourage production/export of tobacco;
 - increasing state/federal taxes;
 - strengthening warning labels;
- 3) public education to include:
 - teaching youngsters early about addiction/health hazards;
 - countering seduction of tobacco ads with public service announcements and paid marketing programs on hazards of smoking, and methods to quit smoking;

4) increased emphasis on research, professional education, clinical expertise in nicotine dependence, to include:

- promoting research;
- training health professionals to see nicotine dependence as a primary medical problem;
- teaching about the dependency process and cessation methods in CME courses and professional education programs;
- teaching that nicotine dependence should be diagnosed and treated along with other drug dependencies;
- exploring mechanisms for third party reimbursement for nicotine dependence treatment by qualified health professionals using clinically recognized methods;

5) developing smoke-free policies by all health-care facilities;

6) developing a liaison network with other professional societies on issues of mutual interest related to tobacco.

(The above is somewhat condensed. The complete statement is available from AMSAODD's New York Office. Ask for "Position Statement on Nicotine Dependence and Tobacco," approved by the AMSAODD board of directors on April 20, 1988.)

REGISTER NOW FOR AMSAODD'S
NICOTINE DEPENDENCE CONFERENCE

Registration forms are now available at AMSAODD's Chicago office, 6525 West North Ave, Ste 204, Oak Park, IL 60302, for AMSAODD's first national conference on nicotine dependence, co-sponsored by The Minnesota Smoke Free 2000 Coalition.

Conference dates: Sept. 22-25, 1988.

Place: Hyatt-Regency Hotel, Minneapolis.

Participants: Any health care professional who deals with smoking patients.

Objectives of the faculty of 25, which includes 12 physicians, include:

- update diagnosis and treatment of nicotine dependence, and suggest ways to assist smokers to quit;
- review the psychopharmacology of nicotine, and better define the concept of nicotine dependence;
- review current efforts to make medical facilities (including CD units) smoke-free, and to make smoking cessation an integral part of CD treatment.

Self-Help groups (AA, Al-Anon, Smokers Anonymous) will meet both mornings and evenings.

Internist sought for inpatient/ outpatient hospital-based program in Long Island, NY. Innovative approach to addiction and patient care encompassing nutrition, allergy and toxicology into the best of internal medicine. Competitive compensation.

CV to: Box K, AMSAODD, 6525 W. North Ave, Oak Park, IL 60302

Addictionologist

associate w/an AMSAODD cert. addictionologist to manage a 21-bed c.d. unit. Located in a 76-bed psych hosp on campus of 250-bed medical /surgical hosp. Post academics exist. For more info contact GAI, 950 East Paces Ferry Rd, #1455, Atlanta, GA 30326. Phone: (404) 364-0001.

Physician for Bio-Chemical Dependency Unit, small community hospital, resort area. Mix of patient contact, treatment supervision; knowledgeable about addictive diseases. Unit successfully operating 4+ years.

Contact: Administrator, Ellenville Community Hospital, Rt. #209, Ellenville, NY 12428, or call (914) 647-6400.

Phone numbers for Mercy Hospital ad in March issue were missing.

Doctors Needed

Iowa

Phone: 319-875-7101
319-875-2776

SITUATION WANTED

Board certified Family Practitioner soon to be AMSAODD certified, desires P/T or F/T work in addiction field. 7 yrs in recovery, 5 yrs experience in this field. Qualified to direct a medical detox and rehab program. Nrm New Jersey, will not relocate. Write: L.D.R. Box 333, Mountain Lakes, NJ 07046.

Western Medical Personnel, Inc.

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Director of Physician Recruitment

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for 500-bed gen'l hospital w. 30-bed adult inpatient CD program.

Work P/T as medical director while operating a private practice.

Direct patient care, clinical supervision, program planning, marketing, PR, prof'l training. Board certified in specialty required, addictionology certification desirable. Recovering physicians encouraged. Write/

call: David Schwemer, Director, Substance Abuse Center, Memorial Hospital, 142 S. Main St, Danville, VA 24541. 804-799-4423

PSYCHIATRISTS: Board eligible or certified, wanted for fulltime salaried positions in rapidly expanding, multiple disciplinary team.

Private inpatient and outpatient practice, gulf coast of Florida.

Chemical dependency, children of alcoholics and adult CoA issues, varied addictive and psychiatric disorders, some research.

Send CV, write, or call: Leslie G. Brewer, D.O., Exec. Director,

Center for Problem Resolution, 1793 Penelope Lane,

Largo, FL 34644. Phone: (813) 585-9986

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Division of Chemical Dependency, Milwaukee Psychiatric Hospital, in affiliation w Dept. of Psychiatry, Medical College of Wisconsin, and our private practice group

Comprehensive two-year training program.

SALARY: \$25,000 plus fringe benefits

AVAILABLE: July 1, 1988

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Telephone: (414) 259-9000

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67 Schermerhorn St, Bklyn, NY 11201

FELLOWSHIP FOR M.D.

in alcohol-drug dependence

University of Minnesota

Contact Dr. Joseph Westermeyer

Box 393, UMHC

420 S. E. Delaware Street

Minneapolis, MN 55455

Further info: (612) 626-4971

SECAD 1988

Come Share the Experience!

The Southeastern Conference

on Alcohol and Drug Abuse

Nov. 30 - Dec. 4, 1988

Atlanta, Georgia

800-845-1567 912-742-1

CME credits applied for

SITUATION WANTED

Internist / Addictionologist

seeks medical directorship

or similar with

chemical dependency facility

Respond: Box L, AMSAODD

6525 West North Ave

Oak Park, IL 60302

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

Dear Editor:

At the recent AMSAODD conference in Washington, DC, prospective pay, DRG length and severity of illness were all competently discussed by the speakers. However, I was struck by the fact that not one of the speakers talked about the patient.

It shows how 3rd party payers can direct our attention.

As the speakers pointed out, the present governmental policies not only do not take patient welfare into consideration, but they can, do and have harmed them. It is not unexpected that the government has implemented various measures with cost control as their basic goal, measures not consistent with good medicine. That these policies undermine the traditional physician-patient relationship is evident throughout the U.S.!

A major portion of blame rests squarely with physicians. We have abdicated our responsibility to protect the physician-patient relationship and preserve the fee for service traditional method of payment.

HMO's are not the solution. Dr. [Robert] Niven said that we are now having to pay the price of decisions based on wrong statistics. To correct this situation AMSAODD members must agree on desirable levels of care and learn to document and publish needed studies of treatment outcomes.

While practices must be run on a businesslike basis, the extent to which "business wonder" types exert their influence must not be the major controlling factor.

To help prove a point, I'm sure many of you have been referred a "client" instead of a "patient." Physicians have patients, not clients or "customers."

R. P. Gardine, DO
Northville, MI

In her March 1988 letter to the AMSAODD Newsletter, Dr. M. M. expressed an interest in returning from retirement into the field of addiction medicine. She asked for suggestions and possibilities for someone who has been out of medicine for many years, and who is in recovery from alcoholism.

I would encourage Dr. M. M. to request an up-to-date list of clinical chemical dependency fellowships from Claire Osman, AMSAODD administrative director, at our New York office. The list includes more than 20 fellowship programs around the country, all seeking physicians who are interested in the field of addiction medicine. Programs vary from two-year academically-and-research-based fellowships, to one-year clinically oriented fellowships based primarily at treatment centers. All would be happy to consider Dr. M. M. for their programs.

This could be the most worthwhile year that Dr. M. M., and other physicians in similar situations, could spend in an effort to insure productive and satisfying careers.

James A. Halikas, MD, Chairman
AMSAODD Fellowship Committee

Dear Editor:

At a conference in San Diego this year, Dr. Fingarette said he could understand that excessive consumption of alcohol causes diseases (liver damage, withdrawal).

However, he stated that he would not accept [the idea of] an alcoholic, who has been sober six months, taking that first drink again due to a disease. He has also stated that alcoholics can learn to drink moderately.

I believe our job [in AMSAODD] is to educate people that addictive drugs, in those susceptible, can involuntarily produce physical/chemical changes in the brain that cause drug-seeking and -taking behavior.

P. Joseph Frawley, MD
Santa Barbara, CA

FROM THE PUBLICATIONS
COMMITTEE CHAIR

p. 8

Some three years ago, your board polled our membership for a consensus about the society's major publication, Alcoholism, Clinical and Experimental Research (familiarily known as the "Blue" Journal). At that time, the Blue Journal was co-owned by the Research Society on Alcoholism (RSA) and AMSAODD.

The poll's results confirmed the AMSAODD Board's impression: while our membership respected the scientific integrity of the Blue Journal, it believed that the clinical content reflecting our interests and needs was lacking. Apparently the Blue Journal could not adequately serve two societies with surprisingly disparate publication aims. On the one hand, RSA wanted maximal pagination for rapid publication of membership-generated research. On the other hand, AMSAODD wanted reviews of clinical research. On that basis, the AMSAODD Board rescinded its Blue Journal publication responsibilities. However, we continued to offer subscriptions, at a reduced fee, to interested members. AMSAODD also guaranteed a substantial number of subscriptions during the journal's first year of change.

Many of us in active roles were convinced that a leaner and more responsive Blue

Journal would result. The most recent communication from Williams & Wilkins (its publishers) has confirmed this.

Your publications committee and board believe that AMSAODD is now ready to consider our own publishing needs and desires. For almost two years, we have enjoyed the opportunity to subscribe to a wide variety of chemical dependency publications at very good discounts.

Now we'd like to know how you feel. Have you reached specific conclusions about what you want to see in your own journal? Does such a journal currently exist? Are there a number of them? Should we undertake this fiscal responsibility, or are there more than enough journals already published, available, and sufficiently specific for AMSAODD's needs? Once again, we need your ideas and guidance.

Please take a few moments to answer the questions on the enclosure, fold it as directed, plant a sticky picture on it, and place it in the correct receptacle. As before, we will respond to your consensus.

Stanley E. Gitlow, MD, Chairman
Publications Committee

CHARTER MEDICAL CORPORATION

Alcohol and Addictive Disease Programs

Charter Medical Corporation is one of the nation's leading providers of programs for the treatment of alcoholism and chemical dependency. Currently, we are seeking **psychiatrists** or other **physicians** who have interest in or experience with alcoholism and addictive disease.

Positions are available throughout the country including the following locations:

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| -- Corpus Christi, TX | -- Los Angeles suburb |
| | -- Colby, KS |

For consideration and additional information about these or other practice opportunities, please contact:

Ms. Donna Gabel, Charter Medical Corporation
577 Mulberry Street, P.O. Box 209, Macon, GA 31298
Phone: 1-800-841-9403 or 1-800-342-9660 (Georgia only)

Journal Questionnaire

1) Should AMSAODD officially embrace a single journal, consonant with our clinical interests, which every member would receive?

Yes _____ No _____

2) If yes, should AMSAODD start its own, new journal?

Yes _____ No _____

3) Would you be willing to have your dues increased to pay for an AMSAODD journal?

Yes _____ No _____

4) If you want an official relationship but without starting a new journal, with which journal(s) should AMSAODD seek such a relationship?

- a) _____
- b) _____
- c) _____

5) Having considered the above, should we at this time simply continue our present journal policy (offering discounted subscriptions to many different journals)?

Yes _____ No _____

6) Comments (for those of you with limited discipline!)

No envelope is necessary. This questionnaire is designed as a self-mailer. Just fold in thirds and staple or tape so AMSAODD New York address shows. But please don't forget a first-class (25-cent) postage stamp!

(fold here)

Journal Poll
AMSAODD
12 W. 21 St.
New York, NY 10010

Place
Stamp
Here

AMSAODD
American Medical Society on Alcoholism
& Other Drug Dependencies
Attn: Claire Osman
12 West 21st Street
New York, NY 10010

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Mary Roby, CAC
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Basic requirements are:

- ~Degree of Doctor of Medicine
- ~License to practice medicine in N.C.
required for employment
- ~Good health
- ~Successful administrative experience
- ~Demonstrative communication skills
- ~Demonstrative knowledge in addictionology

Letter of application, accompanied by detailed
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Medical Director Search
N.C. Medical Society
P.O. Box 27167
Raleigh, N.C. 27611

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800 Robson Street, Vancouver, British Columbia

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- "MY NAME IS SHAME"
Father Leo Booth, C.A.C.
- "OVERVIEW: ADOLESCENT
CHEMICAL DEPENDENCE."
Martha A. Morrison, M.D.
- "WHY SHOULD MEDICINE BE
INVOLVED IN THE TREATMENT OF
ALCOHOLISM?"
Stanley E. Gitlow, M.D.
- "CRITICAL ISSUES AND PROBLEMS
RELATING TO EMPLOYEE ASSISTANCE
PROGRAMMES."
Joe Pursch, M.D.
- "UPDATE ON CURRENT RESEARCH:
ROLE OF GENETICS IN THE EXPRESSION
OF ALCOHOLISM."
Marc Schuckit, M.D.

FACULTY:

- FATHER LEO BOOTH, C.A.C.
- MILICENT BUXTON, R.N.
- STANLEY E. GITLOW, M.D.
- FRED HARDER, M.D.
- DARRYL S. INABA, Pharm. D.
- DAMIAN McELRATH, Ph.D.
- MARTHA A. MORRISON, M.D.
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- "STANDARDS OF CARE IN THE DETOX-
IFICATION OF ADDICTED PATIENTS"
Darryl Inaba, Pharm. D.
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- "VICTIMISATION: LET THE HEALING BEGIN"
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FOR MORE INFORMATION, CONTACT:

MARGARET WOODWARD, A.M.W.
OR DEBORAH WOODLEY, R.N.

1-(604)-734-5333

The CFPG, AAFP, AMSAODD have approved the course for 12
credit hours plus 1.5 hours for each workshop attended. Maximum
number of workshops—5. Registration fee \$265.00; workshops
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NEW MEMBERS

The following physicians joined or rejoined AMSAODD after the 1988 membership directory went to press:

In March:

Patricio M. Andres - Oxnard, CA
 Bruce E. Baker - Leroy, NY
 David J. Baker - Victoria, BC, Canada
 Nicholas C. Bellios - Waukegan, IL
 Laura L. Bernstein - Oakland, CA
 Ethan E. Bickelhaupt - Topeka, KS
 William Paul Bishop - Kamloops, BC, Canada
 Tilby B. Brian - Waverly, MN
 Geoffrey Dibella - Bowling Green, NY
 Michael M. Dullnig - Sacramento, CA
 Douglas C. Evans - Rochester, NY
 Patrick J. Fay - Vancouver, BC, Canada
 Wallace J. Gasiewicz - Oxford, MI
 Robert D. Gilbert - Monroe, LA
 Charles L. Gover - Palm Beach, FL
 Michael C. Hakala - Seattle
 Patrick T. G. Hennessey - Honolulu
 Sung-Hyo Peter Hong - Battle Creek, MI
 Jacks T. Johns - Chicago
 Robert N. Jones - San Antonio
 Tom H. Jordan - Gainesville, GA
 Indira M. Kailas - New Orleans -
 Geoffrey P. Kane - Rye, NY
 Fred N. Karaffa - Granville, OH
 Stephen H. Kozlowski - Downers Grove, IL
 James J. Kramer - San Diego
 Cathy Lindsay - Castro Valley, CA
 Ernesto Marrero Lopez - Bayamon, P.R.
 Eric E. Loranger - West Bloomfield, MI
 Patrick McNamara - Wauwatosa, WI
 Janak K. Mehtani - Fair Oaks, CA
 Stephen I. Merlin - Moody, AL
 Craig A. Phelps - Elk City, OK
 James C. Rich - Waukegan, IL
 James Michael Sambs - San Diego, CA
 Norman Silversmith - West Palm Beach, FL
 George Freeman Soloman - Sepulveda, CA
 K. Kwang Soo - Milwaukee, WI
 Erica W. Swegler - Denison, TX
 William Ferrell Taylor - Long Beach, CA
 Harold D. Thiessen - Mustang, OK
 Ernesto Vasquez - Columbus, OH
 Akhileswari C. Yeshwant - S. Barrington, IL

In April:

Stephen S. Able - Mountain Home, TN
 Carol Bhagan-Khan - Curepe, Trinidad
 Tulio J. Canizares - Morristown, NJ
 Herbert L. Chambers - Dallas
 Mary H. Closser - Ann Arbor, MI
 Eugene M. Dematte - Tampa, FL
 Andrew Dibartolomeo - Copley, OH

W. Travis Ellison - Greer, SC
 Diego Rodrigues Escobar - McAllen, TX
 Robert Arthur Evans - Tucson, AZ
 Lawrence Friedman - Boston
 Karen Guadagnini - Hackensack, NJ
 Jeffrey S. Jenkins - Columbus, GA
 J. William Johnson - Winter Park, FL
 Elliot Kornhauser - Laguna Beach, CA
 Joseph Lebenzon - Los Angeles
 Cdr. Elizabeth Ledbetter - San Diego
 Judith Martin - Oakland, CA
 James M. Morrison - Worcester, MA
 Janice Keller Phelps - Bellevue, WA
 Gregory L. Phelps - Richburg, SC
 Timothy O. Rowe - Mahopac, NY
 Luanne Ruona - Alexandria, VA
 William Santoro - Laureldale, PA
 Robert D. Schrantz - Ottumwa, IA
 Jan Swanson - Duncanville, TX
 Lyn Z. Tucker - Baton Rouge, LA
 Edward L. Valentine - Gloversville, NY
 Mauricio I. Zeplo - Joppatowne, MD

In May:

Robert Ancker - Shreveport, LA
 Donald R. Barbachym - Grand Rapids, MI
 Stephen M. Becker - Lake Mary, FL
 Joyce E. Braun - Gaston, OR
 Walter H. Caskey - Jamaica Plain, MA
 James K. Champion - Jasper, AL
 Elmer R. Dech - Ashburnham, MA
 S. J. Dennison - Indianapolis, IN
 Richard M. Fruehling - Grand Island, NE
 William F. Gent - Riverdale, MD
 William R. Hicks - Chicago
 Eugene Manuel Landrum, III - Springfield, IL
 Elizabeth Lee Chuy - Seattle
 J. Charles Lentini - Plains, PA
 Bonne Heather Madonik - Toronto, Canada
 James M. McCarthy - Opelousas, LA
 William L. McDaniel, Jr. - Dalton, GA
 Marsha E. Modery - Harrisburg, PA
 J. Ronald Oehler - Dexter, MI
 Tracy R. Osborne - Omaha, NE
 Charles R. Pennington - Dillard, GA
 Dasari V. Ratnam - Kansas City, MO
 William F. Reid - Dept. of State, Abidjan
 S. Hunter Rentz - Columbia, SC
 Robert D. Rosenbaum - Kokomo, IN
 Elliot B. Scherling - Carmel, CA
 Michael M. Scimeca - East Elmhurst, NY
 Keith D. Shealy - Lancaster, SC
 Barry A. Shelby - Houma, LA
 Jamie Simkovitz - Bridgeport, CT
 Jeffrey K. Smith - Columbia, SC
 Ronald Snyder - Tesuque, NM
 Deborah A. Speidel - Merritt Island, FL
 Joseph P. Thomas - Mobile, AL
 John Richard Young - Santa Rosa, CA

NCA (National Council on Alcoholism) Awards, presented during the NCA Forum/AMSAODD Medical-Scientific Conferences in Arlington, VA, April 1988, featured AMSAODD and included several members as well.

NCA Gold Key Award

NCA's highest award, given this year to AMSAODD, for outstanding national contributions, particularly in education.

AMSAODD president Margaret Bean-Bayog, MD, accepted the award for AMSAODD. When she asked the banquet audience of several hundred NCA/AMSAODD people for a show of hands-- first those "recovering" and then those "mismanaged during drinking"--over half raised hands. But, in response to "how many were beautifully managed during drinking?" only three hands went up. Dr. Bean-Bayog lauded alcoholics for "gently educating" people, and urged everyone to "talk to their doctors at home and tell them what you think went wrong."

NCA Appreciation Award

To Claire Osman, AMSAODD's administrative director, from NCA board and staff, for fostering cooperative, cordial, effective relations between NCA and AMSAODD.

NCA Leadership Awards

To Marvin A. Block, MD, of Buffalo, NY. Former AMSAODD vice-president; NCA board member 1954-1978. Early in Dr. Block's chairmanship of the AMA's first committee on alcoholism (1953-1964), the AMA confirmed alcoholism as a disease.

To Maxwell N. Weisman, MD, of Baltimore, MD. Former AMSAODD president; NCA board member 1973-1981.

NCA/Marty Mann Founder's Award

To George A. Mann, MD of St. Mary's Chemical Dependency Services, Minneapolis. The award, new this year, is for a nationally prominent individual whose "life work strongly reflects the energy, dedication, and focus exemplified by NCA's founder, Mrs. Marty Mann." (Dr. Mann is not related to the late Mrs. Mann.)

NCA AWARDS FEATURE AMSAODD



Margaret Bean-Bayog, MD, (L) AMSAODD president, accepted the NCA Gold Key Award on behalf of the society. Syndicated columnist **Abigail Van Buren**, (R) ("Dear Abby") displayed her NCA Humanitarian Award.



Claire Osman
AMSAODD
administrative
director

When the NCA Appreciation medal was presented to Claire Osman in a second ceremony at AMSAODD's annual luncheon, the audience gave Ms. Osman a standing ovation. She has been with AMSAODD since 1970.

Nearly 100 AMSAODD physicians received certificates at the AMSAODD Annual Luncheon April 23, held during the society's medical-scientific conference near Washington, DC.

The certificate states:

"The American Medical Society on Alcoholism and Other Drug Dependencies declares that [name] MD or DO, has passed a certification examination and thus has demonstrated knowledge and expertise in alcoholism and other drug dependencies commensurate with the standards set forth by the society."

Of the 647 physicians who took the second AMSAODD certification exam last December, 539 passed. This brings the total certified by AMSAODD since 1986 to 1,275.

Anthony Radcliffe, MD, chair of AMSAODD's certification committee, explained in a luncheon speech how this certification process began: "As a way to identify the body of knowledge which comprises this field of medicine--that some refer to as addiction medicine--and to identify the physicians who have a mastery of that body of knowledge..."

"You are the pioneers. We recognize the commitment that you have made to this process and we trust that you will continue to

participate in it....One of our strengths is that AMSAODD is a national organization of physicians from almost all specialties. Consequently, our approach to the certification process will not be narrow. The growing pride and respect in what we are accomplishing are the sources of energy that should nourish us as the certification process and field of addiction medicine evolve."

In the ceremony itself, Drs. Max A. Schneider and Stanley E. Gitlow announced names, as Drs. Charles S. Lieber and Sheila B. Blume handed out individual certificates.

AMSAODD AWARDS

AMSAODD's Annual Award went this year to U.S. Surgeon General C. Everett Koop, MD, in recognition of his leadership in the areas of AIDS and of smoking and health. Leonard Bachman, MD, accepted the award on behalf of Dr. Koop. (Elsewhere in this issue: a story on the Surgeon General's new Report on Smoking and Health, published May 16)

A special award went to Frank A. Seixas, MD, for his "many years of innovative and outstanding service as clinician, research scientist, officer and board member of AMSAODD." Dr. Seixas is also former medical director of NCA.

CHARTER MEDICAL CORPORATION

Addictive Disease Unit Director

Charter Springs Hospital (Ocala, Florida) is searching for a unit director to oversee its adult addictive disease program on a 20-bed unit. Charter Springs is a 68-bed freestanding psychiatric and addictive disease treatment hospital located in a growing area in North Central Florida. The physician will be responsible for the overall clinical program, working with AA and interfacing with EAP's. Strong administrative and public relations skills are necessary.

Physicians who are interested in this opportunity should have a strong interest in and several years of experience with alcoholism and addictive disease.

For consideration please contact:

Ms. Donna Gabel, Charter Medical Corporation
577 Mulberry Street, P. O. Box 209, Macon, GA 31298
Phone: 1-800-841-9403 or 1-800-342-9660 (Georgia only)



AMSAODD ANNUAL LUNCHEON



Pres. Bean-Bayog with Immediate Past Pres. Max A. Schneider, M.D.



Anthony B. Radcliffe, M.D. (L) with Margaret Bean-Bayog, M.D. (R). Dr. Radcliffe is chair of the certification committee.



Dr. Bean-Bayog confers with staffers Claire Osman (L - administrative director) and Manny Steindler (R - executive director) just before luncheon.



Frank A. Seixas, M.D. (R) with wife, writer Judy Seixas (C) and AMSAODD Treasurer William Hawthorne, M.D. (L)

Chief of Psychiatry & Staff Physician Positions: Conifer Park is a dually licensed Alcohol & Chemical Dependency facility located on a quiet, wooded setting bounded by the Adirondack Mts, Saratoga Springs, and the New York State Capital. Chief of Psychiatry position involves assessment, consultation, limited patient treatment, staff supervision, active participation in an interdisciplinary care team. Research and teaching opportunities as well as potential academic affiliation available. Staff Physician position involves the primary care management of patients, conducting histories/physicals, participating in patient rounds, staff conferences, followup of patients in Intermediate care, participating in interdisciplinary care. Candidates should be board certified or eligible. Experience with addiction treatment strongly preferred. To arrange an interview please forward current resume to:

Dr. Barbara L. Eisenstadt, Conifer Park, 150 Glenridge Road, Scotia, NY 12302.

The AMSAODD Board voted on April 20 that:

--AMSAODD will not accept advertising or contributions from individuals or organizations engaged in the production, distribution, or sale of alcoholic beverages or tobacco products;

--AMSAODD will accept advertising or contributions from the pharmaceutical field only after approval by AMSAODD's Executive Committee;

Contributions from others may be:

--solicited after prior approval by the Finance Committee,

--accepted, whether solicited or unsolicited, by the executive director.

--AMSAODD will sell exhibit space at its conferences, in accordance with the above guidelines.

The board also approved an internal AMSAODD Newsletter advertising policy:

--when committees set up their budgets for board approval, funds for advertising in the newsletter should be included.

--anyone who wants to use the AMSAODD Newsletter to publicize a conference, function, or anything else, is free to submit a news item to the editor. But there will be no guarantee that space will permit its use.

--for purposes of fiscal cleanliness, consistency, and fairness to all AMSAODD's internal groups and committees, anyone who wants to advertise in our newsletter should pay for that ad, the same as do outside organizations.

The board also voted that:

When AMSAODD "co-sponsors" a conference, continuing medical education (CME) credit hours are to be calculated as follows:

For each speaker at doctoral level (MD, PhD, DO, ScD, EdD):

1-hour credit for each 1-hour speaker.

All other professionals:

1/2 credit (e.g. a 2-hour speech offers 1-hour credit).

Beginning in 1989, 25% of the hours in a course must be doctoral-level presentors.

Beginning in 1990, 50% of the hours in a presentation must be doctoral-level presentors.

According to James Halikas, MD, Medical Education Chair, as of April AMSAODD's schedule showed sponsorship or co-sponsorship of 32 conferences in 1988.

New rates, payable to AMSAODD for its name as "co-sponsor":

--one-day programs: \$100.

--two-day programs: \$150.

--three-day programs: \$200.

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AMSAODD Newsletter Advertising InformationRates Effective: 1988Readers: Over 3,200 physicians, all AMSAODD members.Publication frequency: Bi-Monthly (July, Sept., Nov., Jan., March, May)

Mailed First Class near end of month

Content: Conferences, help wanted, situations wanted, physician placement agencies; treatment facilities; medical books, journals, tapes; drug companies (all drug company ads will be reviewed by a committee of physicians prior to acceptance).

Deadlines: Help/Sits. Wanted: 10th of publication month. Others phone for info.Ad Rates (Net)

<u>Ad Size</u>	<u>Price</u>
Single*.....	\$ 50
Double.....	\$ 150
Triple.....	\$ 200
Quadruple.....	\$ 250

<u>Ad Size</u>	<u>Price</u>
One-quarter page**.....	\$ 350
One-third page.....	\$ 500
Half page.....	\$ 750
Two-thirds page.....	\$1,000
Full page.....	\$1,500

Discount: 10% for more than one ad per calendar year.Contact: Lucy Barry Robe, editor, 15 Ridge Rd, Cold Spring Harbor, NY 11724

Phone: (516) 367-6692

Hermese Bryant, AMSAODD, 6525 West North Ave, Oak Park, IL 60302

Phone: (312) 848-6050

*Single ad size is 2-1/2" wide by 1-1/2" long

**Quarter page ad size is 3-3/4" wide by 5" long (see ad below)

Readers:

Does your treatment facility, hospital, medical group, and/or medical school know that this newsletter accepts advertising?

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Publications Committee

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FUTURE MEETINGS

Sponsored or co-sponsored by AMSAODD (one-time listing for co-sponsored conferences). To assure listing, please send information to editor Lucy Robe.

7th National Conference on Chemical Dependency and the Family: Philadelphia, June 12-15.

Caron Institute, PO Box A, Wernersville, PA 19565.
Phone: (215) 678-2332.

Rutgers Summer School of Alcohol Studies: New Brunswick, NJ, June 19-July 8.

Education & Training Division, Center of Alcohol Studies, Smithers Hall, New Brunswick, NJ 08903.
Phone: (201) 932-2190.

37th Annual University of Utah School on Alcoholism and Other Drug Dependencies: Salt Lake City, June 19-24.
Box 2604, Salt Lake City, UT 84110.

International Doctors in Alcoholics Anonymous (IDAA): Baltimore, Aug. 3-7 (CME program Aug. 4)
IDAA, 1950 Volney Rd, Youngstown, OH 44511.
Phone: (216) 782-6216.

Two one-day conferences, "Healing the Child Within" and "Spirituality as Treatment Recovery Aid for Adult Children":
Philadelphia Oct. 17-18,
New York City Oct. 20-21,
San Francisco Nov. 14-15,
Los Angeles, Nov. 17-18.
The Resource Group, 7402 York Rd, Ste 101, Baltimore, MD 21204.
Phone: (301) 337-7772.

AMSAODD 1st National Conference on Nicotine Dependence: Minneapolis, Sept. 22-25.
AMSAODD, 6525 West North Ave, Oak Park, IL 60302.
Phone: (312) 848-6050.

AMSAODD Review Course:
New Orleans, Oct 6-8
Chicago, Nov. 3-5
New York City, Nov. 10-12
Calif. to be announced.
AMSAODD, 12 W. 21st St, New York NY 10010.
Phone: (212) 206-6770.

AMSAODD Certification Exam: Dec. 17, 1988
New Orleans, Chicago, New York, Los Angeles
(Reminder: no 1989 exam)

Next AMSAODD Board Meeting: Chicago, Nov. 6.

1989 AMSAODD Medical-Scientific Conference (also the NCA Forum): Atlanta, Apr. 27-30, 1989.



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