

Substance Use Disorder Among Anesthesiologists and Providers

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Over the past 40 years, the incidence of substance use disorder (SUD) in anesthesia has increased with an incidence between 1-2%. Anesthesiologists are at high risk for SUD, with alcohol, opioids and anesthetics/hypnotics being the most commonly used substances. Drug diversion occurs when controlled or prescription medications are obtained and/or used illegally.

What are the risk factors for developing SUD?

- Male sex
- Family history of addiction
- Mental health disorders, including but not limited to anxiety, depression, bipolar disorder, ADHD, and PTSD
- Lack of social support
- History of untreated substance misuse (alcohol, recreational drugs)
- Use of a highly addictive drug

What are some of the signs of SUD?

- Change in behavior, mood (irritability, mood swings), or physical appearance (weight loss, pallor, tremors)
- Spending more time at work or volunteering for additional call shifts
- Unwillingness to accept breaks or taking frequent, prolonged bathroom breaks
- Worsened job performance and/or neglecting home/job responsibilities
- Withdrawal from family, social circles and activities
- Sloppy medication documentation that does not align with patient pain scores
- Pulling more medications (opioids, benzodiazepines, propofol) than warranted for a case compared to peers
- Omissions, errors, or inconsistencies when wasting drugs, as monitored by pharmacy and testing (i.e. Raman spectroscopy)

What should I do if I am concerned about a trainee or faculty member?

- Contact the hospital drug diversion specialist or ethics/compliance hotline and report patient safety concerns
- Engage support from close family/friends, as signs of SUD often appear in personal life before they are apparent at work
- Communicate suspicious activity or concerns to the supervisor for further investigation/drug testing
- Escalate concerns to leadership/well-being leaders so they can reach out to the person in a coordinated and supportive manner

How does one seek appropriate support for SUD?

- Communicate with supervisor or program leadership
- Consult with legal counsel, as medical licensure may be revoked
- Enroll in physician SUD treatment/support program. These programs ideally take the lead in managing identification of SUD, treatment, return to work, etc. They're also experts in preserving physician licensure during treatment and re-entry.
- Participate in a SUD monitoring program to help maintain abstinence and return to work

What mental health resources are available?

- Resources by State
- ASA Well-being Resources
- SAMHSA's National Helpline: <u>1-800-662-HELP (4357)</u> a confidential, free, 24x7x365 information service for individuals and family members facing mental and/or substance use disorders

What tools are available for self-screening?

- National Institute on Drug Abuse
- The UNCOPE Screening tool

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Acknowledgment: The authors would like to dedicate this SPA One-Pager to our colleagues who have lost their lives too soon from substance abuse and to those who are currently struggling with substance use. Please know help is available.