

H-95.991 Referral of Patients to Chemical Dependency Programs

The AMA urge its members to acquaint themselves with the various chemical dependency programs available for the medical treatment of alcohol and drug abuse and, where appropriate, to refer their patients to them promptly. (Res. 31, I-79; Reaffirmed: CLRPD Rep. B, I-89)

H-95.956 Harm Reduction Through Addiction Treatment

The AMA affirms that addiction treatment is a demonstrably viable and efficient method of reducing the harmful personal and social consequences of the inappropriate use of alcohol and other psychoactive drugs; and urges the Administration and Congress to provide significantly increased funding for treatment of alcoholism and other drug dependencies and support of basic and clinical research so that the causes, mechanisms of action and development of addiction can continue to be elucidated to enhance treatment efficacy. (Res. 411, A-95)

H-95.951 Role of Self-Help in Addiction Treatment

The AMA:

1. recognizes that:
 - a. patients in need of treatment for alcohol or other drug-related disorders should be treated for these medical conditions by qualified professionals in a manner consonant with accepted practice guidelines and patient placement criteria; and
 - b. self-help groups are valuable resources for many patients and their families and should be utilized by physicians as adjuncts to a treatment plan; and
2. urges managed care organizations and insurers to consider self-help as a complement to, not a substitute for, treatment directed by professionals, and to refrain from using their patient's involvement in self-help activities as a basis for denying authorization for payment for professional treatment of patients and their families who need such care. (Res. 713, A-98)

H-30.950 Alcoholism in the Elderly

It is the policy of the AMA to:

1. Work with others to develop new guidelines for physicians concerning the prevention, diagnosis and treatment of alcoholism in the elderly, with suggestions on how to overcome diagnostic and treatment barriers. These guidelines should be disseminated widely among primary care practitioners.
2. Encourage medical educators to consider expanding instructional material on alcohol and aging at all levels of medical education, particularly in residency and/or postgraduate training.
3. Urge relevant foundations, universities and government agencies to sponsor clinical studies on alcoholism in the elderly. Among topics that need to be explored are the treatment implications of any differences between early and late-onset alcoholics; the influences of various family structures and functions on the treatment of the elderly alcoholic; the possible development of more accurate alcoholism screening instruments for use with the elderly; securing additional data on treatment outcome to demonstrate whether therapy is cost effective and beneficial to the patient and society, and to identify the most efficacious modalities by type of elderly patient; the value of brief treatment interventions with the elderly patient in terms of arresting the development of the disease and reducing medical complications; and participation of physicians in home health care programs as possible models for one type of physician intervention.
4. Cooperate with other groups, such as the American Association of Retired Persons and appropriate government agencies, in public education programs for the elderly concerning alcohol-related problems. (CSA Rep. I-93-1)

H-350.987 Hispanic Health In The United States

It is the policy of the AMA to:

1. encourage health promotion and disease prevention through educational efforts and health publications specifically tailored to the Hispanic community;
2. promote the development of substance abuse treatment centers and HIV/AIDS education and prevention programs that reach out to the Hispanic community; (Amended CSA Rep. F, I-90)

H-30.943 Alcoholism and Alcohol Abuse Among Women

The AMA recognizes the prevalence of alcohol abuse and dependence among women, as well as current barriers to diagnosis and treatment. The AMA urges physicians to be alert to the presence of alcohol-related problems among women and to screen all patients for alcohol abuse and dependence. The AMA encourages physicians to educate women of all

ages about their increased risk of damage to the nervous system, liver and heart disease from alcohol and about the effect of alcohol on the developing fetus. The AMA encourages adequate funding for research to explore the nature and extent of alcoholism among women, effective treatment modalities for women with alcoholism, and variations in alcohol use and abuse among ethnic and other subpopulations. The AMA encourages all medical education programs to provide greater coverage on alcohol as a significant source of morbidity and mortality in women. (CSA Rep. 5, I-97)

H-95.965 Residential Treatment for Drug-Addicted Women

The AMA encourages state medical societies to support an exemption in public aid rules that would allow for the coverage of residential drug treatment programs for women with child-bearing potential. (Res. 405, I-91)

H-30.974 Return to Work Following Successful Rehabilitation for the Disease Alcoholism and Other Chemical Dependencies

The AMA reaffirms the concept that successful treatment of patients with the disease alcoholism, or other chemical dependencies, followed by appropriate medical supervision and monitoring on a continuing basis, will allow most individuals to return to meaningful, productive employment and resume full responsibility of their normal job assignment or profession. (Res. 191, A-89; Reaffirmed: Amended BOT Rep. I-93-18)