

ASAM NEWS

March / April 1997 Volume 12, Number 2

Election
Results
Pages 5-7

Newsletter of The American Society of Addiction Medicine

ASAM Members Elect New Officers, Approve Mission Statement

In balloting completed January 31, ASAM members chose Marc Galanter, M.D., F.A.S.A.M., as the society's President-Elect; Andrea G. Barthwell, M.D., as Secretary; and re-elected James W. Smith, M.D., as Treasurer. Members also voted on ten Regional Directors and Alternates; re-elected Michael Miller, M.D., as ASAM's delegate to the American Medical Association and David E. Smith, M.D., F.A.S.A.M., as Alternate Delegate; and approved a constitutional amendment that defines a formal statement of purpose for the society.

Dr. Galanter will assume the post of President-Elect at the April 1997 Medical-Scientific Conference, and will take office as President in 1999. The current President-Elect, G. Douglas Talbott, M.D., F.A.S.A.M., succeeds David E. Smith, M.D., as ASAM President in April 1997.

Constitutional Amendment

The members voted to approve an amendment to the Constitution (Article I, Section 2, Purposes) that describes the Society's mission as follows: "The American Society of Addiction Medicine is an association of physicians dedicated to improving the treatment of alcoholism and other addictions, educating physicians and medical students, promoting

research and prevention, and enlightening and informing the medical community and the public about these issues. The Society serves its members by providing opportunities for education and sharing of experiences, and by promoting the development of a body of professional knowledge and literature to enhance the quality and increase the availability of appropriate health care for people affected by the addictions."



ASAM President-Elect
Marc Galanter, M.D., F.A.S.A.M.

President-Elect

Marc Galanter, M.D., is Director of the Division of Alcoholism and Drug Abuse at Bellevue Hospital, New York City, where he oversees 80 beds and 800 outpatients; he also maintains a private practice in Addiction Medicine. He has served on the ASAM Board of Directors for the past 11 years, most recently as Secretary.

He also has been Program Chairman of the Annual Medical-Scientific Conference for 13 years, and has edited the book series, "Recent Developments in Alcoholism" for the past 16 years. He was founding Chair of the Committee on Credentialing for the ASAM certification process and chaired that group for five years (Dr. Galanter has been ASAM certified since 1986).

Dr. Galanter also is Founding President of the Association for Medical Education and Research in Substance Abuse (1977-1978), Editor of the journal *Substance Abuse* (1978 to present), a professor at New York University and Director of its Addiction Fellowship Program, and Section Chief in the university's World Health Organization Collaborating Center (1988 to present). He also has served as President of the American Academy of Addiction Psychiatry (1991-1993) and Secretary of the Research Society on Alcoholism (1983-1987). In 1993, Dr. Galanter was recognized with the Gold Award for innovation in addiction treatment by the American Psychiatric Association; in 1994, he received the McGovern Award of AMERSA for his work in addiction education.

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"I will lead our efforts to assure that all practitioners of Addiction Medicine can provide their patients with the excellent treatment they need and deserve."

Marc Galanter, M.D., F.A.S.A.M.

ASAM

American Society
of
Addiction Medicine

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ASAM is a specialty society of physicians concerned about alcoholism and other addictions and who care for persons affected by these illnesses.

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EXECUTIVE VICE PRESIDENT'S REPORT

VA ADOPTS ASAM PATIENT PLACEMENT CRITERIA

Dr. James F. Callahan

I am pleased to report to you that the U.S. Department of Veterans Affairs (VA) has incorporated the *ASAM Patient Placement Criteria* into its addiction treatment guidelines for use in the VA's 171 medical facilities nationwide. In reflecting on this achievement, ASAM President David E. Smith, M.D. has remarked that "the VA's use of the *ASAM Criteria* signals a major endorsement of the value of the *ASAM PPC-2* for increasing treatment effectiveness and cost effectiveness." We believe the VA's decision to adopt the *ASAM Criteria* will spur their use by other public and private health systems (several states, managed care organizations, and private treatment providers already have adopted the *ASAM Criteria*). This growing use of the *ASAM Criteria* throughout the U.S. is an indication of ASAM's success in achieving its mission of improving the treatment of alcoholism and other addictions.

Available: Opportunity to Make a Difference

The *ASAM Patient Placement Criteria for the Treatment of Substance-Related Disorders: Second Edition (ASAM PPC-2)* was published in 1996 in response to requests from treatment providers and payers for an objective set of guidelines for use in determining whether a particular patient needs treatment and, if so, at what intensity of care. The *ASAM PPC-2* was published in cooperation with and is endorsed by the Coalition for National Clinical Criteria, a group of approximately 50 representatives of treatment providers, managed care corporations, federal and state health and addictions agencies, and the major professional and trade associations of counselors, state directors, physicians and other treatment providers.

Now the Coalition for National Clinical Criteria is seeking volunteers to serve on four newly created work groups charged with defining and developing the *ASAM PPC-2* in the following areas:

- Development of a Level 0.5 (early intervention)/Level I (outpatient services) continuum;
- Development of criteria for adolescents;
- Further refinement of and discrimination among the sub-levels within Level III (residential/inpatient services); and
- Integration of the issues of psychiatric comorbidity (dual diagnosis) into the criteria.



The Coalition seeks clinicians who are familiar with the *ASAM PPC-2* and its use. Knowledge of issues and problems with application of the *PPC* is a "plus." The scope of activity of the work groups has been defined as developing and/or enhancing criteria that have clinical integrity, credibility, user-friendliness, and applicability in the "real world" of limited resources.

Most work group meetings will be conducted by telephone conference calls, fax and e-mail; however, some work may be done at meetings and conferences where work group members will be present. The time commitment required has been estimated as ranging from two to ten hours a month. (Some of the work can be done individually, allowing for scheduling flexibility.) At present, expenses (for phone calls and postage) incurred by work group members cannot be reimbursed by ASAM or the Coalition, although efforts are underway to find a source of funding that will allow such expense reimbursement.

I encourage all members who are interested in serving on a work group to contact Larry H. Hoffer, ASAM Publications Manager, at 301/656-3920. I look forward to your continued support for this project, which benefits ASAM and the field of Addiction Medicine.

ASAM CONVENES 28TH ANNUAL MEDICAL-SCIENTIFIC CONFERENCE IN SAN DIEGO

ASAM's 28th Annual Medical Scientific Conference, to convene April 17-20, 1997 in San Diego, CA, is scheduled to include scientific symposia, clinical courses and workshops, as well as special sessions sponsored by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) and the National Institute on Drug Abuse (NIDA). The Medical-Scientific Conference will be preceded by the Ruth Fox Course for Physicians, the ASAM Forum on AIDS and Addictions, and the ASAM Computer and Online Course, all meeting on Thursday, April 17, 1997. Headquarters hotel for the conferences is the San Diego Marriott Hotel and Marina.

Opening Ceremony and Awards Dinner

The Annual ASAM Breakfast and Business Meeting, the Opening Ceremony, and the R. Brinkley Smithers Distinguished Scientist Award Presentation and Lecture, are scheduled for Friday, April 18. Enoch Gordis, M.D., Director, NIAAA, Alan Leshner, Director, NIDA, and David Mactas, Director, Center For Substance Abuse Treatment will address the Opening Ceremony. The R. Brinkley Smithers Distinguished Scientist Lecture will be given by Ting-Kai Li, M.D., Distinguished Professor of Medicine and Biochemistry, Indiana University School of Medicine.

The Medical-Scientific Conference features a series of scientific symposia on a variety of subjects, including "A Report from NIDA" (jointly sponsored by NIDA and organized by Dorynne Czechowicz, M.D.); "Moderate Drinking: Risks versus Benefits" (organized and chaired by Charles S. Lieber, M.D.); "Gender Differences in Substance Abuse" (organized by Anne Geller, M.D.); "Project MATCH" (organized by Richard K. Fuller, M.D.); and "Genetics of Alcoholism" (jointly sponsored by NIAAA and chaired by NIAAA Director Enoch Gordis, M.D.).

Other scientific symposia address "Effects of Substance Abuse Treatment on AIDS Risk Behaviors" (organized by Edward Gottheil, M.D., Ph.D.); "Reinforcement Mechanisms in Drug Dependence" (organized and co-chaired by Alfonso Paredes, M.D. and David R. Gastfriend, M.D.); "Chronic Pain and Addiction" (organized by Sidney Schnoll, M.D., Ph.D., F.A.S.A.M.); "Adolescent Substance Abuse: Issues, Trends and Emerging Patterns" (organized and chaired by Peter D. Rogers, M.D., M.P.H., F.A.S.A.M.); "Outpatient Detoxification from Drugs and Alcohol: Principles and Strategies" (organized and chaired by Norman S. Miller, M.D., F.A.S.A.M.);

and "Alternatives to Abstinence for Nicotine Dependence" (organized and chaired by John Slade, M.D., F.A.S.A.M.).

In addition to the scientific symposia, the Conference features a number of component sessions that focus on clinical and organizational issues. Clinical component sessions include one on "Addressing Tobacco in Addictions Treatment" (sponsored by the ASAM Committee on Nicotine Dependence, chaired by John Slade, M.D.); "Sanctions of Physicians Treating Pain in Individuals with Addictions" (sponsored by the ASAM Committee on Pain); "Update on Forensic Science of Addiction Medicine" (sponsored by the ASAM Committee on Forensic Sciences); and "Educational Policies and Practices in Internal Medicine" (sponsored by the ASAM Committee on Internal Medicine). A special component session on "Restoring Optimism in the Rehabilitation of Offenders with Drug Abuse Problems: The In-Prison Therapeutic Community" has been organized by Blair Carlson, M.D., F.A.S.A.M., chair of the ASAM Committee on Addiction Medicine in Correctional Institutions, and features a visit to the R.J. Donovan Prison near San Diego. Component sessions on organizational issues include one on "ASAM and the American Medical Association" (organized by ASAM Delegate Michael Miller, M.D.) and one on "ASAM Publications: Their Use in Clinical Practice" (organized by Elizabeth F. Howell, M.D., chair of the ASAM Communications Section).

Clinical issues also are addressed in a series of Workshops and Courses. Workshop topics include "Advocacy: Reaching the Media and Addiction" (led by Ed Gogek, M.D.); "The Clinical Management and Supervision of Dual Diagnosis Treatment" (led by R. Jeffrey Goldsmith, M.D., F.A.S.A.M.); "An Overview of Affective Disorders, Anxiety Disorders and Psychotic Disorders" (led by Steven M. Juergens, M.D., F.A.S.A.M.); "Developing an Outcome Assessment Program in Your Institution" (led by Paul H. Earley, M.D., F.A.S.A.M.); "Developing Services to Deal with Patient Resistance" (led by David Meelee, M.D.); "Issues in Outpatient Treatment" (led by Joan Ellen Zweben, Ph.D.); and "The Effects of Treatment on Coping with Stress" (led by G. Douglas Talbott, M.D.).

Course topics are "Ritualization and Reinforcement: Keys to Understanding Mixed Addiction Patterns Involving Sex and Drugs" (Richard Irons, M.D., Course Director);

"Methamphetamine: Basic Science and Clinical Response" (Richard A. Rawson, Ph.D., Course Director); "Relapse Prevention Skills" (Jan Swanson, D.O., Course Director); "Naltrexone in the Treatment of Alcohol Use Disorders" (Sarx Maxwell, M.D., Course Director); and "Evaluating Outcome of Opiate Detoxification Under General Anesthesia" (Lance L. Gooberman, M.D., Course Director).

Other educational venues during the Conference include a series of Paper Sessions and Poster Sessions. Abstracts of oral and poster sessions will be available.

The ASAM Awards Dinner is set for Saturday, April 19, 1997. Awards will be presented to George D. Lundberg, M.D., Editor-in-Chief of the *Journal of the American Medical Association*, and to ASAM Past President Maxwell N. Weisman, M.D., former head of the Alcoholism Control Commission of the Maryland Department of Health and Mental Hygiene. The Young Investigator Award will be presented to Pamela Bean, Ph.D. and David M. Gudeman, M.D.

Keynote speaker for the Awards Dinner is General Barry R. McCaffrey, Director of the Office of National Drug Control Policy.

Ruth Fox Course for Physicians

The Ruth Fox Course, dedicated to the Founding President of ASAM, provides practicing physicians with information on new directions and concepts in clinical practice and an update on selected areas of research and practical application. Program topics and speakers include a "Review of Recent Advances in the Alcohol and Drug Fields" (Marc Schuckit, M.D.) and "Hot Topics in Opioid Detoxification/Maintenance Treatments" (Richard Schottenfeld, M.D.), "Treatment of Pain and Addiction" (Karen Lea Sees, D.O.), "Forensic Considerations in Addiction Medicine" (William Vilensky, D.O., R. Ph., F.A.S.A.M.), "Adolescent Substance Abuse" (Anthony Dekker, D.O.), "Max's Moments" (Max Weisman, M.D.), "Spirituality and Recovery" (Garrett J. O'Connor, M.D.), and "Taking the 'Duel' Out of Dual Diagnosis" (Daniel E. Wolf, D.O.). The course, chaired by Alan A. Wartenberg, M.D., F.A.S.A.M., and co-sponsored by the American Osteopathic Academy of Addiction Medicine, is accredited for 7.5 hours of Category I CME credits by the AMA and 7.5 hours of Category 1A by the AOA. It meets from 7:00 a.m. to 5:30 p.m. on Thursday, April 17.

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THERE IS A LIGHT AT THE END OF THE TUNNEL, BUT THE TUNNEL SEEMS TO BE GETTING LONGER

Dear Colleague:

When I accepted the Presidency of ASAM in April 1995, I titled my acceptance speech "The Dream Becomes Reality." In those remarks, I paraphrased past President Tony Radcliffe's inspiring presentation in which he described his dream as a family physician to develop the clinical skills necessary to deal with addictive disorders. My dream, although taking a somewhat different path, was very similar. I went from treating alcoholics and addicts on Haight Street (and being described as a career failure by one of my professors of medicine, who lamented that I did not continue a promising research career) to accepting the presidency of the American Society of Addiction Medicine, a vibrant, new medical specialty accepted by the American Medical Association.

I have titled my outgoing Presidential address "There is a light at the end of the tunnel, but the tunnel seems to be getting longer."

I see the light at the end of the tunnel when I look at the new leadership General Barry McCaffrey has brought to the White House Office of National Drug Control Policy. General McCaffrey's strong leadership is encouraging to a field that has seen the disease model of addiction and the effectiveness of treatment challenged in the halls of Congress. Certainly during my tenure as president, our expanded role in national drug policy represents a major accomplishment.

ASAM has also worked to increase and vigorously pursue its collaboration with the growing number of state chapters in order to increase access to care, improve the quality of care and recognize addiction medicine by organized medical and public policy makers. One of our most important accomplishments towards that end was the publication of the second edition of ASAM's *Patient Placement Criteria (ASAM PPC-2)*. Through the efforts of a working group led by David Mee-Lee, M.D., the *ASAM PPC-2* is gaining increasing acceptance and use in the public sector and is expanding with more widespread use in the private sector.

The National Association of State Alcohol and Drug Abuse Directors (NASADAD), through the efforts of Julian Keith, M.D., has officially endorsed the criteria and recommended their adoption by state directors throughout the country. Two states, Illinois and Iowa, have officially accepted their use for all addiction services provided within the states. In both of these states, the ASAM chapter presidents, Dennis Weiss, M.D. (Iowa) and Marty Doot, M.D., F.A.S.A.M., (Illinois), were instrumental in the decision to utilize the *ASAM PPC-2*.

In addition, Michael Miller, M.D., who has done such an effective job as the new delegate to the AMA representing ASAM, continues to lead the ASAM managed care coalition to expand areas of mutual concern regarding treatment placement, continued stay, discharge criteria, treatment costs and quality assurance.

I see the light at the end of the tunnel as I note that, during my tenure as President, ASAM has emerged as a national leader in addressing the problem of tobacco addiction. Since Dr. Max Schneider mobilized ASAM well over a decade ago to expand its efforts in dealing with tobacco, we have become a leader in this area through the work of many people, including the current chair of our Nicotine Dependence Committee, John Slade, M.D., who

served as a co-author of the July 1995 *Journal of the American Medical Association* special issue on tobacco. John led our efforts to make ASAM a strong supporter of President Clinton's proposal to regulate cigarettes and smokeless tobacco products that contain nicotine.



I also am encouraged at the remarkable progress being made in understanding the neuroscience of alcohol and drug addiction and in developing new medications that may improve treatment outcomes. ASAM is working closely not only with the National Institute on Alcohol Abuse and Alcoholism and the National Institute on Drug Abuse, but also with the Research Society on Alcoholism, the College on Problems of Drug Dependence and other research groups to translate these remarkable scientific advances in addiction science into clinical practice. Through ASAM's landmark text, *Principles of Addiction Medicine*, and other programs, we have defined the body of knowledge that constitutes addiction medicine as ranging from neurochemistry to spirituality, making this one of the most fascinating and exciting areas of clinical practice.

So there is much that is encouraging as we survey the past few years and look toward the future—indeed, I see a light at the end of the tunnel.

On the other hand, warning signs signal that "the tunnel seems to be getting longer." I first shared this observation with Jim Callahan during a meeting where we learned that the substance abuse benefit had been deleted from a critical mental health bill because a key member of Congress was convinced that addiction is a "willpower problem" without a biological cause. Indeed, we seem to be losing political support in the halls of Congress and on the battlefield of managed care.

We also have seen a reactivation of the discrimination that exists towards people in recovery from the disease of addiction. The ASAM committee headed by Doug Talbott, M.D., has been receiving an increasing number of reports of recovering physicians being discriminated against in the workplace and being excluded from managed care panels and other key elements of medical practice despite the fact that they are in a monitored, well documented recovery from their addictive disease.

My pessimism also is fueled by the trend toward increased use of alcohol and drugs by the youth of America, the leaders of the next generation. Why this upturn in teenage addiction is occurring is a very complex question. Certainly with teenage smoking, the evidence is clear that the marketing by tobacco companies aimed at sensitive 12- to 18-year-olds is a key factor in the increase in smoking. There also seems to be a form of "generational forgetting" among young people, who seem not to remember the lessons of the 1960s, in which the dream of drug use became a nightmare.

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This problem of youth drug abuse became very personal for me in the same fashion that Senator George McGovern described in his inspiring remarks at our April 1996 annual meeting in Atlanta. Senator McGovern, chair of our task force on treatment parity, indicated that prior to the tragic death of his daughter, alcoholism had been only a series of statistics to him. Afterward, it became a very personal crusade. Similarly, during my tenure as president, my wife Millicent and I had discovered that one of our three children is afflicted with the disease of addiction. We experienced at a personal level the horror and fear that families feel when one of their children is affected with this potentially life-threatening disease. I am happy to report that our son is now doing well, one day at a time, but it required both a spiritual program of recovery and the support of key people in ASAM, most notably Doug Talbott, for us to survive this ordeal.

Through this experience, my professional commitment to ASAM truly has become a personal mission, as I try to do all I can for my family and for all families suffering from a loved one's addiction. The goal of ASAM was and is to mobilize the medical community to respond to our country's number one public health problem, a problem so pervasive that it not only affects every practicing physician in the United States but every family and community as well. Anne Geller, M.D., our Immediate Past President, in her outstanding Farewell Address, reminded us that "by dedication to our mission and our commitment to excellence, we have radically changed the perception of addiction medicine" and its role in the medical community. Anne further emphasized that ASAM is a medical society whose members put principles above personalities and vision above ambition. Our members care for each other.

An important sign of the maturity of our field is our Fellows Program, the first award of which will occur at our 1997 Medical-Scientific Conference. This honor goes to senior members of our society who have demonstrated both contribution to the field and to our national and state societies. We hope that the Fellows Program will inspire our newer members to expand their contributions both to the field of addiction medicine and to ASAM.

In Anne Geller's fine speech, she "breathed a sigh of relief that it was over"; two years later, I can understand what she meant. Being president of ASAM is a very important but incredibly draining mission. In recognition of the difficulty of this task, ASAM has created a leadership council in which the President, the Immediate Past President and the President-Elect work together so that there is continuity in leadership and on-the-job training.

For those of you who know how my presidency at ASAM functioned, it was truly the "Dave and Doug" show. Doug Talbott has been, in every sense, my partner in not only helping me deal personally with my son's addiction, but also with the many challenges that confront any ASAM President. In return, I pledge my support to Doug Talbott as he accepts the Presidency of ASAM, just as Anne Geller shared her wisdom and guidance with me. We have an important mission and a noble tradition in ASAM, which I know Doug will keep alive and transmit to future generations of ASAM leadership so that we may better reach out to the still-suffering alcoholic and addict. I want to thank ASAM for allowing me to serve. You have done far more for me than I ever could do for you.

Peace and health,

David E. Smith, M.D., F.A.S.A.M.

New Officers - Continued from page 1

Secretary

Andrea G. Barthwell, M.D., is President of Encounter Medical Group, P.C., Chicago, IL; she also serves as Senior Advisor on Women's Health of the National Women's Resource Center, and as a consultant and lecturer. Dr. Barthwell has been a member of ASAM's Board of Directors since 1991 and a member of the Executive Committee since 1993; she also chairs ASAM's Clinical Issues Section and the Resources & Development Committee. She represents ASAM to an American Medical Association Task Force on Violence, as well as one on Women and Medicine. Within ASAM, Dr. Barthwell has served on the Methadone, Membership, AIDS, and the Review Course Committees. Certified by ASAM in 1986, Dr. Barthwell is a founding member of the Illinois Society of Addiction Medicine (ISAM), has served as ISAM President and currently sits on that organization's Board of Directors.



Andrea G. Barthwell, M.D.

Treasurer

James W. Smith, M.D., is Medical Director of Schick Schadel Hospital, Seattle, WA, and Clinical Associate Professor, Department of Psychiatry and Behavioral Sciences, at the University of Washington School of Medicine. He is a member of the faculty committee that designed the Addiction Medicine curricula for the School of Medicine and is a member of the committee that designed a parallel curriculum for the School of Nursing. He is an adjunct professor in the Seattle University Alcoholism Certification Program and a past President of the Washington State Council on Alcoholism. Certified by ASAM in 1986, Recertified in 1996, Dr. Smith has served for five years as a member of the Finance Committee, and has been Chairman of the Operating Fund Subcommittee, a member of the Ruth Fox Memorial Endowment Fund, and a member of the Resources & Development Committee.



James W. Smith, M.D.

ASAM ELECTIONS

The newly elected Regional Directors and Alternates will serve four-year terms of office, from April 1997 through April 2001.

Region I (New York)

Lawrence S. Brown, Jr., M.D., M.P.H., F.A.S.A.M., Regional Director
Peter A. Mansky, M.D., Alternate



Lawrence S. Brown, Jr., M.D., M.P.H., is Senior Vice President, Division of Medical Services, Evaluation and Research, Urban Resources Institute, and Addiction Research and Treatment Corporation, Brooklyn, NY. He also holds appointments as Adjunct Clinical Professor of Public Health at Cornell University Medical College, Visiting Physician at Rockefeller University Hospital, and Assistant Clinical Professor of Medicine, Columbia University.

Region IV (NJ, OH, PA)

R. Jeffrey Goldsmith, M.D., Regional Director
Lee H. McCormick, M.D., Alternate



R. Jeffrey Goldsmith, M.D., has been on the faculty of the College of Medicine, University of Cincinnati, for 15 years and curriculum coordinator for addiction psychiatry for 11 years. He also is Director of the Addiction Fellowship at the Veterans Administration Medical Center, and serves there as a psychiatrist in the Dual Disorder Clinic and as co-principal investigator for the NIDA-VA Medications Development Research Center.

Region II (California)

Gail N. Shultz, M.D., Regional Director
P. Joseph Frawley, M.D., Alternate

Gail N. Shultz, M.D., has been Medical Director of the Betty Ford Center since 1989. Certified by ASAM in 1986, Dr. Shultz has served on the ASAM Committee on Physician Health and the Committee on Managed Care. He also is a member of the Executive Council of the California Society of Addiction Medicine and serves on the Southern California Committee of the California Diversion Program for physicians.



Region V (DE, DC, GA, MD, NC, SC, VA, WV)

Paul H. Earley, M.D., F.A.S.A.M., Regional Director
Timothy L. Fischer, D.O., Alternate

Paul H. Earley, M.D., is Program Director of Adult Addiction Medicine Services and Medical Director of the Recovering Professional's Program at Ridgeview Institute, Smyrna, GA. Dr. Earley is Past President of the Georgia chapter of ASAM and has served on the GASAM Board of Directors since 1990. Certified by ASAM in 1987, Recertified in 1997, Dr. Earley has been active on ASAM's Certification, Membership, Regional Fellowship and State Chapters committees.



Region III (CT, ME, MA, NH, RI, VT)

Alan A. Wartenberg, M.D., F.A.S.A.M., Regional Director
John D. Melbourne, M.D., Alternate



Alan A. Wartenberg, M.D., F.A.C.P., is Associate Professor in the Center for Alcohol and Addiction Studies at Brown University and Medical Director of several methadone maintenance programs. ASAM-certified in 1986, Recertified in 1996, Dr. Wartenberg also has been Medical Director of chemical dependency programs in both the public and private sectors, as well as a member and chairman of the Board of Marathon House, the largest therapeutic community system in New England.

Region VI (IL, IN, KY, MI, MN, ND, SD, TN, WI)

Norman S. Miller, M.D., F.A.S.A.M., Regional Director
Thomas L. Haynes, M.D., F.A.S.A.M., Alternate



Norman S. Miller, M.D., is Chief of the Division of Addiction Programs, University of Illinois at Chicago; Associate Professor of Psychiatry and Neurology in the College of Medicine; and Research Psychiatrist at the Psychiatric Institute for Research. ASAM-certified in 1990, Dr. Miller also is a Diplomate of the American Board of Psychiatry and Neurology. He is President-Elect of the Illinois Society of Addiction Medicine.

Region VII (AR, IA, KS, LA, MO, NE, OK, TX)

Ken Roy, M.D., F.A.S.A.M., Regional Director
Ted E. Ashcraft, M.D., Alternate

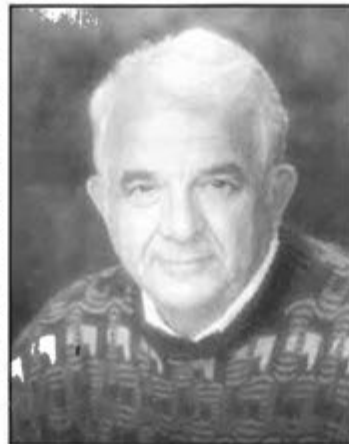


Ken Roy, M.D., is Medical Director at New Freedom, Inc., an outpatient program, and Addiction Recovery Resources, a residential treatment program, and maintains a private practice of psychiatry in New Orleans, LA. Dr. Roy, who was ASAM-certified in 1986, has worked to develop addiction treatment programs at several New Orleans hospitals, including the Columbia DePaul Hospital. He has been a member of the ASAM Board of Directors.

**Region VIII
(AK, AZ, CO, HI, ID, MT, NV, NM, OR, UT, WA, WY)**

Richard E. Tremblay, M.D., F.A.S.A.M., Regional Director
Gregory Skipper, M.D., Alternate

Richard E. Tremblay, M.D., is Associate Clinical Professor at the University of Washington, Seattle. Certified by ASAM in 1986, Dr. Tremblay is Founding President of the Washington State Society of Addiction Medicine and has served on the Boards of the Washington State Medical Association and the Washington Physician's Health Program. He has been a member of numerous ASAM committees and currently is a member of the Board of Directors.



Region IX (Canada & International)

Peter E. Mezciems, M.D., F.A.S.A.M., Regional Director
Saul Alvarado, M.D., Alternate

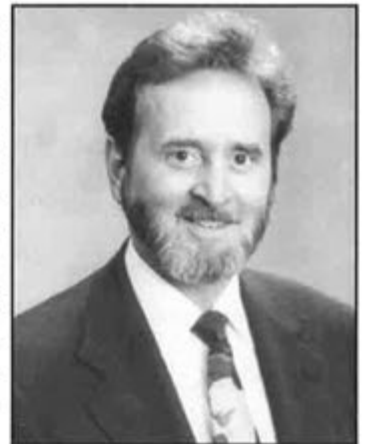


Peter E. Mezciems, M.D., is Director of Undergraduate Education at the Homewood Health Centre, Guelph, Ontario, and Assistant Clinical Professor in the Department of Family Medicine, McMaster Medical School, Hamilton, Ontario. Certified by ASAM in 1992, Dr. Mezciems has chaired the Section on Addiction Medicine of the Ontario Medical Association and is a member of the Board of the Canadian Society of Addiction Medicine (C*SAM).

**Region X
(AL, FL, MS, PR, VI)**

Richard A. Beach, M.D., Regional Director
Lloyd J. Gordon III, M.D., F.A.S.A.M., Alternate

Richard A. Beach, M.D., is engaged full-time in the private practice of Addiction Medicine. Dr. Beach is founder of Comprehensive Health Consultants, a multidisciplinary education and treatment program and is Medical Director of The Friary, Inc., in Gulf Breeze, FL. ASAM-certified in 1989, Dr. Beach is Past President of the Florida Society of Addiction Medicine and serves as a regional representative of the Florida Professional Recovery Network.



Medical-Scientific Conference – Continued from page 3

Forum on AIDS and Addictions

ASAM's Forum on AIDS and Addictions, which also meets April 17 from 7:00 a.m. to 5:00 p.m., will provide participants with up-to-date information on current and future research into HIV infection and AIDS, to explore the efficacy of complementary treatments for HIV/AIDS and addictions, and to provide a special focus on the needs of HIV/AIDS-affected women and adolescents. Program chair Mel Pohl, M.D. has assembled a distinguished faculty that includes Andrea Barthwell, M.D., Brenda Chabon, Ph.D., Don Des Jarlais, M.D., Harry Haverkos, M.D., Mark Katz, M.D., Harold Kessler, M.D., and Larry Siegal, M.D. The Forum is accredited for 7 hours of Category 1 CME credit.

Computer and Online Course

The annual Computer and Online Course, chaired by Stuart Gitlow, M.D., has been separated into two sessions. In the morning program, which is designed for computer novices, an introduction to use of the computer will be followed by an introduction to software, online ser-

vices, and use of the Internet. Both Macintosh and PC equipment will be used to illustrate techniques that the medical practitioner will find useful. An afternoon program will illustrate more advanced skills and will follow directly from the introductory session. The program is to cover privacy and confidentiality of computer-based records, telemedicine, and the World Wide Web. The faculty—Dr. Gitlow, Elizabeth F. Howell, M.D., Peter E. Mezciems, M.D., F.A.S.A.M., Greg Skipper, M.D., and Thomas L. Haynes, M.D., F.A.S.A.M.—have designed both sessions from a perspective of the physician's computer needs at home and at the office. Participants may register for either three-hour session alone or for the full course, which is scheduled for 8:00 a.m. to 5:00 p.m. on Thursday, April 17.

Registration information for all courses is available from the ASAM Conference and Meetings staff at 301/656-3920. Hotel reservations may be made directly with the San Diego Marriott Hotel and Marina at 1/800-228-2100. Assistance with travel arrangements can be obtained from ASAM's official travel agency, World Travel Partners, at 1/800-338-8349.

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ASAM is pleased to announce the release of a hypertext version of its publication *Patient Placement Criteria for the Treatment of Substance-Related Disorders (Second Edition): ASAM PPC-2*, the most widely used and comprehensive national guidelines for placement, continued stay and discharge of patients with alcohol and other drug problems. Using this IBM-compatible program, clinicians and administrators can quickly use their PCs to match a given patient's symptoms to a particular dimension, level of care or gradient of intensity within a specific level of treatment.

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ALCOHOL ALERT

National Institute on Alcohol Abuse and Alcoholism

No. 34

PH 370

Preventing Alcohol Abuse and Related Problems

Prevention measures aim to reduce alcohol abuse and its consequences. Such measures include policies regulating alcohol-related behavior on the one hand and community and educational interventions seeking to influence drinking behavior on the other. Researchers use scientific methods, such as randomized controlled trials, time-series analysis, and computer simulation, to determine the effectiveness of prevention initiatives. The resulting data may both inform policy and guide community and educational prevention efforts. This *Alcohol Alert* summarizes research on the effectiveness of selected initiatives in each of these areas.

Policy Interventions

Alcohol Taxes. Researchers find that alcohol taxes and prices affect alcohol consumption and associated consequences (1). Studies demonstrate that increased beer prices lead to reductions in the levels and frequency of drinking and heavy drinking among youth (2,3). Higher taxes on beer are associated with lower traffic crash fatality rates, especially among young drivers (4,5), and with reduced incidence of some types of crime (6). Research suggests that the heaviest-drinking 5 percent of drinkers do not reduce their consumption significantly in response to price increases, unlike drinkers who consume alcohol at lower levels (7). In one study, heavy drinkers who were unaware of the adverse health consequences of their drinking were less responsive to price changes than either moderate drinkers or better informed heavy drinkers (8).

Raising the Minimum Legal Drinking Age (MLDA). MLDA legislation is intended to reduce alcohol use among those under 21, to prevent traffic deaths, and to avoid other negative outcomes (9–11). Raising the MLDA has been accompanied by reduced alcohol consumption, traffic crashes, and related fatalities among those under 21 (11,12). A nationwide study found a significant decline in single-vehicle nighttime (SVN) fatal crashes—those most likely to involve alcohol—among drivers under 21 following increases in the MLDA (9).

Zero-Tolerance Laws. The National Highway Systems Act provides incentives for all States to adopt "zero-tolerance laws" that set maximum blood alcohol concentration (BAC) limits for drivers under 21 to 0.02 percent or lower beginning October 1, 1998 (13). An analysis of the effect of zero-tolerance laws in the first 12 States enacting them found a 20-percent relative reduction in the proportion of SVN fatal crashes among drivers under 21, compared with nearby States that did not pass zero-tolerance laws (12,14).

Other BAC Laws. Fourteen States have lowered BAC limits from 0.10 to 0.08 percent to reduce alcohol-related fatal motor vehicle crashes. One study found that States with the reduced limit experienced a 16-percent decline in the proportion of fatal crashes involving fatally injured drivers whose BAC's were 0.08 percent or higher, compared with nearby States that did not reduce their BAC limit. In a separate analysis, this study found that States that lowered their BAC limit also experienced an 18-percent decline in the proportion of fatal crashes involving fatally injured drivers whose BAC's were 0.15 or higher, relative to comparison States (15).

Alcohol Alert, a publication of the National Institute on Alcohol Abuse and Alcoholism, provides timely information on alcohol research and treatment to health professionals and other interested people. This issue is the thirty-fourth in the series.

Reducing BAC's has led to declines in fatal traffic crashes.

A Commentary by NIAAA Director Enoch Gordis, M.D. 3



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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Administrative License Revocation Laws. Laws permitting the withdrawal of driving privileges without court action have been adopted by 38 States to prevent traffic crashes caused by unsafe driving practices, including driving with a BAC over the legal limit (16). These laws were associated with a 5-percent decline in nighttime fatal crashes in some studies (17,18). Other studies observed six- to nine-percent reductions in nighttime fatal crashes following their adoption (17).

Server Liability. Alcohol servers are increasingly held liable for injuries and deaths from traffic crashes following the irresponsible selling and serving of alcohol. Researchers assessed the effect of potential server liability on the rates of alcohol-related fatal crashes in Texas (19). SVN fatal traffic crashes decreased 6.5 percent after the filing of a major server-liability court case in 1983 and decreased an additional 5.3 percent after a 1984 case was filed. However, before concluding that server liability is effective, these results need replication (19).

Warning Labels. The mandated warning label on containers of alcoholic beverages aims to inform and remind drinkers that alcohol consumption can result in birth defects, impaired ability to drive a car or operate machinery, and health problems. Research indicates that public support for warning labels is extremely high; that awareness of the label's content has increased substantially over time (20); that perception of the described risks was high before the label appeared and has not generally increased (21); and that the label has not had important effects on hazardous behavior, although certain effects may be indicative of the early stages of behavioral change (20). One study of pregnant women found that after the label appeared, alcohol consumption declined among lighter drinkers but not among those who drank more heavily (22).

Community and Educational Interventions

The Saving Lives Program. The Saving Lives Program in six communities in Massachusetts was designed to reduce drinking and driving and to promote safe driving practices. Saving Lives involved the media, businesses, schools and colleges, citizens' advocacy groups, and the police in activities such as high school peer-led education, college prevention programs, increased liquor-outlet surveillance, and other efforts. Participating communities reduced fatal crashes by 25 percent during the program years compared with the rest of Massachusetts. The decline in alcohol-related fatal crashes was 42 percent greater in Saving Lives communities than in comparison cities during the program years. The proportion of drivers under 21 who reported driving after drinking in the month before being interviewed also declined in participating communities (17).

Life Skills Training (LST). LST teaches students in grades seven to nine skills to resist social influences to use alcohol and other drugs and to enhance general competence and self-esteem. LST has been found to increase students' knowledge of the negative consequences of drinking and to promote realistic, not inflated, perceptions of drinking prevalence (23). A study of LST's long-term effects among 12th grade students who had received a relatively complete version of the program showed significantly lower rates of weekly drinking, heavy drinking, and getting drunk than did control students. The full sample exposed to the program also showed significantly lower rates of drunkenness than did the controls (24).

Project Northland. Project Northland is a multicomponent, school- and community-based intervention to delay, prevent, and reduce alcohol use and related problems among adolescents. It includes social-behavioral curricula, peer leadership, parental involvement/education, and communitywide task force activities (25,26). The first 3 years of intervention, conducted in grades six through eight, resulted in significantly lower prevalence of past-month and past-week alcohol use among students in intervention communities compared with controls. These beneficial effects were particularly notable among students who had not yet begun experimenting with alcohol when the program began (27).

Alcohol Misuse Prevention Study (AMPS). The AMPS curriculum, for students in grades five through eight, focuses primarily on teaching peer-resistance skills and on clarifying students' misperceptions of their peers' alcohol use. Among adolescents at greatest risk for escalating alcohol misuse—those who engaged in early unsupervised use of alcohol—the AMPS intervention had a modest, but lasting, statistically significant effect of slowing the

Community prevention programs involve multiple components and include broad segments of the population.

increase in alcohol misuse through grade 8 (28,29) and into grade 12 (30). Replication of this research again showed a significant effect for the highest risk subgroup (29).

Project STAR. Project STAR—involving schools, mass media, parents, community organizations, and health policy components in two sites in the Midwest—attempts to delay the onset and decrease the prevalence of alcohol and other drug use among students beginning in sixth grade. Project STAR teaches skills to resist alcohol use and educates students about the actual, as opposed to the perceived, prevalence of alcohol use among their peers. Early followup studies showed that the program had little effect on alcohol use (31,32). However, in a 6-year followup in Kansas City, students in program schools showed lower rates of increase in alcohol use and episodes of drunkenness over time than did students in control schools. Similar but smaller effects were observed at 3.5-year followup in Indianapolis (33).

Drug Abuse Resistance Education (DARE). DARE, typically taught to 10- and 11-year-old students in grades five and six by police officers, aims to inform about alcohol and other drugs and to teach social and decisionmaking skills to help students resist their use. Studies have found that DARE essentially has no impact on alcohol use (34–36).

Informational Programs. Programs attempting to persuade students not to use alcohol by arousing fear do *not* work to change behavior (30,37). Emphasizing the dangers of alcohol may *attract* those who tend to be risk-takers. Programs providing information about the pharmacological effects of alcohol may arouse curiosity and lead to drinking (37).

Server Training. Server training, mandatory in some States, educates alcohol servers to alter their serving practices, particularly with underage customers and those who show obvious signs of intoxication. Server training explains the effects of alcohol, applicable laws, how to refuse service to obviously intoxicated patrons, and how to assist customers in obtaining transportation as an alternative to driving. Some, but not all, studies report more interventions with customers after server training than before. One evaluation of the effects of Oregon's mandatory server-training policy indicates that it had a statistically significant effect on reducing the incidence of SVN traffic crashes in that State (38).

Prevention programs that arouse fear do not work to change students' drinking behavior.

Preventing Alcohol Abuse and Related Problems— A Commentary by NIAAA Director Enoch Gordis, M.D.

Prevention encompasses activities or actions ranging from those affecting the whole population through social and regulatory controls to those affecting specific groups, such as adolescents, or the individual. Many of these activities overlap. For example, health warning labels, a product of legislation (social and regulatory control), also are educational. In this *Alcohol Alert*, we have tried to give a "flavor" of this broad spectrum; the prevention areas described are by no means exhaustive, and some areas described in one category could well be in others.

The good news is that, using contemporary tools of science, prevention can be rigorously studied. Currently, research evidence shows that some prevention efforts are effective and others have little or no effect. This knowledge will help local communities, the States, and others who have made significant investments in prevention activities develop or refine existing programs to achieve their desired objectives.

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NINETY MEMBERS BECOME ASAM FELLOWS

Ninety physicians who are members of the Society have been elected Fellows of the American Society of Addiction Medicine. ASAM inaugurated the Fellow program in 1996 to recognize substantial and lasting contributions to the Society and the field of addiction medicine. Candidates must meet certain criteria to qualify for Fellow status: they must have been ASAM members for at least five consecutive years; (2) they must be ASAM-certified; (3) they must have taken a leadership role in ASAM through committee service, or have been an officer of a state chapter; and they must have made and continue to make significant contributions to the addictions field.

The following new ASAM Fellows will be presented certificates denoting their achievement during the Awards Dinner at the Medical-Scientific Conference in San Diego:

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Falmouth, MA | Charles Whitfield, M.D., F.A.S.A.M.
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Rome, GA |
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Fernandina Beach, FL | David Ohlms, M.D., F.A.S.A.M.
St. Louis, MO | Nady el-Guebaly, M.D., F.A.S.A.M.
Calgary, Alberta |

CHAPTER UPDATE

California

Peter Banys, M.D., Chief of Substance Abuse Programs for the San Francisco VA, has been named Chair of the CSAM Committee on Education, replacing Steven Eickelberg, M.D. Other appointments made by the CSAM Executive Council at its January meeting involve Amy Khan, M.D., Medical Director of the Chemical Dependence Recovery Service at Kaiser in Vallejo, who was appointed Chair of the Committee on Membership, and Gail Shultz, M.D., Medical Director of the Betty Ford Center, who was made co-chair of the Committee on Physician Impairment, with John Lanier, M.D.

CSAM's Committee on Physician Impairment has been asked to identify areas that should be included in medical evaluation of a physician applying for the California Diversion Program for Physicians. CSAM members Glenhall Taylor, III, M.D., Michael Myers, M.D., Alan Sorter, M.D., Gary Jaeger, M.D., and Richard Sheridan, M.D., have been appointed to first terms on a Diversion Evaluation Committee for the Diversion Program. Max Schneider, M.D. has received a special appointment to a third term in order to serve on a newly formed Committee in the far northern part of the state, where he will bring his experience to a geographic region that has, until now, had no organized Diversion Program activity.

Four other CSAM members serve on the five Diversion Evaluation Committees: William Brostoff, M.D., Michael Stulberg, M.D., Lyman Boynton, M.D., Amy Khan, M.D.

Florida

Chapter President Richard Keesal, M.D. reports that FSAM and ASAM jointly sponsored the 10th Annual Conference on Addictions, held in January at the Walt Disney World Village. Featured speakers included Andrea Barthwell, M.D., who discussed "Cultural Issues to be Considered in the Treatment of the Chemically Impaired," and Richard J. Bagby, M.D., President of the Florida Medical Association, who addressed "Directions in Managed Care." FSAM members Ronald Catanzaro, M.D., John Eustace, M.D., Michael Newberry, M.D., and Vineet Mehta, M.D., discussed treatment modality issues in spirituality, pain management, and working with the challenging patient. The conference ended with a special guest presentation on "Sexual Compulsive Behaviors" by Bonnie Saks, M.D., Psychiatrist and Fellow of the American Psychiatric Association, Associate Professor, University of South Florida, and

Founding Fellow of the American Academy of Clinical Sexologists.

In an accompanying business meeting, the Florida chapter elected the following officers for two-year terms: Richard Keesal, M.D., President; John Eustace, M.D., President-Elect; Michael Newberry, M.D., Treasurer; Paul T. Bakule, M.D., Secretary; Marilyn C. Moss, M.D., Immediate Past President; Vineet Mehta, M.D., Chair of the Scientific Planning Committee; and Kenneth W. Thompson, M.D., Legislative Representative.

FSAM holds its annual meeting and conference each January in Orlando, and invites members of other Chapters to participate. The Florida chapter will host break-out sessions for other state groups at the annual meeting. Additional information is available from Robert Donofrio at the FSAM office: 904/484-3560.

Illinois

Chapter President Martin Doot, M.D., F.A.S.A.M., reports that the Illinois Society of Addiction Medicine (ISAM) has renewed its contract to receive administrative services from the Illinois State Medical Society (ISMS). Board members have been very pleased with the staff support provided for board activities, the chapter newsletter and administration of the ISAM contract with the Illinois Department of Alcoholism and Substance Abuse. Hermese Bryant continues to serve the chapter as associate manager in charge of educational events. The Council on Mental Health and Addictions

of the state medical society is chaired by ISAM member, Connie Bonbrest, M.D.

ISAM leaders continue to consult for DASA helping the agency steer its way through reorganization of human service agencies (due July 1, 1997), implementation plans for Medicaid managed care and implementation of the ASAM PPC-2 by rule change for state providers of addiction services to DASA patients, which include Medicaid, the uninsured and underinsured. DASA staff estimate that 65% of Illinois residents have inadequate insurance to cover necessary addiction services.

New Jersey

Chapter elections held in conjunction with the New Jersey Chapter's business meeting in January 1997 resulted in the election of John Verdon, M.D., F.A.S.A.M., President; Kenneth Bahrt, M.D., Vice-President; Lance Goberman, M.D., Secretary; and Susan Neshin, M.D., Treasurer. The chapter's next meeting is scheduled for the ASAM Medical-Scientific Conference in San Diego.

New York

The New York Chapter is planning its annual business meeting and continuing education conference for Thursday, March 20, reports chapter President Merrill Herman, M.D. The featured presenter, long-time ASAM member Herbert Peyser, M.D., will discuss "Substance Abuse and Managed Care." Meeting information is available from the ASAM office at 301/656-3920, ext. 108.

Continued on page 17



Supporting the ASAM 1996-1997 Membership Campaign are (left to right) members Joseph Adams, M.D.; Andrea Barthwell, M.D.; John Slade, M.D., F.A.S.A.M.; R. Jeffrey Goldsmith, M.D.; and Lori Karan, M.D., F.A.S.A.M.

CHAPTER PRESIDENTS AND CONTACTS

State Chapters will conduct an Open Forum Breakfast on Sunday, April 20th during ASAM's 28th Annual Medical-Scientific Conference in San Diego. All members are encouraged to attend. Members who are interested in becoming active in their state chapter, or in organizing a chapter, should consult the meeting program on-site or their state chairs or other contacts for more information. Except where otherwise noted, the following individuals can be reached through the ASAM office at 301/656-3920, by fax at 301/656-3815, or via E-Mail at CDAVI@ASAM.ORG.

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William Jerry Howell, M.D.
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Alaska

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William S. Bröstoff, M.D., F.A.S.A.M.
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or
Gail Jara
CSAM Executive Director
510/428-9091

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Chair: Carolina Gellrick, M.D.

Connecticut

Chapter not yet formed
Chair: Peter Rostenberg, M.D., F.A.S.A.M.

Delaware

Chapter not yet formed
Chair: Open

District of Columbia

Chapter not yet formed
Chair: Open

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Chapter President
or Robert Donofrio
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904/484-3560

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ISAM Office
312/263-7150

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Chair: Open

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919/990-9559

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Contact: William L. Mason, M.D.

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Chapter President

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Chair: Open

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Contact: Berton Toews, M.D.

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ASAM CERTIFICATION

ASAM: 282 PHYSICIANS CERTIFIED/RE-CERTIFIED IN ADDICTION MEDICINE

ASAM is proud to announce that 148 candidates have passed the 1996 Certification Examination and are thus Certified in Addiction Medicine. An additional 134 physicians passed the examination and are thus Recertified in Addiction Medicine. Those whose names appear below will be presented with their Certificates during the ASAM Awards Dinner at the 28th Annual Medical-Scientific Conference in San Diego.

Certified in Addiction Medicine

- William E. Abramson, M.D.
Faruk S. Abuzzahab, M.D.
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Lanny G. Anderson, M.D.
John C. Andreozzi, M.D.
Arde K. Anoshivani, M.D.
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James W. Berry, M.D.
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George S. Davidson, M.D.
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Martin P. Gleespen, M.D.
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Marcello A. Maviglia, M.D.
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A. S. Winter, M.D.
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- Elmer Yu, M.D.

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Physicians Who Qualified on the MRO Subsection

The following physicians passed the special subsection on Medical Review Officers on the ASAM 1996 Certification Examination.

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	Harley J. Harber, M.D.	Kirk D. Moberg, M.D.	Christopher J. Suelzer, M.D.
	Peter Q. Harris, M.D.	Gloria J. Mouzon, M.D.	
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	James J. Kramer, M.D.	Thomas M. Robbie, M.D.	Donald A. West, M.D.
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Frederick B. Epstein, M.D.			
Jay R. Feerman, M.D.			
Jerry Fitz, M.D.			

Chapter Update - Continued from page 14

North Carolina

Regional Director Rick Beach, M.D., reports that a tri-state seminar was held February 26 for ASAM members in North Carolina, Virginia and South Carolina. Featured speaker for the seminar on "Integrating Pharmacologic and Behavioral Treatment Modalities," was Ray Anton, M.D., of the Medical College of South Carolina.

Ohio

The next general membership meeting of the Ohio chapter is scheduled for Saturday, July 26, in conjunction with the Fourth Annual Physician Track of the Ohio State University Summer Institute of Addictions Studies. The course, titled "Addiction and Mental Health Update for the Primary Care Physician," will be held at the Holiday Inn on the Lake, Columbus. Further information can be obtained from Stan Sateren, M.D., at 614/868-6710.

South Carolina

President Timothy Fischer, D.O., has announced that the South Carolina Chapter

reached 120 percent of its membership goal for 1996. Chapter activities in 1997 are to include SCSAM joining the "Alliance for a Smoke-Free South Carolina" as a corporate member, with Dr. Fischer representing the chapter on the organization's board. SCSAM also will join Mothers Against Drunk Driving in supporting a bill to be introduced in the state legislature regarding enforcement of penalties for drinking and driving.

In February, SCSAM co-sponsored a one-day Addiction Conference with Greenwood Memorial Hospital. SCSAM also plans a membership meeting with associated continuing education in summer 1997.

Region III

Regional Director Alan Wartenberg, M.D., F.A.S.A.M., reports that Region III held a very successful regional meeting at the Hotel Northampton in November, organized by Pyanamurtula Kishore, M.D. Entitled "Addiction Medicine: Into the 21st Century," the session featured state-of-the-art presentations on treatment of addictive disorders by experts in the New England Region, as well as reports on state, regional and national activities of ASAM.

Speakers included Michael Mayo-Smith, M.D., who discussed the role of withdrawal scales in initiating pharmacotherapy for alcohol withdrawal syndrome, and Norman Alpert, M.D., who reviewed the use of naltrexone in the treatment of alcoholism. Alan Wartenberg, M.D., spoke on newer methods of opioid detoxification and maintenance, including LAAM and buprenorphine. Nick Nicodemus, M.D., discussed the use of cocaine vaccines in animal systems on cocaine using behaviors. Brian Sands, M.D., reviewed benzodiazepine use and abuse, and strategies for treatment of the addicted patient with anxiety disorders. The session also featured a panel discussion of dual diagnosis issues, involving David Gastfriend, M.D. and S. Rao, M.D., with active audience participation. At the conference luncheon, Dr. Wartenberg reported on national ASAM developments.

Reflecting the success of the November conference, plans are underway to make the Region III meeting an annual event. The meeting was staffed by Pat Besinger and Hilding Ohstrom and supported by educational grants from Roxane Pharmaceuticals and DuPont Pharma.

RUTH FOX MEMORIAL ENDOWMENT

Dear Colleague:

There are three easy ways of giving to the Ruth Fox Memorial Endowment Fund in addition to making an outright contribution or pledge. They are:

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Add your name to the ranks of those who know the joy of giving in time to receive an invitation to the Ruth Fox Memorial Endowment Reception, scheduled for Friday, April 18, 1997, at the Med-Sci Conference in San Diego. It is an outstanding event by invitation only.

Please contact Claire Osman if you would like to make a pledge or contribution, or if you wish to discuss a deferred gift (in confidence). She can be reached at 800/257-6776. Your support will be greatly appreciated, and will ensure ASAM's financial security well into the future.

Reminder: A special program will be presented by Paul E. Dow, J.D., on "Protecting Pension Plan Assets & Distribution Strategies," Thursday, April 17, 1997, from 7:00 to 8:30 p.m., during the Society's 28th Annual Medical-Scientific Conference in San Diego. Last year's program was very successful, and participants received valuable information. If you plan to attend, please check this session on the conference program/registration form when you return it. Everyone is invited.

Max A. Schneider, M.D., Chair, Endowment Fund

Jasper G. Chen See, M.D., Chair Emeritus, Endowment Fund

Claire Osman, Director of Development



Total Pledges: Over \$2 million

**New Donors, Additional Pledges
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January 1 - February 14, 1997

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ASAM ACCEPTING NOMINATIONS FOR EMERITUS MEMBERSHIP

ASAM members are invited to recognize the accomplishments of senior members of the Society by nominating them for Emeritus membership. Emeritus members have their membership dues waived and receive complimentary subscription to *ASAM News* and the society's *Journal of Addictive Disease*.

Emeritus status is bestowed by the ASAM Board of Directors, which reviews all nominations. To qualify, a nominee must be: (1) an ASAM member for at least 15 years; and (2) at least 65 years old; and (3) retiring or retired from the practice of addiction medicine. (However, in special cases, the Board reserves the right to bestow Emeritus membership independent of any of the criteria listed.)

Nomination forms are available from the ASAM Membership Department at 301/656-3920.

ADDICTIONIST

The Mid-Atlantic Permanente Medical Group, P.C., a physician owned and managed medical group, is growing and expanding our facilities in Virginia, Maryland, and Washington, D.C. We are seeking an ASAM certified Addictionist for our practice who can provide excellent service in our modern, state-of-the-art offices. Excellent salary and benefit package including vacation and sick time, health/life benefits, occurrence malpractice coverage, retirement plan, relocation allowance, shareholder opportunity, and much more. Reasonable call schedule allows for predictable time off. Nationally recognized for quality care, Kaiser Permanente presents an ideal opportunity to practice medicine. To learn more, send/fax CV to Dorothy Houlihan, Physician Recruitment, MAPMG, 2101 E. Jefferson Street, Box 6649, Rockville, Maryland 20849. 1-800-227-6472. Fax 301-816-7472. EOE



KAISER PERMANENTE

South San Francisco Bay

Seeking a BC/BE psychiatrist or internist to serve as director of the chemical dependency recovery program at the Kaiser Permanente Medical Center in Santa Clara, CA. The ideal candidate for this position will have both administrative experience and chemical dependency training and expertise. Responsibilities include the medication management of patients and overall direction of the program. For more information, send CV and cover letter to: Brenda Ferguson, The Permanente Medical Group, Inc., 1814 Franklin, 4th Fl., Dept. 77, Oakland, CA 94612. EOE.



KAISER PERMANENTE

MEDICAL DIRECTOR

MacNeal Hospital Dependency Treatment Center

MacNeal Hospital, affiliated with the University of Chicago and recently named one of the Top 100 Hospitals in America, seeks a strong clinician and educator to become Medical Director of our Dependency Treatment Center.

The ideal candidate will be board certified in Psychiatry with additional certification in Addiction Medicine. The Medical Director will oversee all patient care, quality improvement activities, program and business development.

In addition to medical-administrative responsibilities, the Medical Director will serve as a faculty member in our integrated residencies in Psychiatry and Family Practice.

MacNeal Hospital offers the largest mental health and addiction program in west suburban Chicago. Our addiction programs are founded on ASAM guidelines and include inpatient detoxification, residential rehabilitation, dual diagnosis treatment and a variety of outpatient programs, including child and family therapy.

Candidates must have excellent medical credentials and strong program development and interpersonal skills. A constructive and collaborative approach to working with managed care organizations is essential.

Please send your CV to: Barbara Fahey, Physician Affairs, 3249 South Oak Park Avenue, Berwyn, Illinois 60402. Phone 708/795-3013.

A Book For Physicians, Families and Patients

New ways to think about addiction, including brain biology, prevention and treatment, and public policy.

The Selfish Brain: Learning from Addiction

Robert L. DuPont, M.D.
Foreword by Betty Ford

Hardcover \$29.95/624 pages
American Psychiatric Press, Inc.
800/368-5777
Fax 202/789-2648
Please refer to order # ADAM8686

MEDICAL DIRECTOR

The Black Mountain Alcohol and Drug Abuse Treatment Center and Bowman Gray School of Medicine, Department of Psychiatry, are jointly recruiting for a Medical Director for the Black Mountain Alcohol and Drug Abuse Treatment Center (ADATC).

The Black Mountain ADATC is one of 3 ADATCs in the Statewide system of Substance Abuse Services under the direction of the North Carolina Department of Human Resources. The Department, through its Division of Substance Abuse Services, sponsors prevention and treatment programs for substance abuse. The Black Mountain ADATC is located in the beautiful mountain region of Western North Carolina in historic Black Mountain. The ADATC is opting to become a HCFA certified psychiatric facility in order to more fully serve its patients with addiction disorders. To assist in leading this organizational effort, a psychiatrist with experience in addiction medicine is needed.

Candidates should be certified by the American Society of Addiction Medicine (ASAM) or possess the Certificate of Added Qualifications in Addiction Psychiatry of the American Board of Psychiatry and Neurology (ABPN). Candidates not certified by ASAM or ABPN, but meeting the requirements of these certifying bodies will be considered. In addition to clinical qualifications, experience in management/administration/leadership of programs is required. The successful candidate will be appointed to the full-time faculty of Bowman Gray School of Medicine, Department of Psychiatry, at faculty rank commensurate with previous scholarly record, clinical and administrative experience. It is intended that the medical director spend most of his time and effort at the ADATC. It is also intended that the medical director will organize or participate in grant funded research.

Candidates meeting these qualifications should send letters of interest and curriculum vitae to:

*Bill Rafter, M.H.A.
Director of ADATC-Black Mountain
301 Tabernacle Road
Black Mountain, NC 28711*

ASAM

CONFERENCE CALENDAR

1997

March 20

New York Chapter Meeting
New York, NY

March 20-23

Prevention '97 (cosponsored by ASAM)
Atlanta, GA

April 13-16

Annual Meeting,
American Methadone Treatment Association
(Jointly sponsored by ASAM)
Chicago, IL

April 17

Ruth Fox Course for Physicians
San Diego, CA
7 Category 1 CME credits

April 17

ASAM Computer and Online Course
San Diego, CA

April 17

ASAM HIV/AIDS Course
San Diego, CA

April 18-20

ASAM 28th Medical-Scientific Conference
San Diego, CA
22 Category 1 CME credits

July 18-20

ASAM MRO Conference
Dallas, TX

1997

August 6-10

IDAA Medical-Scientific Conference
(Jointly sponsored by ASAM)
Minneapolis, MN

September 6-21

South Africa People-to-People Conference
(jointly sponsored by ASAM)

October 16-19

ASAM 10th Annual Conference on
Nicotine Dependence
Minneapolis, MN

October 23-25

State of the Art in Addiction Medicine
Washington, D.C.
20 Category 1 CME credits

October

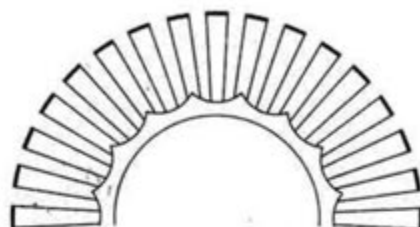
Adolescent Substance Abuse and
Addiction Conference
14 Category 1 CME credits

November 6-8

CSAM State of the Art Course
San Francisco

November 14-16

ASAM MRO Conference
Seattle, WA



Come Practice Psychiatry in the Beautiful Southwest

Remuda Treatment Center is a progressive facility located on a guest ranch setting 50 miles northwest of Phoenix. Remuda individualizes TX for eating disordered females meeting medical, nutritional & psychological needs blended with a Biblical perspective. We are seeking a BC/BE psychiatrist interested in eating disorder treatment. We offer a charming resort town atmosphere, excellent salary and very predictable schedule. E.O.E.

Call or FAX your CV to
Linda Hughes

Remuda Ranch Center
1 E. Apache St. Wickenburg, AZ 85390
(520) 684-4244
FAX (520) 684-4247

For additional information, call the ASAM office at 301/656-3920.

SAVE THESE DATES!

The American Society of Addiction Medicine presents



Ruth Fox Course

28th Annual Medical-Scientific Conference
April 18-20, 1997

AND

Ruth Fox Course for Physicians
April 17, 1997

San Diego 1997

ASAM

For complete information 301.656.3920/Email asamoffice@aol.com