

## **ASAM Family Practice Workgroup Update Sept 6, 2008**

### **Good news:**

1. Booth at upcoming AAFP meeting in San Diego: Booth number 4935  
If you are there, stop by and help man the booth if you have time. If you do not have time to help man the booth, stop by anyway. I will be there much of the time. This booth is funded by CSAT money from their pain course grant. It promotes the pain course, but we also will talk about other ASAM and addiction issues with those who stop by.
  
2. STFM addiction interest group formed. Dr. Anthony Cloy, Assistant Professor of Family Medicine, University of Mississippi will be the chair and I am temporarily vice chair. At this moment we have two other official members: Paul Seale from Mercer Medical School and Kiame Mahaniah from Tufts. At the last component session many others indicated an interest in joining, but I could not confirm that you were all members of STFM. In a month or so you can sign up for this interest group on the STFM website, but also feel free to e-mail me your interest. You will need to be a member of STFM. The initial very tentative goals are:
  - A. Provide educational material on addiction to the STFM website
  - B. Provide links to educational material on addictions on the STFM website, along with the links already there for other diseases (Currently there are not any)
  - C. Encourage presentations on addictions
  - D. Help connect residency programs with educational and financial resources of federal agencies that are involved in substance use issues.

We will meet by conference call and at ASAM and or STFM meetings.

3. Pain and Addiction: a lot of course material. CSA has developed a course which has been sponsored by numerous state ASAM and AAFP chapters. Several family physicians were involved in the development of the course. It should be on line in several months.  
Other materials are also coming out, including a monograph that the AAFP is producing and sending to all members. I am helping NIDA organize a symposium on this for next year's ASAM Med-Sci meeting.

#### 4. Family Practice Component Session for ASAM Med-Sci 2008

I plan to give a brief general update. Dr. Richard Blondell, who the Family Practice representative on the ABAM will share what is happening with the board and the need for fellowships. Dr. Anthony Cloy, the new chairman of the STFM addiction interest group, will

Lead a discussion about that group. Those present will have an opportunity to become involved in STFM and ASAM activities.

#### 5. Patient Centered Medical Home: ASAM has a Public Policy Statement on this and is a member of the PCMH consortium

### **Recommendations:**

1. ASAM supports the concept of the Patient-centered Medical Home and encourages each patient receiving specialty care in Addiction Medicine to have a PCMH. ASAM supports the involvement of primary care providers in providing a Patient-centered Medical Home for patients.

2. Addiction is often a chronic disease and should be cared for as any other chronic disease. Prevention of substance use disorders should also be part of prevention services offered in the medical home. ASAM recommends that in such a context, screening, brief interventions and referrals to specialty care in Addiction Medicine can take place for substance use problems and addiction. The primary care provider (acting alone or with the assistance of consulting physicians and other professionals with specialty training in addiction medicine) should apply evidence-based approaches to assist the patient.

3. ASAM supports the training of primary care physicians to meet the workforce needs for primary care medical homes and encourages America's medical education and medical education financing systems to promote career paths for physicians to become primary care providers of Patient-centered Medical Home care.

For full text go to: [ASAM.org](http://ASAM.org) Advocacy and then Public Policy and then medical aspects, or search under public policy for medical home

### **BAD NEWS**

1. Adopt a residency may be on hold. The Association of Family Medicine Residency Directors (AFMRD), working with ASAM, surveyed residencies concerning their need for assistance with addiction training. Fifty residency directors replied and many requested assistance. Our plan was to send a letter jointly from AFMRD and ASAM to these directors with a list of resources, plus we were going to have our state chapters contact the residencies that requested faculty help. The project was to be a joint ASAM, AFMRD project. Unfortunately the members of the AFMRD board who were initially in favor of this are no longer on their board and the board has never discussed the results of the survey. I have made several calls and am told that they are too busy to even look at the results, much less give permission to send a letter out with their name on it. This is a big disappointment to me

We can still contact these residencies ourselves, but cannot reference the AFMRD. Should we do this? Please send me your opinion:

- a. Try to develop something and contact the residencies anyway
- b. Develop our STFM addiction interest group and work through this, plus try to find other avenues and possibly ask the AFMRD again at a future time.

As you can probably tell, I favor b.

PLEASE E MAIL ME ANY FEEDBACK ON THIS. ALSO IF YOU WANT ANYTHING YOU ARE DOING POSTED ON OUR FAMILY MEDICINE SECTION OF THE ASAM WEBSITE, E MAIL IT TO ME. (ASAM.ORG, RESOURCE LINK)

THANKS

Norman Wetterau