

AMSAODD NEWS

American Medical Society on Alcoholism & Other Drug Dependencies

Vol. IV, No. 3

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Published Bimonthly

New Executive Director Will Open Washington Office

James F. Callahan, DPA, former health science administrator for the National Cancer Institute in Washington, DC, is AMSAODD's new executive director. On June 1 he replaced Emanuel M. Steindler of Oak Park, Illinois, who is retiring.

"We are fortunate to secure a person of Dr. Callahan's stature, ability, and background," said Jasper G. Chen See, MD, AMSAODD's new president, "especially as we embark on programs and projects which will emphasize the primacy of medicine's commitment and responsibility to the addictions field that our new name (American Society of

Addiction Medicine) implies."

Dr. Callahan brings to AMSAODD over 20 years of accomplishments as manager and administrator of clinical and medical education programs in alcoholism and other drug dependencies at the local, state, and national levels.

As NIDA director of the joint NIDA-NIAAA Career Teacher Program, he promoted the development of medical school curricula and administered the National Board of Medical Examiners project to develop comprehensive examinations in drugs and alcohol. He was on the White House Task Forces on Prescribing and Prevention, and chaired the White House Federal Interagency Committee on Drug and Alcohol Education and Training. He was a member of the AMA Informal Steering committee on (cont. p. 6)

Two AMSAODD executive directors:

Dr. Callahan (L), Mr. Steindler (R)



Charles S. Lieber, MD
1989 AMSAODD Award



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**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.**

CONFERENCE DIGEST

Medical-Scientific Meeting in Atlanta

More than 1,050 attended the combined NCA/AMSAODD national conference April 27-30 in Atlanta. Of these, over 750—a record—registered for AMSAODD's 20th annual medical-scientific conference. Program committee chair was **Marc Galanter, MD**.

AMSAODD general sessions included: recent developments in methadone maintenance; fetal effects of drugs and alcohol; cocaine dependence; nutrition and addiction; family and genetic aspects of alcoholism; AIDS research; biomedical aspects of addiction; substance abuse treatment; NIAAA/ARUS symposium on detoxification; craving for alcohol and other drugs; treating nicotine dependence; eating disorders and chemical dependency; NIDA symposium on enhancing the effectiveness of drug abuse treatment; trauma and pain management in relation to substance abuse; marijuana and the brain.

AMSAODD physicians participated in NCA general sessions on defining alcoholism as a disease; ethical issues facing the alcohol and drug problems field; the addictive diseases, and others.

Ten workshops (five more than in 1988) and seven courses covered a wide range of subjects in the addictions.

Over 400 (another record number) registered for the annual **Ruth Fox** Course for Physicians on April 27, directed again this year by Drs. **Lynn Hankes** and **Charles L. Whitfield**.

The eight presentations covered vehicular crashes, nicotine diagnosis and detoxification, addiction treatment, dual diagnosis, compulsive overeating/bulimia, involuntary intoxication and social responsibility, addiction and spirituality, alcoholism in Russia. All the Ruth Fox speakers were physicians.

Awards & Accolades

Some of the interesting personalities at various AMSAODD and NCA (Nat'l Council on Alcoholism) events:

James McKelvey and Eugene Traynor, whose case before the U.S. Supreme Court led to 1988 Congressional action eliminating "willful misconduct" from the VA's definition of alcoholism, received NCA Appreciation Awards and a standing ovation at the AMSAODD/NCA banquet April 27. During the 1988 AMSAODD medical-scientific conference in Washington, 350 AMSAODD physicians had contributed to that decision by signing a statement that protested the Supreme Court's April 1988 decision to uphold the authority of the VA (*AMSAODD News, May 1988, and Nov.-Dec. 1988*).

Peter N. Schikchirev, PhD, of the University of Psychology in Moscow, and Artak Meyroyan, PhD, Institute for the Perfecting of Physicians in Leningrad, were available to meet people a number of times. They began reading the

AMSAODD News directly after the editor presented them with copies of the March-April issue.

Scenes from "My Name is Bill W," the story of AA's co-founder Bill Wilson, were shown at the banquet, along with a speech by writer-producer Bill Borchert. On April 30 the ABC-TV film gained a 25% share of the audience in major market overnight ratings.

Mrs. Sybil Carter accepted an "Experience, Strength and Hope" Markie Award April 28 on behalf of her late husband, Billy Carter, for his public support of alcoholism during the decade of his own recovery. He died of cancer in September 1988. Present for the ceremony were five of their six children and former President Jimmy Carter.

In a touching speech, Sybil Carter said that her brother-in-law was a key figure in her husband's initial treatment. Billy hit bottom in the middle of Jimmy Carter's presidency, but "Jimmy came through for us. Even though he had a whole nation to worry about, his brother came first." Billy spent eight weeks at the Long Beach Naval Alcoholism Rehabilitation Center, directed at the time by **Joseph A. Pursch, MD**, and Sybil went through its family program, "the worst and the best three weeks of my life. I was the classic enabler."

Hundreds Sign Tobacco Petition

After endorsement by the AMSAODD Board, 292 AMSAODD physicians signed a "petition to limit the exportation of tobacco products" during the Atlanta meeting. Sponsored by the American Public Health Association (APHA) and endorsed by the American Heart Association, the American Lung Association, and the American Cancer Society, the petition calls for the U. S. Trade Representative to "stop threatening trade sanctions on foreign countries who do not wish to import U.S. tobacco products" and to "stop forcing foreign nations to advertise and promote tobacco products against their will."

The AMSAODD Nicotine Dependence Committee forwarded the signed petitions to the APHA in May for presentation to federal officials. According to committee chair **John Slade, MD**, the petition is in accordance with the current AMSAODD policy which calls for "elimination of subsidies and all other forms of governmental assistance which encourage the production or exportation of tobacco and tobacco products." [*AMSAODD Position Statement on Nicotine Dependence and Tobacco, 4/20/89*]

The AMSAODD Board is interested in comments from members about whether or not they are anti tobacco. Send comments to Letters to Editor at *AMSAODD News*.

(A new position statement from the Nicotine Dependence Committee is on p. 14)

Audio Tapes

Audio tapes of this conference are available from Infomedix, 12800 Garden Grove Blvd, Ste F, Garden Grove, CA 92643-2043. Phone: 800-367-9286 (in Calif. 800-992-9286). FAX: 714-537-3244.

Annual Luncheon

Nearly 400 attended AMSAODD's annual luncheon April 29 in Atlanta. Of these, 125 of the 548 physicians who had passed the most recent AMSAODD certification examination received their certificates in the society's third such annual ceremony.

*Wording on
AMSAODD
certificate*

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.

Drs. Margaret Bean-Bayog and William Hawthorne announced names, as Drs. Sheila B. Blume and Anthony B. Radcliffe handed out individual certificates.

Six hundred sixty-nine physicians took the AMSAODD Certification Exam last Dec. 17th. With 548 passing it, this brings the total who have been certified by AMSAODD since 1986 to 1,826, or over half the members of the society.

First Young Investigator Award

Sangeeta Gambhir of California was selected by the conference program committee to receive AMSAODD's first Young Investigator Award.

A second year student at UCLA School of Medicine, Gambhir's abstract was "Tridimensional Personality Assessment of Male Cocaine Abusers and Alcoholics." She was senior author with David Gorelick, MD, PhD, of Brentwood VAMC in Los Angeles and of UCLA School of Medicine.

Gambhir was born in India, came to the United States when she was two, grew up in Arizona, and graduated in 1983 from Arizona State University with major in chemistry.



The Young Investigator Award includes \$1,000 to be used for expenses to present the award-winning paper at AMSAODD's annual conference. Gambhir presented hers on April 28.

Ms. Gambhir



Drs. Sheila Blume (L) and Anthony Radcliffe (R) bestowing certificates at the annual luncheon.

Annual Award to Dr. Lieber

Charles S. Lieber, MD, of the Bronx Veterans Administration Medical Center and Mt. Sinai School of Medicine in New York, received this year's AMSAODD Award "in commemoration of outstanding contributions to the advancement of knowledge about alcoholism and other drug dependencies and in grateful recognition of unstinting dedication to healing the sick and troubled victims of these illnesses."

His contributions include demonstrating for the first time that even with excellent nutrition, alcohol can directly damage the liver. Dr. Lieber also discovered a new pathway for ethanol metabolism in liver microsomes that explained the interactions of ethanol with other drugs, hepatotoxic agents, carcinogens, steroids and vitamins.



An AMSAODD member since 1963, board member for the past 20 years, and president from 1974-1977, "I was particularly proud that our membership rose to 1,000 while I was president," he said in his acceptance speech at the luncheon.

Additionally, Dr. Lieber was cited for his great contributions as a teacher, scientist and author.

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ABOUT AMSAODD



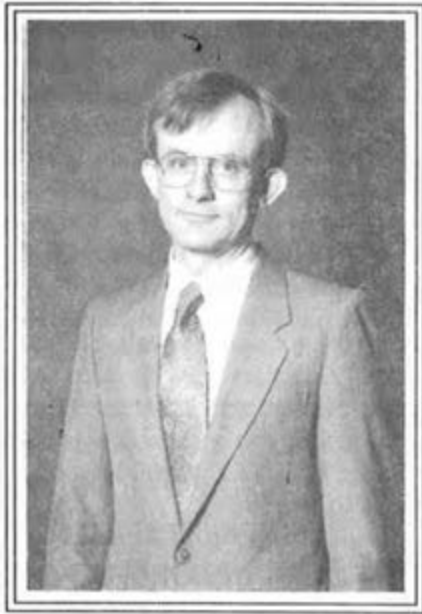
Dr. Hawthorne



Dr. Bromley

New Officers.

- *Jasper G. Chen See, MD - President
- *Anthony B. Radcliffe, MD - President-Elect
- *Jess W. Bromley, MD - Secretary
- *William B. Hawthorne, MD - Treasurer
- *Margaret Bean-Bayog, MD - Immediate Past President



Dr. Radcliffe



Dr. Bean-Bayog (L), outgoing president, and new president, Dr. Chen See (R), at AMSAODD annual luncheon in Atlanta Apr. 29.

Directors-at-Large

- LeClair Bissell, MD
- Sheila B. Blume, MD
- Anne Geller, MD
- *Max A. Schneider, MD
- *David E. Smith, MD
- *G. Douglas Talbott, MD
- Charles L. Whitfield, MD

Names of committee, chapter, and state chair will be published in a future issue of this newsletter.

*Executive Committee

Regional Directors

- Marc Galanter, MD - Region I
- Garrett O'Connor, MD - Region II
- David Mee-Lee, MD - Region III
- Jean L. Forest, MD - Region IV
- Lynn Hanks, MD - Region V
- Roland E. Herrington, MD - Region VI
- Ken Roy, MD - Region VII
- *Sandra Jo Counts, MD - Region VIII
- Elmer H. Ratzlaff, MD - Region IX

Retiring from Board

- Donald M. Gallant, MD
- Stanley E. Gitlow, MD
- Charles S. Lieber, MD
- Joseph C. MacMillan, MD
- Al J. Mooney, III, MD



(continued from p. 1)

New Executive Director

Prescription Drug Abuse, and the steering committee of the World Health Organization-AMERSA International Conference on Medical Education in Substance Abuse. He was co-editor of the NIDA Medical Monograph Series.

Dr. Callahan developed and managed the Georgia Narcotic Rehabilitation Program for inpatient and outpatient treatment, and served on the governor's substance abuse task force.

As deputy director of NIDA's Division of Training, he was co-director of the National Training System to develop personnel and resources to establish and manage statewide prevention and treatment programs, provide medical services, and conduct research. He chaired the NIDA/NIAAA Health Professions Education Task Force for education and certification of physicians and other health professionals.

At the National Cancer Institute, NIH (National Institutes of Health), Dr. Callahan was director of the smoking research applications program; planned physician and attorney interventions for smoking prevention and cessation; and was consultant to the Pan American Health Organization.

His doctorate in public administration is from the Univ. of Southern California; his master's degree in psychology from the Univ. of Texas; his BA from Notre Dame.

Dr. Callahan and his wife, Claire Lyons Callahan of the NIAAA, live in Bethesda, Maryland.



ASSISTANT DIRECTOR, Alcoholism Rehabilitation Physician

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... from the Retiring Executive Director

by E. M. Steindler

To me, AMSAODD's new name, the **American Society of Addiction Medicine (ASAM)*** is recognition that there is a growing, verifiable field of knowledge and of clinical practice experience in the treatment of alcoholic and other drug-dependent patients, and that this is *the* organization to nurture and shape its development.

I have seen much evidence for this during the two and one-half years that I have been executive director:

- Membership in the society has doubled.
- More than half the 3,600 members have become certified by AMSAODD.
- AMSAODD's certification examination and process, though not yet a part of the American Board of Medical Specialties, has won admiration and respect from professionals in the certification field.
- Plans are underway to provide a mechanism whereby society members can share their knowledge and expertise as teachers and preceptors of primary care physicians, in a variety of continuing medical education settings.
- State chapters are forming to deal with local issues, and to sponsor local programs and projects.
- AMSAODD, now ASAM, has been accepted as a national medical specialty society in the halls of mainstream American medicine.

*It's official. As we went to press, AMSAODD's name change to **American Society of Addiction Medicine (ASAM)** was approved by the State of New York...Editor

For the future, I have these thoughts to leave you:

- You have brought addiction medicine to the threshold of independent specialty status. You should be resolute about pushing ahead. Addiction medicine is worthy of its own seat at the table of practice specialties.

- In the so-called war on drugs, prevention will continue to be a buzzword. But it will become more than that only when enough people finally realize that early and successful treatment of addiction is our most effective tool in preventing the most severe and most damaging behavioral consequences of drug use - from drunk driving, to child abuse, to HIV infection, to industrial accidents, to crime in the streets. And ASAM can be a leader in validating this message.

- Medicine is in the midst of a revolution about the allocation and reimbursement of health care. As a specialty society, ASAM is entitled - even obligated - to participate in forging decisions that will affect the practices of its members and the well-being of their patients. Some of the issues that you must deal with, or abdicate to others, are the establishment of relative value scales for physician reimbursement, the enunciation of standards of practice, the expertise or non-expertise of care managers.

Finally, my own involvement in this field dates back more than 20 years. I have served the AMA and AMSAODD in various capacities. Two things have sustained me for all this time:

- Compassion for the sick, craving, preoccupied and stigmatized men, women, and children whom we call alcoholics and other addicts.
- Admiration for the physicians who devote their professional careers to the care of these people. It takes a special kind of dedication, a special kind of love, a special kind of human being. That is what, in the end, is uniquely special about the specialty of addiction medicine. I am grateful to you all for permitting me to witness and observe.

(Mr. Steindler gave this speech at the AMSAODD Annual Meeting in Atlanta April 28, 1989)

...about AMSAODD Offices

The AMSAODD Chicago office will be fully open through the end of June. On July 1, the new AMSAODD (ASAM) headquarters in Washington, DC, will open; phone number and address in the next issue of this newsletter.

In July, Mr. Steindler will become a part-time consultant, working on issues that relate to the specialty status of the society, and to standards of care. Hermese Bryant will work on the AMSAODD Nicotine Dependence Conference (Sept. 21-24 in Chicago), and will also assist Dr. Callahan until the end of October from the Chicago office.

AMSAODD's New York office will continue to operate under the supervision of Claire Osman, administrative director.

The AMSAODD News editorial and advertising office is in Cold Spring Harbor, Long Island, NY.

CHEMICAL DEPENDENCY TAMPA, FLORIDA

Full-time salaried position as **Medical Director** of ANON ANEW's newest "State of the Art" 133-bed Alcohol and Drug Treatment Center.

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AMSAODD NEWS

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MEDICAL DIRECTOR - TEXAS

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Resume to: Sulema Damian, Personnel, Mcallen Medical Center,
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(About AMSAODD)

Certification Plans

AMSAODD members are often asked about the society's plans for seeking recognition of its certification process. In response to these questions, the board approved the following official statement at its meeting on April 26:

"AMSAODD certification designates a member who has demonstrated, by examination, knowledge in addiction medicine consistent with that of a specialist as defined by AMSAODD; however it is not the same as 'Board certification.' Board certification comes only from one of the 23 specialty boards recognized by the American Board of Medical Specialties (ABMS).

"AMSAODD continues to seek appropriate recognition at that level for the specialty of addiction medicine. Among the approaches under consideration and study are or have been creation of an independent, separate board; creation of a new board jointly with several existing boards such as the American Board of Family Practice, the American Board of Internal Medicine, the American Board of Psychiatry and Neurology; or establishment of special or added qualifications within several already existing boards. This is not an exhaustive list; other variations will continue to be considered if they are identified.

"An interim step under consideration is the establishment of a certifying body (not a board) independent from AMSAODD, for the purpose of separating the certifying agency from the specialty society, as is the case in other specialties.

"AMSAODD committees continue efforts to foster the elements required for recognition of a new medical specialty, as they are identified by the ABMS: namely, identification and definition of the unique body of knowledge, incorporation of the curriculum into medical education at all levels, and establishment of a sufficient number of training programs at the fellowship and residency levels.

"AMSAODD continues its commitment to the highest possible standards for its certification process."

Ideas Wanted for Alcoholism Definition

A joint committee to study the definition and criteria for the diagnosis of alcoholism, co-sponsored by AMSAODD and NCA (the National Council on Alcoholism) (*see AMSAODD News, March 1988, p. 7*) had its second meeting in Atlanta. Committee chair Robert M. Morse, MD, is interested in suggestions from AMSAODD members about a proposed new definition for alcoholism.

Please limit your thoughts to no more than one sentence, and/or to key words that you believe should be included in a new definition.

Send to: Daniel K. Flavin, MD, NCA, 12 West 21st Street, New York, NY 10010. Deadline for these comments is June 30.

It's AY-sam (with a long first 'a'). The membership's 'live' approval of the society's new name, at the annual meeting April 28 in Atlanta, included endorsing pronunciation of the acronym **ASAM**.

AMA Affiliation

The board approved AMSAODD affiliating with the AMA (American Medical Association) Section Council on Preventive Medicine, which had extended an official invitation to the society.

Ohio State

With Ohio now a state chapter, AMSAODD has five. The others are California, Florida, Georgia, and Maryland.

Members in the News

Max A. Schneider, MD, of Orange, Calif., former AMSAODD president (1985-1987), received the NAATP (National Association of Addiction Treatment Providers) Outstanding Service Award on June 14. The citation includes Dr. Schneider's "efforts toward national recognition of an addiction medicine specialty." NAATP represents the interests of more than 700 chemical dependency treatment programs in the United States.

Vincent P. Dole, MD, of New York City, received the 1988 Lasker Award in medical research. Dr. Dole is widely known for developing methadone maintenance as a treatment for heroin addiction.

William Hawthorne, MD, treasurer of AMSAODD, is new vice president of alcohol, substance abuse, and psychiatric facilities of the Mediplex Group in Wellesley, Mass.

Kathy Masis, MD, program director of the Tuba City FAS Prevention Program in Arizona, reports that it was recently recognized by NASADAD and OSAP as one of 20 exemplary prevention programs in the United States.

Discounted Subscriptions

Some of the journal publishers who offer discounted subscriptions through AMSAODD have sent full rate renewal reminders direct to members. AMSAODD apologizes for any inconvenience, and reminds subscribers that discounted subscriptions should be paid for *only when paying AMSAODD dues, and with the same check*. Journal publishers offering discounts will be asked not to write members directly about renewals.

Ad Rates to Rise

Rates for ads will go up 20% beginning with the Sept.-Oct. issue (vol. 4, #5) of *AMSAODD News*. This will be the first rate increase since Sept.-Oct. 1987 (vol. 2, #6).

Advertisers who pay in advance can advertise at the current rates through the end of 1989. Call the *AMSAODD News* office at (516) 367-6692.

How to Identify a Physician Recognized for Expertness in Diagnosis and Treatment of Alcoholism and Other Drug Dependancies

Approved by AMSAODD Board of Directors Feb. 8, 1986

A physician specialist in the treatment of alcoholism and other drug dependancies must:

1. Possess a current MD or DO license.
2. Be able to recognize and diagnose alcoholism and other drug dependancies at both early and late stages. Possess sufficient knowledge and communication skills to prescribe a full range of treatment services for alcohol- and other drug-dependent patients, their families, or significant others.
3. Demonstrate a functionally positive attitude toward chemically dependent patients, families, and/or significant others.
4. Be able to intervene in order to get patients, their families, or significant others into appropriate treatment for the needs of the families or significant others as well as those of identified patients.
5. Be able to recognize and manage the medical and psychiatric complications of alcohol and other drug dependancies.
6. Be able to recognize and manage the signs and symptoms of withdrawal from alcohol and other drugs of dependency.
7. Possess sufficient knowledge and communication skills concerning alcohol and other drug dependency to provide consultation, teach lay and/or professional people, and provide continuing education in this field.

Assumptions that relate to each element:

1. Presumes ability to do a competent history and physical exam. Presumes ability, and willingness, to hospitalize patients if necessary.
2. Presumes understanding of the medical and social complications of this disease. Presumes knowledge of self-help groups such as AA, NA, Al-Anon, etc., and presumes knowledge of special groups for professionals.
3. Presumes that a positive attitude is essential in establishing a relationship with a patient to treat him or her for alcoholism and other drug dependancies.
4. Implies knowledge of the spectrum of this disease, and of its natural progression if untreated.
5. Presumes knowledge of the physiologic and psychiatric effects, and of the organ damage, that is attributable to alcoholism and other drug dependancies; presumes knowledge about and ability to prescribe treatment.
6. Presumes ability to provide help for someone in withdrawal.
7. Presumes knowledge of the classification of drugs of dependency, their pharmacology, and biochemistry. Presumes maintenance of current information in this field. Presumes knowledge and skill in one or more methods of teaching and learning.

COMMUNITY PSYCHIATRIC CENTERS, an international hospital corporation providing psychiatric and chemical dependency treatment services, is seeking **Medical Program Directors** to work with our Addiction Medicine Division. We have 43 hospitals with outstanding chemical dependency, dual diagnosis, and codependency clinical programs for adult and adolescent patients.

New and existing CPC hospitals that seek Program Directors include Sacramento, California, and other Northern California locations; Texas locations; and St. Louis, Missouri.

Individuals who are interested in these locations should be psychiatrists specializing in addiction medicine, preferably with certification.

For more information about CPC hospitals in these locations, descriptions of our clinical programs, and our exciting growth opportunities in Addiction Medicine, write or call:

Jill S. Brandenburger, Vice President
Addiction Medicine Division
Community Psychiatric Centers, 24502 Pacific Park Drive
Laguna Hills, CA 92656
Phone: (714) 831-1166

Joseph A. Pursch, M.D.
Corporate Program Consultant



COMMITTEE NEWS

1990 Certification Exam

The AMSAODD Board voted at its meeting April 26 that the requirements for AMSAODD certification will remain as they were when adopted by the board in April 1987. These include completion of an approved residency, or Board certification, in any medical specialty, and one year full-time (or one FTE) involvement in the field.

Those who failed the 1988 exam may sit for the 1990 exam without having to meet the criteria for a residency, provided they took the AMSAODD certification exam for the first time in 1988. This waiver involves 84 of the 121 physicians who did not pass the 1988 exam.

The next AMSAODD certification examination will be in December 1990.

Smoke-Free? Nearly So?

"If your treatment program is smoke-free or almost smoke-free, we want to talk with you. The Nicotine Dependence Committee is conducting a survey which will follow up last year's survey," reports John Slade, MD, committee chair. Results will be presented at the Second National conference on Nicotine Dependence in September.

"We would like to hear from smoke-free or nearly smoke-free inpatient chemical dependency treatment units and from outpatient program which are completely smoke-free."

Contact: R. Jeffrey Goldsmith, MD, 3259 Elland Ave, Cincinnati, OH 45267. Phone: (513) 558-2016.

Dual Dx

This committee met for the first time in Atlanta April 27. Chair Richard Ries, MD, reported that four Dual Diagnosis subcommittees have been formed:

- *AMSAODD Course*
- *National, local symposium*
- *Treatment guidelines*
- *Relations with NIAAA, NIDA, NIMH.*

Membership

LeClair Bissell, MD, outgoing chair of this committee, has found that "many who work in the field of addiction medicine still know little or nothing about AMSAODD. When told about us, a good number of these seem to join AMSAODD rather readily. We are *not* at saturation point with these people. Also, I have learned not to assume that anyone has already been invited to join, and therefore that I should not bother to suggest it."

Kevin O'Brien, MD, of Boston, is new committee chair.

Members-In-Training

Daniel Glatt, co-chair of this committee, distributed a letter and AMSAODD membership application to over 400 medical students at the American Medical Student Association

(AMSA) annual meeting in Las Vegas last March.

"We have received great support from the AMSA in improving our working relationship with them and becoming a leading referral for medical students interested in the chemical dependency field," reported Glatt, a second year medical student, to the AMSAODD board.

Standards & Economics of Care

David Mee-Lee, MD, chair, reports the formation of the following subcommittees.

- *Admission/Discharge Criteria and Utilization Review Issues.* co-chairs:

Dr. Mee-Lee, (Mass.) (617) 639-1090;

Geoffrey Kane, MD, (N.H.) (603) 886-5000.

- *Reimbursement* (Resourced Based Relative Value Scale (RBRVS); Current Procedural Terminology (CPT), etc.) chair: Lester S. Silver, MD (N.Y.) (914) 279-2020.
- *Standards of Care; Practice Guidelines* chair: Barton A. Harris, MD (Md.) (301) 338-3501.
- *Treatment Outcome Standards* chair: P. Joseph Frawley, MD (Cal.) (805) 687-2411

Dr. Mee-Lee encourages "any member who is interested in any particular area to contact the subcommittee chair directly."

New Subcommittee Seeks Chair

The Budget and Finance Committee's new Subcommittee on Development will explore various sources of revenue for AMSAODD, such as contributions, grants, and other income-producing projects, according to society treasurer William Hawthorne, MD. Anyone interested in joining this committee or in being its chair can contact AMSAODD's executive director.

Primary Care Physician / Addictionologist

Seeking position as a state director of
impaired professional program

- certified by AMSAODD 1986 •
- extensive clinical and administrative experience •
- curriculum vitae and references on request •

Write: Box CD, AMSAODD News

15 Ridge Rd, Cold Spring Harbor, NY 11724

COMMITTEE NEWS

Test Development

"The contribution that the five test development committees make is invaluable," said **Sidney H. Schnoll, MD**, chair of AMSAODD's Examination Committee. "They write and refine proposed new questions for the AMSAODD certification examination. These are rigorously reviewed by the Exam Committee and then are field tested and reviewed again."

Field tests involve two groups: an "expert" group (physicians who have passed the AMSAODD certification exam) and a control group. So far, controls have been residents who are paid \$50 apiece to take a field test exam.

During the recent medical-scientific meeting in Atlanta, 41 AMSAODD-certified physicians volunteered to take a 150-question, 1-1/2 hour field test. "In the past we've asked people to pull a local group together for a field test," said Gail Jara, administrator of the AMSAODD certification project. "The most we had before at one sitting was ten, so this was a big success."

AMSAODD now has over 1,000 exam questions in a data base. "The AMSAODD certification exam is rooted in clinical medicine and the basic sciences required to practice good clinical medicine, which means that it's less likely we will get esoterica," said Dr. Schnoll.

The next field test will be given in Chicago sometime between Sept. 20-25, when the AMSAODD Nicotine Dependence Conference, many AMSAODD committee meetings, and the fall board meeting will take place. Physicians who are certified by AMSAODD are urged to volunteer for this field test. Call Gail Jara at the California Society (415) 428-9091.

Committee Members

Southeastern region (Atlanta): Drs. **John B. Griffin, Jr.**, chair, **Elizabeth F. Howell**, co-chair, Paul H. Earley, Karl V. Gallegos, William M. W. Scott, Douglas F. Crane, Ann Marie Reither.

Consultants: Claire Coles, PhD, Robert Donahoe, PhD, Arthur Falek, PhD, John Madden, PhD, Iris E. Smith, MPH.

Western region (San Diego): Drs. **John N. Chappel**, chair, **John R. Sack**, co-chair, Mihran Ask, Robert A. Collen, Gary M. Eaton, Robert D. MacFarlane, Neil Goldman.

Northeast region (New York): Drs. **Stanley E. Gitlow**, chair, Michael Borecky, Alvin J. Glick, Gordon G. Ifill, Richard G. McCarrick.

Consultant: Sherwin Wilk, PhD.

Western region (San Francisco): Drs. **John N. Chappel**, chair, **John R. Cameron**, co-chair, Marilyn Vache, Kathleen Bell Unger, Mary Anne Edwards, Phillip F. Mac, Harley S. Schultz.

Midwestern region (Chicago): Drs. **John Durburg**, chair, **Daniel H. Angres**, co-chair, David B. Altman, Michael Baldinger, Donald W. Sellars, Richard J. Ready, Jeffrey A. Stynowick.

AMSAODD Exam Committee: Drs. **Sidney H. Schnoll**, chair, John R. Durburg, Stanley E. Gitlow, John B. Griffin, John R. Sack, Barry Stimmel.

Consultants: Drs. Mary Jeanne Kreek, John N. Chappel, Tracy Veach, EdD.

Staff: Gail Jara.



Thirteen committee members came to AMSAODD's annual luncheon in Atlanta April 29, where they were given appreciation plaques.



LETTERS TO EDITOR

Dear Editor:

I have followed with interest the correspondence in *AMSAODD News* concerning the control or elimination of various psychotropic drugs [Nov.-Dec. 1988, Jan.-Feb. and Mar.-Apr. 1989]. I have been centrally involved in this problem and am conversant with the difficulties in resolving this complex issue. Specifically, I will relate the recent experience in British Columbia with a pentazocine product and the simple method used to deal with the problem.

Pentazocine has been available in Canada as Talwin Plain (R) and Talwin Compound 50 (R). The former product, although of questionable efficacy as an analgesic, has no street value as the pentazocine is "bound" in the preparation. However, Talwin Compound 50 has a core of pure, water-soluble pentazocine which is easily removed from a coating of ASA. Talwin Compound 50 has received a great deal of publicity, as it is diverted to the street and is injected together with methylphenidate (Ritalin). It has been commonly dubbed the "poor man's heroin" by the media and is used primarily in the cities by youth and by urban Native people. Several unsuccessful attempts were made at the federal and provincial (state) levels to eliminate the drug. The problem was finally solved by a resolution of the College of the Physicians and Surgeons of British Columbia (the physician's licensing body) which read:

"That inasmuch as Pentazocine (Talwin) and Acetylsalicylic Acid (ASA) may be prescribed separately for oral use, and inasmuch as to prescribe them combined in the presently available form of Talwin Compound

50 is conducive to increased parenteral use of Pentazocine (Talwin), it is inappropriate and may be considered unprofessional or in some circumstances infamous conduct for a member of the College of Physicians and Surgeons of British Columbia to administer, prescribe, give, sell, or furnish them in the aforesaid combined form."

This solution to the problem avoids the endless arguments about efficacy and offers a safer alternative prescription. It is also seen that the profession itself can act most responsibly. It should be noted that the pentazocine preparations available in the USA are slightly different than those available in Canada.

Douglas Graham, MD
Ministry of Labour and Consumer Services
Province of British Columbia, Canada

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Are there any specific psychotropic drugs which, in your opinion, have little or no therapeutic purpose? Hoping that the lively debate about prescription drugs will continue, the AMSAODD Board urges members to write letters to AMSAODD News, which we will publish as space permits.

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ADDICTIONOLOGIST: TO SERVE AS MEDICAL DIRECTOR OF THE OXFORD INSTITUTE, INC.

St. John Hospital, a 607-bed teaching hospital in northeast Detroit (Grosse Pointe) Michigan, operates The Oxford Institute. The Oxford Network of Care includes a 60-bed residential treatment unit, a 25-bed hospital rehab unit, and a number of detoxification and outpatient treatment centers throughout southeastern Michigan. The main campus of the Institute is located on 85 acres in northern Oakland County, just 30 miles north of Detroit.

The continued system expansion offers a unique opportunity for a BE/BC Internist or Family Practitioner with at least three years' experience in addiction medicine. Extensive knowledge of chemical dependency, various treatment modalities, and a strong research background is desired.

The preferred candidate will be a team player, an effective communicator, provide leadership to the medical staff, and committed to keeping current in the field of addictionology.

A very competitive financial package is offered. For additional information, please call and/or forward your C.V. in confidence to:

Michael R. Donaldson
Director of Physician Recruitment
321510 Gratiot/Suite 300, Gratiot Towers Building
Roseville, MI 48066
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 Jean Walker

StarMed Associates
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 Tampa FL 33607; 1-800-StarMed

Physician, AMSAODD/ASAM Certif.,
Family Practice or Int. Medicine, to
 join 2 ASAM-Cert Fam. Practitioners
 in expanding private practice. In-
 cludes med. dir/ships of inpat. CDU
 progs and multiprog. outpat. facilities.
Resume to: Drs. Roy & McIver,
 3901 Houma Blvd, Ste 508, Metairie,
 LA 70006. Phone: (504) 455-8441.

POSITION STATEMENT

**AMSAODD Policy Statement on
 Nicotine Dependence:
 Documentation of Nicotine Dependence on
 Death Certificates and Hospital Discharge Sheets**

Background of the Problem

Nicotine dependence is the most common drug dependence in the country. It contributed to 390,000 deaths in 1985, and to numerous hospitalizations. However, the precise dimensions of this contribution to morbidity are unclear.

Physicians have a major role to play in recognizing and managing nicotine dependence in their patients. Clear documentation of tobacco use as a contributing cause of death in death certification, and of tobacco use in relationship to hospitalization, should help to improve physician awareness of this disease, and may provide data that would document the extent to which nicotine dependence leads to hospitalization.

Position Statement

AMSAODD strongly recommends that:

1. Each state add a question to death certification forms, which ascertains whether tobacco use or nicotine dependence contributed to the death.
2. Each state add a question to hospital medical record fact sheets, for coding the standard hospital discharge abstracts, which ascertains whether the patient currently uses, formerly used, or has never used tobacco products.

Copies of this and other AMSAODD position statements are available free. Write:
 American Medical Society on Alcoholism &
 Other Drug Dependencies
 12 West 21st Street, New York, NY 10010

**Adopted by AMSAODD
 Board of Directors
 April 26, 1989**

PRACTICE OPPORTUNITIES AVAILABLE

Treating chemically dependent patients requires the expertise of an experienced physician. Charter Medical has a reputation for offering high quality addictive disease programs.

Due to the growth of our hospital system, we now have several practice opportunities for physicians. The ideal candidate has a background in treating addictive disease, and has completed either a psychiatry or other medical specialty residency. Personal recovery is considered an asset.

Please take this opportunity to call us now and let us tell you about the communities we serve.

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REGIONAL CONFERENCE

Prof. Fingarette's "Myth of Alcoholism"

by David Breithaupt, MD

Although seemingly an unlikely candidate, Herbert Fingarette, author of *Heavy Drinking - The Myth of Alcoholism as a Disease* (University of California Press, 1988) has become a controversial and provocative figure in the addictions field. One quote from his book, "almost everything that the American public believes to be the scientific truth about alcoholism is false," certainly got *this* addictionologist's attention!

Fingarette was a featured speaker at the Third Annual Health Policy Forum at Stanford, sponsored Jan. 27-28 by the Medical Students of Stanford University. Attendees included students, Bay Area physicians, faculty, and chemical dependency professionals. Many of the latter who are recovering from addictive disorders were Fingarette's most passionate and vocal critics.

I had hoped to write a journalistic report for *AMSAODD News*, but I failed. My bias and my professional belief system interfered. Therefore this report should be seen as an editorial--a polemic--a defense of a mythology that I believe in.

Most of the other well-known speakers (Drs. David E. Smith, Enoch Gordis, Donald Gallant, Dora Goldstein, and Leo Hollister) were polite and professional in their refutations or defenses of a disease mythology. Although articulate and forceful, Fingarette was defensive from the start: "You will not like some of what I say." He clearly disdained concepts that are held dear by the recovering community and the treatment field: concepts such as loss of control, need for surrender, total lifetime abstinence.

Prof. Fingarette, who is professor of philosophy at U.C. Santa Barbara, defines disease in a very simplistic way. He has expressed his views on national TV and radio, has debated AMSAODD members including Jess Bromley, MD, and has become in some circles an expert authority on legal definitions of alcoholism (e.g. last year's "willful misconduct" case in the Supreme Court).

As nearly as I can judge, he stuck to the text of his book. Some noteworthy quotes paraphrased at the Stanford meeting were: "No leading research authorities accept the classic disease concept" ... "Depending on the definition and statistical techniques used, the estimated number of alcoholics in the United States can range from near zero to as many as ten million or more" ... "Ritual public confession at AA meetings, the admission that one has an incurable vulnerability to alcohol, is a necessary part of the treatment" ... "To ensure continued public support and funding, the alcoholism treatment programs have formed national, state, and local umbrella organizations that publicize their efforts and lobby elected officers and influential citizens."

Why the latter? According to Fingarette, in order to continually assure members of the public that they need professional (medical?) help for their disease, instead of just cutting down on their "heavy drinking." In other words, "Just Say No"

can be supported by the concepts "Just Drink Less," and/or "Stop for Awhile." If you don't have a disease, you don't need AA, doctors, or counselors. All you need do is think!

The time for audience interaction was brief, but offered some new insights into this dour and puzzling man. Fingarette apparently has no personal, hereditary, clinical, or research contact with alcoholics. He said that his book is based on his review of "your literature, your best writers and researchers." (These include the Sobells--Mark and Linda Sobell of the 1970s controversial controlled drinking research.) Prof. Fingarette expressed mystification and moderate anger at those attending the conference who disagreed passionately with his view, particularly recovering professionals. His defenses: "This research of the highest order" ... "I am a scholar, I listen, ponder, reflect" ... "What place is there for anger and scorn in scholarly research?"

I believe that staying in library stacks and writing a biased review of reviews is not a valid way to study a complex subject like alcoholism. If Fingarette's work is so scholarly, why is it not in a scientific journal? Instead, this "trade book" is designed for the general public. Some of the authorities that he quotes in this book should have the opportunity to refute his contextual selection bias, in particular George Vaillant, MD, E. M. Jellinek, and Marlatt. Fingarette seems to be saying that people who are supposed to have this disease of alcoholism should not present differences and inconsistencies; that not all alcoholics lose control, those who drink alcoholically do so by choice because drinking is common, heavy drinking is uncommon, heavy drinkers can stop, drinkers can control their intake, etc. He implies that the disease notion persists because unthinking people cling to myths fed them by vested interests: treatment centers and doctors who benefit from the disease concept (e.g. us). What rubbish!

A myth is not a lie, nor is it a derogatory term. A mythological system is a system of beliefs based on experiential wisdom (what works), best available evidence, determinist speculation, and yes, even intuition, metaphor, and dreams, that are often given to the tribe by "shamans" (definition: experts). When man changes his myths, he develops a new belief system. For example, a heavy drinker may live a drinking mythology which works for a period of time. If he becomes alcoholic, he must learn a new mythology, sobriety, helped by his tribe. Prof. Fingarette is not a shaman with a new vision, a new belief. It's the same old stuff: "Why do you drink so much?" "Don't drink so much!" "You can stop if you want!"

In my opinion, his book had to have been written without experiential wisdom. Therefore, I extend to Prof. Fingarette an invitation to spend some time with alcoholic patients, their loved ones, and those of us with "vested interests" who attend alcoholics, in order to appraise our mythology. Maybe then he could have another "vision" of alcoholism. Herbert Fingarette's vision does not fit with our experience.

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Dr. Breithaupt lives in San Jose, California.

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

For conference listing on this calendar, please send information directly to Lucy B. Robe, editor, at least three months in advance.

AMSAODD CALENDAR

Information about AMSAODD co-sponsorship of conferences from Claire Osman, AMSAODD-New York.

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• **AIDS: Clinical Issues in the Therapeutic Setting:**
Missoula, MT, June 21-23.

Recovery Foundation, 554 West Broadway, Missoula, MT 59802.
Phone: (406) 721-1880

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• **Chemical Dependency in Depth, A CME Program for Physicians: New Providence Island, The Bahamas, June 24 - July 1.**

Medical Concepts in Travel/Hub, Inc., Ste 180, 11550 I. H. 10W, San Antonio, TX 78230.
Phone: 800-547-3747

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• **Recovery Means Better than Well: Laguna Hills, CA, July 12.**
Community Psychiatric Centers Laguna Hills Hospital, 24502 Pacific Park Drive, Laguna Hills, CA 92656-3035.

Phone: (714) 831-1166

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• **CoDependency & Addictive Behavior:**
Santa Cruz, CA, July 27-29.

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• **13th Annual Summer Institute on Alcoholism & Drug Dependence: Colorado Springs, Aug. 14-18.**

Institute for Integral Development, PO Box 2172, Colorado Springs, CO 80901.

Phone: (719) 634-7943

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• **IDAA 89 - International Doctors in AA Annual Meeting:**
San Antonio, TX, Aug. 2-6 (CME Program Aug. 3).

IDAA, Ste 301, 9885 IH-10 West, San Antonio, TX 78230.

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• **Southernmost Conference in Addictions:**

Key West, FL, Aug. 23-27.

Florida Keys Memorial Hospital/Delphos CDU, 5900 W. Jr. College Rd, Key West, FL 33040.

Phone: 800-233-3119 (FL)

800-225-7717 (outside FL)

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• **AMSAODD 2nd National Conference on Nicotine Dependence:**
Chicago, Sept. 21-24.

AMSAODD, 6525 West North Ave, Oak Park, IL 60302.

Phone: (312) 848-6050

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• **AMSAODD State of the Art in Addiction Medicine (The 1989 AMSAODD Review Course):**
Orlando, FL, Oct. 19-21.

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

Phone: (212) 206-6770

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• **State of the Art in Addiction Medicine (The 1989 California Society Review Course):**
San Diego, CA, Nov. 9-11.

California Society for the Treatment of Alcoholism & Other Drug Dependencies, 3803 Broadway, Oakland, CA 94611.

Phone: (415) 428-9091

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• **AMSAODD 4th National Forum on AIDS & Chemical Dependency: Miami, FL, Feb. 21-24, 1990.**

Conference Information (AIDS) PO Box 81691, Atlanta, GA 30366.

Phone: (404) 458-3382

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• **AMSAODD Annual Medical-Scientific Conference:**
Phoenix, AZ, Apr. 26-29, 1990.

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

Phone: (212) 206-6770

Reminder: No AMSAODD (now ASAM) Certification Exam in 1989.
Next exam in December 1990.

AMSAODD
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Other Drug Dependencies
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