



PREFACE AND ACKNOWLEDGEMENTS

Conference Chair Addison D. Davis IV, Assistant Deputy Director for Demand Reduction, Office of National Drug Control Policy, welcomed the conferees:



ADDISON D. "TAD" DAVIS IV, CONFERENCE CHAIR

On behalf of ONDCP's Director, Mr. John Walters, it is my distinct privilege and honor to welcome each and every one of you.

We meet as leaders of private sector organizations and Federal agencies to discuss ways to enhance the training of physicians in the prevention, diagnosis, and management of drug and alcohol problems and related medical disorders. Indeed, the conference represents a new level of engagement between government and the medical community on this important issue.

A key component of expanding the Nation's treatment capacity lies in engaging health professionals — particularly physicians — in the identification, counseling, referral, and ongoing medical management of persons with substance use disorders. From screening for addiction, to emerging modalities of treatment, to the prevention of prescription drug diversion and abuse, the need for more comprehensive medical education on substance use disorders is clear.

We look to you — the leaders of organized medicine, medical education, and licensure and accreditation — to counsel and advise us on the most effective ways to reach out to physicians and training institutions. Because the need is so compelling, and the work already accomplished so important, I am confident that this conference will help us achieve a major step forward toward our goal.

I want to conclude by thanking many of you who helped to bring this meeting together. On behalf of all my colleagues, I want to thank all of our Federal agency partners: you have always helped us whenever we asked. Particular thanks go to Mr. Charles Curie, Administrator of the Substance Abuse and Mental Health Services Administration, who has been a

tremendous supporter of this effort. I'd also like to recognize Dr. Westley Clark, who directs the Center for Substance Abuse Treatment, and Beverly Watts Davis, who is Director of the Center for Substance Abuse Prevention. And then finally, my predecessor — but more importantly, my mentor and friend, Dr. Andrea Barthwell, who has been a driving force in the effort that we are about to undertake. I want to thank her for being here, but more importantly, for her energy and courage and dedication to the field, which has really set an example for all of us.

Some time ago, Dr. Barthwell was approached by Dr. Mark Kraus, Dr. Bud Isaacson, Dr. Jonathan Ritvo, and Dr. Petros Levounis with the idea for this conference. I want to express my gratitude to them, and to the other members of the Expert Panel as well.

I want to express our appreciation to The Robert Wood Johnson Foundation, which has been involved in this field for many, many years, for their generous grant in support of the conference.

Finally, I want to thank you, the conferees. I know that all of you have enormously crowded schedules, so thank you for being here. Thank you for what you have done, and for what you will do. I look forward to the results of this meeting and to our ongoing relationship. If we do our job, we will help extend your efforts to save many more lives.

Now I'm going to ask Bonnie Wilford, our conference facilitator, to explain what we'll be doing over the next two days. Any organization needs someone to keep everyone on track, and that's her task. I think she's done an excellent job in getting us here this evening and preparing this fine program for us. Bonnie served for 10 years with the American Medical Association as Director of the Department of Substance Abuse and was the first woman to direct the AMA's Division of Clinical Science. We're delighted to have her to guide us through the conference activities.

BONNIE B. WILFORD
CONFERENCE FACILITATOR

As I stand here, I'll admit that I am forced to adopt a new paradigm. In the past, I've used what I call the "file cabinet test" to measure how far the addiction field has come. When I joined the AMA in 1981, my first assignment was to prepare a little handbook on substance abuse for primary care physicians. The sum total of the research that we gathered for that book filled barely two drawers of a file cabinet.

More recently, I have been privileged to collaborate on a textbook of addiction medicine that's published by the American Society of Addiction Medicine. The textbook itself is 1,600 pages, and it could have been longer. The editors of the next edition, two of whom are with us at this conference, will struggle to keep the fourth edition to less than 2,000 pages. The volume of knowledge in the addiction field is exploding, which is why it's so exciting. The documents that chronicle our understanding of the causes and manifestations and management of substance use disorders now fill entire libraries. So the results of the file cabinet test are among the most encouraging indicators I've seen.

But now I have a new paradigm, which I'll call the "generational test." The person who brings this home to me is Michael Dekker, a medical student who is with us as a representative of the American Medical Student Association. I am very happy to have him with us, particularly because I know his father. When Dr. Anthony Dekker and I first worked together, he was a resident who, in his spare time, was working with a street clinic for homeless kids in Chicago. I was at the AMA at the time, and we used AMA funds to help purchase medications that Tony's clinic couldn't otherwise afford.

Tony went on to become a leader in both osteopathic medicine and addiction medicine. I'm confident Michael will do the same. But I don't want to wait for another generation to come along — for Michael's son to be at a similar meeting 25 years from now — before we meet the challenge of educating physicians about substance use disorders.

The new paradigm says that this is our chance. Dr. Barthwell and Dr. Lewis are right: a rare constellation of forces is in place at this moment in time. We have a President who uses his State of the Union address to speak of the devastation of addiction and the promise of recovery. We have a Surgeon General of the United States who speaks openly and movingly about his experiences growing up in a family affected by alcohol and drug problems. And we have Director Walters, who is a member of the President's Cabinet, and the leaders of our major health agencies who are willing to provide real support to this initiative. That's an astonishing and unparalleled

convergence of leadership. So I'm optimistic about our chances to effect real change.

Now to the specifics. First, you may be wondering exactly why you've been invited to be here. There were two categories of invitations: Some of you are here because you are change agents in the organizations you represent. You're the folks designated by your organizations to help us understand what the world looks like from the perspective of internal medicine, or the licensing boards, or the accreditation agencies. Others of you are experts on medical education or substance abuse. You are here because you have deep experience in creating the kinds of educational ventures we want to encourage.

We've tried to organize your time at the conference so as to maximize the opportunities for you to talk to each other and to our Federal partners, who are here not because they have to be, but because they share our enthusiasm and commitment to change. Your discussions in the working groups tomorrow are at the heart of your mission here. There are groups for undergraduate, graduate, and continuing education, as well as a group for the representatives of the Federal agencies. In the morning, you will talk and listen to each other, and you will explore how the world looks from your multiple vantage points. In the afternoon, you will be asked to devise specific strategies to move us forward from this meeting.

You will be supported in every way we can think of. We have provided professional facilitators to assist your working groups, as well as note takers who will record your thoughts and conclusions. We are very fortunate to have with us a research librarian who specializes in substance abuse issues, who has set up a reference library for you. So anything you can think of that we can do for you, we'll be delighted to do.

At the end of the day tomorrow, each of your groups will be asked to report your conclusions and recommendations to the entire conference. We're also asking you to give us advice as to how we can keep the momentum going. There are so many good people who helped to bring about this meeting, we don't want the energy to dissipate. So please give us solid ideas about practical steps we can take to keep the initiative vibrant.

Following the conference, a report will be circulated to you, first for your input, then as the official proceedings of the conference. We also will ask you to think about opportunities within your own organizations to undertake relevant activities. And the core group of conference planners will continue to meet.

The last thing I want to say, because I've heard my name mentioned an uncomfortable number of times tonight, is that a very active planning committee is responsible for this event. In addition to Martha Gagne and Tad Davis, Peggy Murray of NIAAA, Cindy Miner of NIDA, and Anton Bizzell of CSAT have been the real leaders of the effort. We thank all of them very much.