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Arbeitsgemeinschaft der deutschen Ärztekammern

**Dr. Wilfried Kunstmann**

- German Medical Association -

# Substance abuse among Doctors in Germany

**- Problem-size and Interventions -**



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# Number of doctors in Germany with a substance use problem



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## Number of doctors in Germany with a substance use problem

Up to now no valid  
German studies  
are available





## North-American Research Results :

### USA

Hughes et al. 1992

9,600 Doctors

– written questionnaire



	life-time	within last 12 mth.
Alcohol abuse / -dependency	1.6%	6.0%

**overall prevalence of**

**Substance abuse / dependency**



## North-American Research Results:

### Canada

Brewster 1994

N = 1.500 doctors



„heavy drinkers“<sup>\*\*</sup>

Regular use of Benzodiazepine<sup>°</sup>

Occasional use of cocain

daily smokers

current use

6,0%

7,5%

0,2%

<10,0%

\* = more than 4 alcoholic drinks per occasion resp. more than 60 drinks / month,

° = more than 1x / month



## North-American Research Results:

	Lifetime-Prevalence	Point-Prevalence
US-study (Hughes)	8%	2,1%
Canadian study (Brewster)	o.A.	6% - 7,5%



## Number of physicians in Germany with a substance use problem

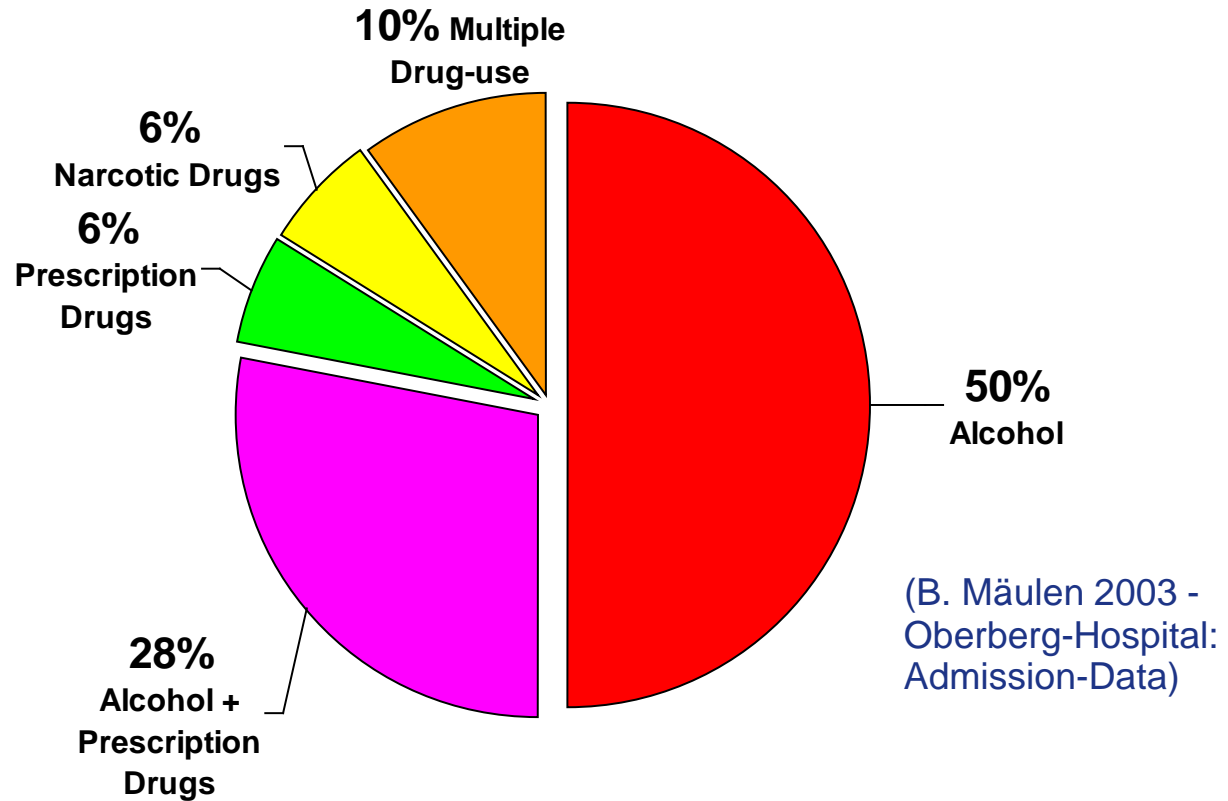
	doctors	overall population
Alcohol:	4-5% (estimated)	4,7%
Illegal drugs:	0,7%	0,9%
Smokers:	16,8%	34,8%
Benzodiazepine	13,6%	2,0%

Out of 333,600 practicing physicians  
⇒ **15,000 doctors** in Germany with a substance use problem (estimated value)





# Consumed Substances:







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# Reasons for substance abuse among doctors



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## Reasons for Substance-Abuse among Doctors

- Work stress
- Daily confrontation with suffering patients
- Helplessness
- Exaggerated expectations of self and others
- Easy access to addictive prescription medicine

Internal?

External?



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## Therapy Barriers

- Reality-loss due to dependency
- Fear of stigmatization
- Doctor as patient-problem
- Fear of professional and economic consequences

Internal?

External?



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# Legal framework for interventions



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## State Licensing Authority

- Registration and issuance of medical licenses
- Decision on license suspension
- Decision on license revocation

## Chamber of Physicians

- Registration of all doctors
- Professional code and supervision of the profession
- Ethical standards for doctors
- Disciplinary measures and proceedings

## Registration bodies for Statutory Health Insurance Physicians

- Accreditation of physicians for participation in Statutory Healthcare
- Revocation of accreditation



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## Legal Framework

### 1. Federal Ordinance on Doctors (Bundesärzteordnung)

#### Revocation of license (§5(2) i. V. §3(1), Satz 1, Nr. 2 + 3 Bundesärzteordnung)

- when doctor shows unworthy and unreliable behavior,
- when showing physical or mental handicaps regarding proper professional performance.

#### Suspension of license (§6(1) in connection with §3(1), Satz 1, Nr. 2 + 3)

- due to loss of physical or mental abilities limiting his/her professional performance,
- when physical or mental abilities are challenged and a respective health-examination had been refused.



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## 2. Law on the statutory health insurance

- Regulations for statutory health insurance accredited physicians -

### §95 (6) SGB V (Sozialgesetzbuch V)

„A doctor`s accreditation can be revoked,  
when its prerequisites do no longer apply, ...  
or contracted obligations have profoundly been violated.“

### §21 Regulation on the registration of statutory health insurance doctors (Ärzte-Zulassungsverordnung)

„If a doctor is suffering from severe mental or other internal deficiencies  
and therefore unsuitable to serve as a statutory health insurance  
physician, in particular when he / she has fallen sick by a substance  
dependency within the last 5 years before his application for accreditation,  
his / her accreditation has to be revoked.“



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# **Notification of Chambers of Physicians regarding physicians with a substance use problem**





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## Number of notifications :

nation wide

50 – 70 notifications p.a.

(ca. 80% confirmed)

## Substance use related license revocations :

< 20 cases p.a.

(estimates of Chambers of Physicians)



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## Who notifies the Chambers of Physicians?

1. Notification by law enforcement authorities  
(MiStra - Notification)
2. Patients
3. Staff / colleagues
4. Pharmacies
5. Anonymous notifications
6. Relatives
7. Personal notification
8. License Authorities
9. others



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# Available means of intervention

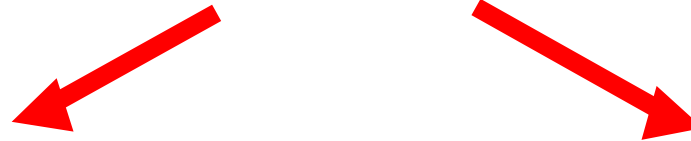


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## Chambers of Physicians` responses to notifications received

Conflict of interest



- Monitoring of professional duties and conduct
- Quality assurance / Patients` safety

Sanctions

- safeguarding doctors` welfare

Support



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Recommendations on handling physicians  
with a substance use problem  
by the German Medical Association  
- 2006 -



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## 1. Installation of a contact bureau (Kontaktstelle)

- to receive, document and validate notifications
- to contact incriminated physicians, communication on charges
- to initiate diagnostics needed
- to inform on
  - therapeutic facilities,
  - potential support by chamber of physicians,
  - sanctions if non-compliant
- to conclude a written agreement
- to set up necessary arrangements with State Licensing Authority



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## Persons to contact within Chambers of Physicians - online list -

The screenshot shows a web browser window with the URL <http://www.bundesaeztekammer.de/30/Praevention/20Sucht/75Suchtarzt/75Suchtarzt/>. The page title is "Interventionsprogramme der Landesärztekammern für suchtkranke Ärztinnen und Ärzte". The navigation menu includes "Home", "Themen A-Z", "Prävention", "Sucht/Drogen", and "Suchtkranke Ärzte Suchtkranke Ärzte". The main heading is "Interventionsprogramme der Landesärztekammern für suchtkranke Ärztinnen und Ärzte".

Suchterkrankungen sind ein relevantes gesellschaftliches Problem, von dem auch Ärzte betroffen sind. Die Landesärztekammern sehen es daher als ihre Aufgabe an, erkrankten Kammermitgliedern konkrete Hilfen anzubieten, ihre Sucht zu bewältigen und eine fachgerechte medizinische Versorgung der Bevölkerung sicherzustellen. Verschiedene Landesärztekammern haben deshalb in den letzten Jahren strukturierte Behandlungs- und Betreuungsprogramme für suchtkranke Ärzte aufgebaut. Mit ihnen wird sowohl den Betroffenen wie auch ihren Angehörigen, Kollegen und Patienten Sicherheit gegeben, dass der Arzt bei einer Meldung an die zuständige Ärztekammer mit seiner Erkrankung nicht alleine gelassen wird.

**Ansprechpartner für Betroffene bei den Landesärztekammern:**

**Landesärztekammer Baden-Württemberg:**

Frau Dr. Gisela Dahl  
Vorsitzende des Arbeitskreises Suchtmedizin  
Landesärztekammer Baden-Württemberg  
Jahnstraße 40  
70597 Stuttgart

Telefon: 0711 76989-24  
Telefax: 0711 76989-82  
E-Mail: [gisela.dahl@dgn.de](mailto:gisela.dahl@dgn.de)

**Bayerische Landesärztekammer:**

Anfragen zu berufsrechtlichen Fragestellungen beantwortet das  
Referat Berufsordnung  
Bayerische Landesärztekammer  
Mühlbauerstraße 16  
81677 München

Telefon: 089 4147-220  
Telefax: 089 4147-750  
E-Mail: [berufsordnung@blaek.de](mailto:berufsordnung@blaek.de)

Auskünfte über psychotherapeutische Behandlungsmöglichkeiten erteilt die  
Bayerische Ärzteversorgungs  
Herr Dierking (Mi. bis Fr. ganztags) / Frau Wolf (Mo., Di., Do., Fr. 9 bis 12 Uhr)  
Denninger Straße 37  
81925 München

Telefon: 089 9235-8862 / 089 9235-8873  
Telefax: ---  
E-Mail: ---

On the left side of the page, there is a sidebar with a navigation menu:

- BÄK im Überblick
- Gesundheitspolitik
- Ethik & Wissenschaft
- Patienteninformationen
- Presse
- Termine
- Themen A - Z
  - Arztstatistik
  - Ärztetag
  - Ärztinnen
  - Arbeitsmedizin
  - Arzneimittel
  - Ausbildung
  - Auslandsdienst
  - Berufsordnung
  - eArztausweis
  - Ethik & Wissenschaft
  - Fachberufe
  - Fortbildung
  - Gebührenordnung
  - Gesundheit & Umwelt

At the bottom of the page, there is a banner for "AKTIONSTAG 4.12.2006" with the website [www.patient-in-not.de](http://www.patient-in-not.de). Below the banner, there is a small advertisement for "DIESE REFORM SCHADET ALLEN" with the text "AM DIESE GEWISSENHEITSDIENST WIRD UNSERE VERORGNUNG NACHSCHREIBEN, TILGUNG UND UNSICHERHEIT".

8. Oktober 2013



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## 2. Nomination of Physicians of Confidence

- to be contacted by the doctor as a confidential expert
- to accompany and monitor the therapeutic process
- to provide support regarding occupational, legal and personal matters
- to communicate with therapist
- to notify Chamber of Physicians when therapy has failed





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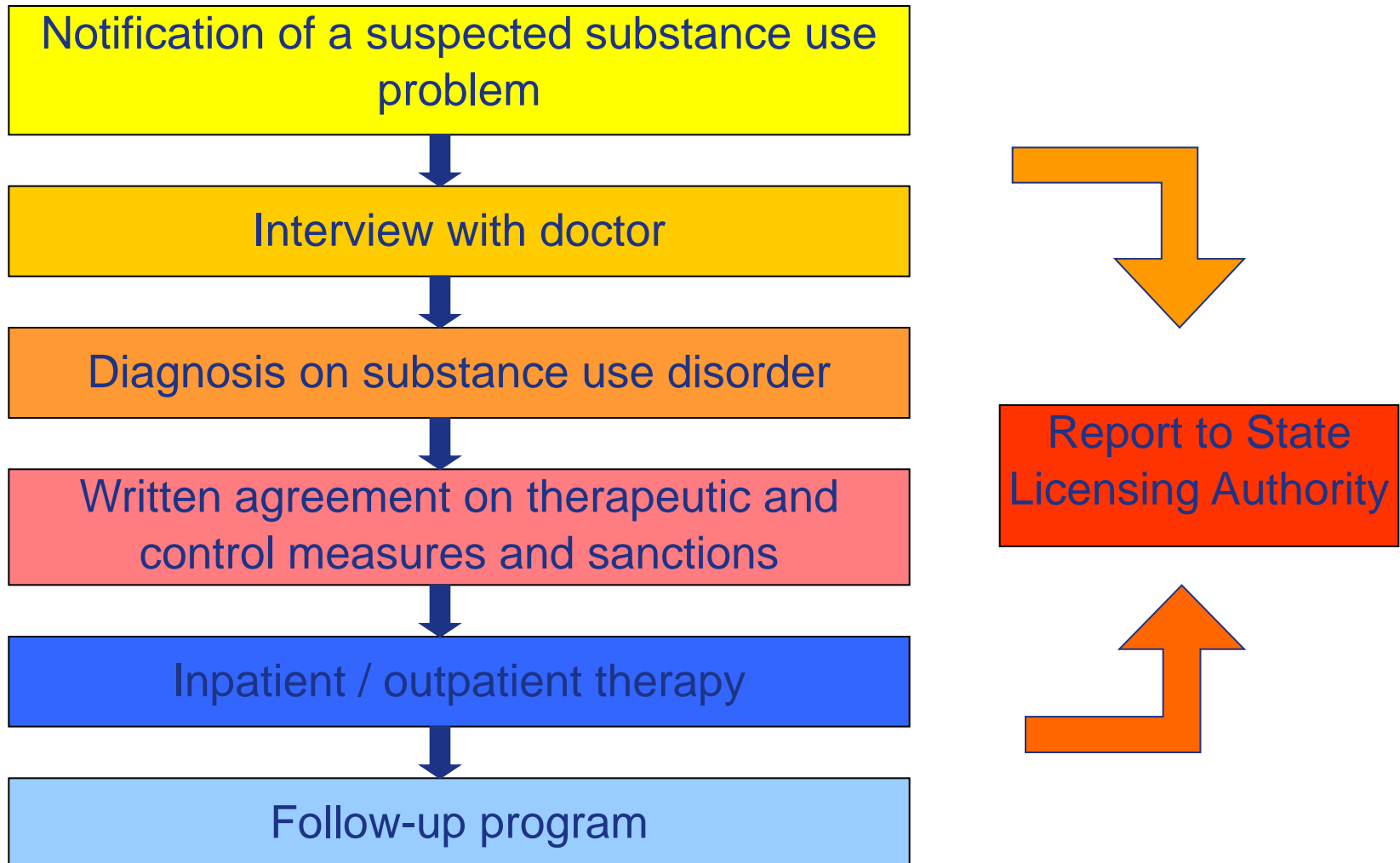
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### 3. Workplace related support by Chambers of Physicians

- provision of a substitute
- legal aid
- support funds



## Steps of intervention in structured programs





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## Chambers of Physicians with a structured intervention program

– survey results Jan. 2009 -

- in existence: in 10 out of 17 chambers
- in stage of development: 2 chambers
- non-existent: 5 chambers



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## Problems still to be solved:

- Interventionprograms in all chambers
- procedural rules for interaction with State Licensing Authority
- transparent procedures for assumption of therapy costs by physicians` pension funds
- assumption of therapy costs by private health insurance plans
- amendment of the „Regulation on the registration of statutory health insurance doctors“



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*Thank you for your attention!*



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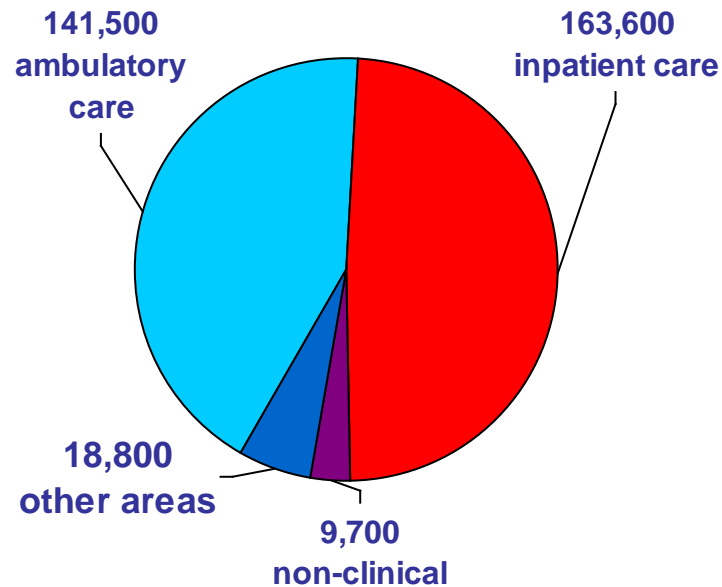
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- Number of doctors in Germany with a substance use problem
- Reasons for substance abuse among doctors
- Legal framework for interventions
- Notification of Chambers of Physicians regarding physicians with a substance use problem
- Available means of intervention
- Problems to be solved



## Number of physicians in Germany

**Total: 333,600 physicians**



3.5 physicians per 1,000 inhabitants



## Number of physicians in Germany with a substance use problem

Study on Consumption of alcohol, cigarettes and illegal substances among doctors in private practice in the States of Brandenburg and Saxony (N = 642)

	male doctors	female doctors
Harmful drinking (>60g/d resp. >40g/d)	17.5%	1.9%
Hazardous drinking (>40g/d resp. >20g/d)	5.8%	5.8%







# Number of physicians in Germany with a substance use problem

Study on stress-related consumption of alcohol and/or prescription drugs among doctors – anonymous online-questionnaire, (N = 1.287)\*

„Consume alcohol and/or prescribed drugs to reduce work-related stress“			
	Partly true	true for most occasions	Agree strongly
Doctors (male and female, all disciplines)	11%	9%	3%

\* Geuenich K (2009)



## Prävalenz von Abhängigkeitserkrankungen in der Ärzteschaft im Vgl. zur Bevölkerung

