

Commentary

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Random Drug Testing Protects Patients and Medical Personnel

A new MSNBC article highlights the ongoing addiction problems of medical personnel and the negative effects on job performance and patient care.ⁱ When addicted health care workers use drugs of abuse, they put their patients at risk. While medical personnel may have to pass an initial drug test as part of the hiring process, they are not required by law to be randomly screened for drugs. Mandatory random employee drug testing is reserved for employees in “safety-sensitive” positions. Physicians in private practice are not employees and are therefore usually not drug tested at all. However, physicians and nurses are responsible for making critical decisions and taking actions that directly affect the health and well-being of the sick and injured. Shouldn't these positions be considered safety-sensitive?

The United States first implemented mandatory urine drug testing of safety-sensitive employees during the 1980's. In 1972ⁱⁱ and later in 1986,ⁱⁱⁱ Dr. George Lundberg of the American Medical Association (AMA) referred to urine drug testing as “chemical McCarthyism” arguing that urinalysis testing technology was not sensitive enough to accurately identify recent use and impairment. Since that time, not only has drug testing technology greatly improved, but there is also abundant experience with mandatory testing that demonstrates its effectiveness in identifying drug users and deterring drug use. The United States military has used random testing since the early 1980's with little controversy and great success. Also subject to testing are the 12 million Americans with commercial driver licenses under the auspices of the U.S. Department of Transportation. Similar programs have been developed for the nuclear power industry. Testing for drugs of abuse is commonly used in areas of pre-employment evaluations, healthcare (screening patients), and the criminal justice system.

The AMA Council on Scientific Affairs published recommendations for drug testing which do not support random testing of physicians but do support “for cause” and pre-employment testing as well as monitoring as part of drug treatment. Generally, medical organizations oppose random testing of healthcare personnel as unnecessarily expensive and a violation of privacy. However a few hospitals do drug test physicians, including most notably Massachusetts General Hospital in Boston.

It is common to view random drug testing as intrusive and negative. While it is unfamiliar to many people and therefore can be frightening, random testing not only reinforces the laws against illegal drug use, but it also identifies recent drug use quickly creating a strong deterrent against illegal drug use. Random testing of physicians and other health care personnel would save careers and families as well as protect patients. Random drug testing is a benefit to those tested and not a threat.

The Institute for Behavior and Health, Inc. (IBH) strongly supports random drug testing for all health care workers and commends MSNBC for highlighting this growing concern for the health and safety of medical personnel and their patients.

For more information on IBH and its priority projects to reduce illegal drug use, visit www.ibhinc.org.

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ⁱ McGrath, T. (2010, June 24). Addicted docs put patients in peril: Random drug screening urged for health care workers. MSNBC. Retrieved June 24, 2010 from <http://www.msnbc.msn.com/id/37396390/ns/health-addictions//>

ⁱⁱ Lundberg, G.D. 1972. Urine drug screening: Chemical McCarthyism. *New England Journal of Medicine* Vol. 287(14): 723-724.

ⁱⁱⁱ Lundberg, G.D. (1986). Mandatory unindicated urine drug screening: Still chemical McCarthyism. *Journal of Addiction Medical Association*, 156(21), 3003-3005.