Big Book Thumpers
vs.
Pill Pushers
Are Ever the Twain to Meet?

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Donald J. Kurth, MD, MBA, MPA, DFASAM
Medical Director
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Are ever the twain to meet?

Thumpers

Pushers

Donald J. Kurth, MD, Medical Director
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"There is a principle which is a bar to all information, which is proof against all arguments and which cannot fail to keep a man in everlasting ignorance—that is the principle of contempt prior to investigation."
Medication Assisted Treatment (MAT)
MAT

• “Scientific” Approach
• Evidence Based
• Data Driven
So where did the scientific method come from?

Sir Francis Bacon

1561 - 1626

Philosophy of Science

- Credited for formulating the "scientific method"
- Induction
- Experimentation
- Interpretation of data
- Strongly opposed deduction from authority
- "Knowledge is power"; influenced the scientific revolution to follow

Bacon is not noted for having an admirable personal character, but his rich and profound writings touched many aspects of human experience and charted the path for modern science.

- "A little philosophy inclineth man's mind to atheism, but depth of philosophy bringeth a man's mind about to religion."
- "There are two books laid before us to study, to prevent our falling into error: First, the volume of the Scriptures, which reveal the will of God; then the volume of the Creatures, which express his power."

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A Few of the Greatest Scientists of All Time

Einstein, Max Planck, Leonardo da Vinci, Kepler, Galileo, Mendel, Pasteur, Newton

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Copernicus
So, Does Science Preclude Faith?

Galileo Galilei

Astronomy - Physics

- First to turn a telescope to the heavens
- Discovered Jupiter’s moons, sunspots, lunar craters, phases of Venus
- One of the best known experimentalists and advocates of empiricism
- Critical of church dogma, but believer in God

“Today, science views Galileo’s conflict with Church hierarchy as a great triumph of science over religion. Galileo would not have viewed it thus, for his faith in the truth of God’s Word remained strong.”

Thomas H. Huxley, "Science and Religion"

“I think in the first place that it is very pious to say and prudent to affirm that the Holy Bible can never speak untruth—whenever its true meaning is understood.”

- Galileo Galilei
Some Might Think So...

The Enlightenment

- Use of Science and Reason
  - Scientific method
  - Looking beyond religion
  - Mathematical laws now applied to human behavior as well
- Developed in Europe
- Typified by Benjamin Franklin (at left)
  - Famous in America and Europe for his Experiments with Electricity
  - Had many practical inventions
    - Glasses (bifocal)
    - Franklin Stove
    - Lightning Rods
- Spreading of ideas
  - Books and pamphlets
  - Franklin’s *Poor Richards Almanac*
- Effect on Politics
  - Thomas Jefferson
  - Idea of Natural rights (*John Locke*, *Montesquieu*)

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...but, Others Might Not
Twelve Step Recovery

• Older Approach?
  • Non-Modern
  • Out Dated?
  • AA founded on June 10, 1935
Bill Wilson and Dr. Bob Smith, Founders of Alcoholics Anonymous
But Where did AA Come From?
IF IT'S CALLED ALCOHOLICS ANONYMOUS

WHY DO YOU START BY TELLING EVERYBODY YOUR NAME?
AA’s Roots are said to have arisen from the Washingtonians
So, who are they?

- Founded April 2, 1840 by six “drunkards” (William Mitchell, Davis Hoss, Charles Anderson, George Steer, Bill McCurdy, and Tom Campbell) at Chase’s Tavern in Baltimore, MD.
- (The term “alcoholic” had not been invented yet!)
The Washingtonians

• They believed that by relying on each other, sharing alcoholic experiences, and creating an atmosphere of conviviality they could help keep each other sober.

• Total abstinence from alcohol was their goal.

• They believed that by recruiting other “drunkards” and helping them to stay sober, they could maintain their own sobriety.
Washingtonians other Endeavors

• Quickly evolved to become a prohibitionist organization promoting the prohibition of all alcoholic beverages.
• Temperance movement was well underway and the Washingtonians joined the parade.
Concurrently, Inebriate Asylums and Reformatory Homes became Popular.
Inebriate Asylums
(Our historical grandparents, perhaps)

• New York State Inebriate Asylums
• The Inebriate Home of Long Island, NY
• The Home for Incurables in San Francisco
• The Franklin Reformatory Home in Philadelphia
• Washingtonian Homes in Boston and Chicago opened in 1857
The Rise of the Washingtonians...

• The Washingtonian movement grew rapidly.
• Great orators, proselytizers and “missionaries” rapidly swelled the ranks.
• Membership estimates range from tens of thousands to millions.
• Abraham Lincoln was said to be a member and spoke at Washingtonian events.
Washington Pledge

We, whose names are affixed, desirous of forming a society for our natural benefit, and to guard against a pernicious practice, which is injurious to our health, standing and families — we do pledge ourselves as gentlemen, not to drink any spirituous or malt liquors, wine or cider.
...and the Fall of the Washingtonians

• But, over time, the Washingtonians drifted from their primary, original, founding purpose of helping alcoholics (“drunkards”) and engaged in all sorts of controversial social reforms including prohibition, sectarian religion, politics, and even abolition of slavery.

• Personality conflicts, infighting and relapses of high profile leaders finally tore the group apart and they seemingly evaporated into thin air in just a few short years.

• At the time of the founding of AA 50 years later, neither Bill nor Bob had ever heard of the Washingtonians.
So, if Bill and Bob had never heard of the Washingtonians, then how did we get from there to the AA we know today?
The Oxford Group

• The First Century Christian Fellowship was founded by Christian Missionary Frank Buchman in 1921.
• Became the Oxford Group in 1931.
• Believed that the root of all problems were fear and selfishness.
• Solution to living with fear and selfishness was to surrender one’s life over to God’s Plan.
Four Practices of the Oxford Group to be Spiritually Reborn

• The sharing of our sins and temptations with another Christian.
• Surrender our life past, present and future, into God's keeping and direction.
• Restitution to all whom we have wronged directly or indirectly.
• Listening for God's guidance, and carrying it out.

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Other Oxford Group Similarities with Alcoholics Anonymous

• The Oxford Group called itself an organization, not a religion.
• “House Parties” were held to introduce new members to the Oxford Group’s philosophies.
• Oxford Group literature was displayed at the House Parties.
• No formal agenda was followed at meetings,
  • Singing was absent.
  • Public prayer was absent.
  • Time was devoted to talks by members.
  • Slogans were common.
The Oxford Group
Oxford Group to AA: The Transition

- Rowland Hazard and Dr. Carl Jung.
- Rowland Hazard and Ebby Thatcher.
- Ebby at Sam Shoemaker’s Calvary Rescue Mission, “a God of one’s understanding” concept. Shoemaker also introduced the ideas of:
  - Self-examination
  - Acknowledgement of character defects
  - Restitution for harm done
  - Working with others.
- Ebby visits Bill and tells him he’s “got religion.”
- Bill’s “spiritual experience” at Towns Hospital.
Bill Wilson meets Dr. Bob Smith

- After Towns Hospital admission, Bill attends Oxford Group meetings.
- Dr. Silkworth introduces Bill to concept of alcoholism as a “disease” rather than a “moral failing”.
- “Allergy of the body coupled with an obsession of the mind.”
- Bill meets Dr. Bob Smith in Akron, OH
- Alcoholics Anonymous is formed June 10, 1935.
- AA group begins in Akron, then second group in New York.
William Silkworth, MD of Towns Hospital
“Disease Concept” of Alcoholics Anonymous

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The Oxford Group and AA

• Bill Wilson and Dr. Bob Smith, co-founders of AA, met through the Oxford Group and eventually codified several of its tenets into what later became the Twelve Steps.
Home of Henrietta Sieberling where Bill and Bob met on Mothers’, May 11, 1935
AA has evolved, rather than has been created.

• Twelve Step recovery was not created through scientific deduction, but rather by an evolution of human behavior, philosophy, and spirituality. And perhaps an odd series of fortuitous events.
Just what is MAT?  
(Medication Assisted Treatment)
Just what is MAT?
(Medication Assisted Treatment)

Medication plus behavioral therapy
to treat alcohol and other drug use disorders.

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MAT for Alcohol Use Disorder

• Disulfiram (Antabuse)
  • Deterrent Medication.
  • Causes unpleasant reactions to alcohol.
Disulfiram (Antabuse)
MAT for Alcohol Use Disorder

• Disulfiram (Antabuse)
  • Deterrent Medication.
  • Causes unpleasant reactions to alcohol.

• Acamprosate (Campral)
  • Anti-Craving Medication.
  • Restores chemical imbalance in the brain.
Acamprosate (Campral)
MAT for Alcohol Use Disorder

- **Disulfiram (Antabuse)**
  - Deterrent Medication.
  - Causes unpleasant reactions to alcohol.

- **Acamprosate (Campral)**
  - Anti-Craving Medication.
  - Restores chemical imbalance in the brain.

- **Naltrexone (ReVia, Vivitrol)**
  - Blocking Medication.
  - Blocks euphoric feelings.

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Naltrexone (Vivitrol)
MAT for Opiate Use Disorder

• Naltrexone (Revia, Vivitrol)
  • Blocking Medication
  • Binds and blocks opioid receptors
MAT for Opiate Use Disorder

- Naltrexone (Revia, Vivitrol)
  - Blocking Medication
  - Binds and blocks opioid receptors
- Methadone
  - Replacement Medication
  - Suppresses and reduces craving.
Methadone
MAT for Opiate Use Disorder

- Naltrexone (ReVia, Vivitrol)
  - Blocking Medication
  - Binds and blocks opioid receptors
- Methadone
  - Replacement Medication
  - Suppresses and reduces craving.
- Buprenorphine (Suboxone)
  - Anti-Craving/Replacement Medication
  - Suppresses and reduces craving for abused drugs
Buprenorphine (Suboxone)
Is MAT the Angel of Mercy... or the Devil Incarnate?

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Actually, MAT is neither.
These are merely chemical compounds possessing certain properties within the human body.

• In and of themselves they are neither good nor bad.
• Some make you feel good and some make you feel bad.
• Some interfere with addiction and others can actually be addictive and can be abused.
• But all can be part of our armamentarium in our battle against this dreaded and fatal disease.

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In the right hands, each of these (and other) MAT drugs can be extremely helpful in our battle to save the lives of those suffering from this disease.
Myths of MAT

• Medication is a crutch. Or is it?
  • Helps people “feel better” in early sobriety.
  • May help remove reinforcement qualities of alcohol or drugs.
  • May help ease the transition until new lifestyle helps rebalance brain.

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Social Model Recovery Systems
Myths of MAT

• Medication is a crutch. Or is it?
  • Helps people “feel better” in early sobriety.
  • May help remove reinforcement qualities of alcohol or drugs.
  • May help ease the transition until new lifestyle helps rebalance brain.

• So what if it is, on some level, a crutch. Who cares? May help escape from a fatal illness.
Myths of MAT

• Using medications runs counter to 12-step philosophy.
Myths of MAT

• Using medications runs counter to 12-step philosophy.
  • AA membership certainly does not preclude the use of medications, if properly prescribed.
• Using medications runs counter to 12-step philosophy.
  • AA membership certainly does not preclude the use of medications, if properly prescribed.
  • “God has abundantly supplied this world with fine doctors, psychologists, and practitioners of various kinds. Do not hesitate to take your health problems to such persons...Try to remember that though God has wrought miracles among us, we should never belittle a good doctor or psychiatrist. Their services are often indispensable in treating a newcomer and in following his case afterward.”

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Positive Medication Effects

• Limits illicit drug reinforcement. (Vivitrol, etc.)
• Make relapse feel uncomfortable (Antabuse)
• Takes the edge off early recovery by increasing dopamine and epinephrine levels in the brain.
• Stabilize co-occurring disorders.
Medication Negatives

• Knowledgeable physicians are hard to find.
• Stigma (Discrimination)
• Cost
• Side Effects
• False Hope
• False sense of Security
Bottom Line Benefit of MAT

• In early recovery, MAT may help
  • Make sobriety more tolerable and
  • Reduce relapse triggers.
Bottom Line Benefit of MAT

• In early recovery, MAT may help
  • Make sobriety more tolerable and
  • Reduce relapse triggers.

• If, in conjunction with Twelve Step Recovery, MAT can help in just those two ways, it is well worth including it in our armamentarium.

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Social Model Recovery Systems
MAT

• Research Supported
Twelve Step Recovery

- Limited Research Base
  - Indeed, 12-Step Recovery Programs do not easily lend themselves to research.
  - The Natural History of Alcoholism: Causes, Patterns and Paths to Recovery, George Vaillant 1983.
The only thing that really matters in life are your relationships to other people.

— George Vaillant —
So, who is George Vaillant and what did he do?

- Harvard psychiatrist and academic researcher.
- Two multi-decade longitudinal studies
  - 600 men and their drinking behaviors for decades.
  - 100 severe alcoholics for followed eight years after detox.
The Natural History of Alcoholism
by George Vaillant, MD
Vaillant’s Conclusions

• That alcoholism is as much a social as a medical condition. "Alcoholism can simultaneously reflect both a conditioned habit and a disease."[2]

• Factors predicting alcoholism were related to ethnic culture, alcoholism in relatives, and a personality that is antisocial and extroverted. An unhappy childhood predicted mental illness but not alcoholism—unless the family problems were due to alcoholism.

• That alcoholism was generally the cause of co-occurring depression, anxiety, and sociopathic (delinquent) behavior, not the result.

• That even though alcoholism is not solely a medical condition, it is therapeutically effective to explain it as a disease to patients. The disease concept encourages patients to take responsibility for their drinking, without debilitating guilt.

• That for most alcoholics, attempts at controlled drinking in the long term end in either abstinence or a return to alcoholism.

• That there is as yet no cure for alcoholism, and that medical treatment can only provide short-term crisis intervention.

• Achieving long-term sobriety usually involves (1) a less harmful, substitute dependency; (2) new relationships; (3) sources of inspiration and hope; and (4) experiencing negative consequences of drinking.[3]
MAT

• More “Modern” Approach
Twelve Step Recovery

- Not specifically evidence based
  - Tradition
  - Folklore
  - Anecdotal
MAT

• Rational in Orientation
SCIENTIFIC METHOD

1. Make an Observation - "What is happening?"
   An Observation is when you notice something in the world around you and decide you want to find out more about it.

2. Define the Question - "Why is this happening?"
   Defining the Question creates an idea that can be tested using a series of Experiments.

3. Form a Hypothesis - "I think this happens because..."
   A Hypothesis is a statement that uses a few observations, without any experimental evidence, to define why something happens.

4. Perform Experiments - "Let's test my Hypothesis..."
   An Experiment is a series of tests to see if your Hypothesis is correct or incorrect. For each test, record the data you discover.

5. Analyze the Data - "Was my Hypothesis right?"
   Analyzing data takes what you found in your experiments and compares it to your Hypothesis. If needed, perform another Experiment to gather better data.

6. Conclusion - "Experiments show my hypothesis was..."
   Forming a Conclusion presents the Experimental Data and explains how it proves or disproves your Hypothesis. Often, Scientists will take this Conclusion and perform other Experiments on it to discover new things.
Twelve Step Recovery

• Spiritual in Orientation

• Tradition Twelve
  • “Anonymity is the spiritual foundation of all of our Traditions, ever reminding us to place principles before personalities.”

• Appendix II of the Big Book:
  • Describes “spiritual experience” or “spiritual awakening” as “the personality change sufficient to bring about recovery from alcoholism.”
  • Manifests itself in many different forms.
  • Need not be--indeed is usually not—"in the nature of sudden and spectacular upheavals.”
MAT

• Can be Expensive
• May be covered by insurance
• Usually Cost-Benefit Designed to be Affordable and Worthwhile
Twelve Step Recovery

- Essentially No Cost to Participants
  - Voluntary donation of a dollar or two in the basket, if you have it.
- Tradition Seven
  - “Every AA group ought to be self-supporting, declining outside contributions.”
MAT

• Highly Promoted
  • Researchers studying MAT medications
  • Private manufacturers
  • Government agencies
Twelve Step Recovery

• Never Promoted
• Tradition Eleven
  • “Our public relations policy is based on attraction rather than promotion: we need always maintain personal anonymity at the level of press, radio and films.”
MAT

• Often Government Supported
• Often Government Funded
• Easier for government funders to justify spending taxpayer money on programs that have data to support their evidenced-based orientation.
Twelve Step Recovery

• No Government Support
• This would violate the Seventh Tradition:
  • “Every AA group ought to be self-supporting, declining outside contributions.”
MAT Proponent Fears?

• Fear of losing clients to Twelve Step programs (financial fear?).
  • Some appear to fear that if MAT clients go to AA/NA they may be told that they are not “clean” and/or “cannot participate” because they receive MAT.

• “The AA Member—Medications & Other Drugs” pamphlet is quite clear with regard to this difficult issue:
  • “Some AA members must take prescribed medications for serious medical problems. However, it is generally accepted that the misuse of prescription medications and other drugs can threaten the achievement and maintenance of sobriety.”
  • “No AA member should “play doctor”: all medical advice and treatment should come from a qualified physician.”
  • “Active participation in the AA program of recovery is a major safeguard against alcoholic relapse.”

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Twelve Step Recovery Fears?

• Twelve Step members sometimes fear that taking any medications will lead to relapse.

• For those of us who have been relieved of the obsession to drink or use drugs, there is certainly an underlying valid concern.

• However, “No AA member should play doctor…” (AA Medications Pamphlet).

• Clearly, medications used to assist in medically safe detoxification, as well as to prevent relapse, are useful, valid medications if properly prescribed by a physician knowledgeable in the treatment of alcoholism and addiction.
MAT

• Valid concern that MAT patients may be “rejected” by a Twelve Step group.
• Yes, any individual AA/NA member may express any ideas he/she wishes to express.
• Any individual AA/NA group may take a “group conscience” or vote to decide how that individual group will be run, even if it is counter to the overall policy/philosophy of AA/NA. However, there are some Traditions that apply here.
• Traditions Two, Three, Four and Five:
Twelve Step Recovery

• Certainly, any AA/NA member or group may express ideas that may or may not be consistent with the Twelve Step organization’s philosophy. However:

• Tradition Two: “For our group purpose there is but one ultimate authority—a loving God as He may express Himself in our group conscience. Our leaders are but trusted servants; they do not govern.”

• Tradition Three: “The only requirement for AA membership is the desire to stop drinking.”

• Tradition Four: “Each group should be autonomous except in matters affecting other groups or AA as a whole.”

• Tradition Five: “Each group has but one primary purpose—to carry its message to the alcoholic who still suffers.”

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MAT

• Stigma – Patients using MAT may feel that they are looked down upon and/or discriminated against.
Twelve Step Recovery

• Stigma – Patients using Twelve Step Recovery may feel that they are looked down upon and/or discriminated against.
MAT

• Most forms of MAT will help decrease cravings, at least to some extent.
  • Vivitrol/Naltrexone
  • Buprenorphine/Suboxone
  • Methadone
Twelve Step Recovery on Cravings

• “But when I became willing to clean house and then asked a Higher Power, God as I understood Him, to give me release my obsession to drink vanished.”
  -- 12 and 12, Step 6, p.63

• “Having had a spiritual awakening as a result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs.”
  --Step 12, The Big Book of Alcoholics Anonymous
“Practical experience shows that nothing will so much insure immunity from drinking as intensive work with other alcoholics. It works when other activities fail. This is our twelfth suggestion: Carry this message to other alcoholics! You can help when no one else can. You can secure their confidence when others fail. Remember they are very ill.

Life will take on a new meaning...”
MAT

• Medications based treatment
• Some forms of MAT do appear to have abuse potential and street value as drugs of abuse.
Twelve Step Recovery

• Non-medications Based.
• Abstinence in orientation.
“Harm Reduction” model acceptable.
“Harm Reduction” may be a more acceptable goal.
“Harm Reduction” may be a easier to achieve than total abstinence.
Twelve Step Recovery

• Total Abstinence is usually the goal.
• However, the only requirement for AA membership is the desire to stop drinking.
• Most AA groups have some tolerance for chronic relapsers.
• However, the Big Book tells us that if we are working with someone does not seem willing to do what is suggested to them to stay sober, then perhaps we should work with someone else who is more willing to follow direction.
MAT

• No spiritual, religious, or God-consciousness required.
Twelve Step Recovery

• Tradition Three – The only requirement for AA membership is the desire to stop drinking.
• There is NO requirement to actually STOP drinking...one just needs the desire to stop drinking to become a member of AA
• Is this harm reduction? I don’t know, but it certainly is contemplative!
• No requirement to believe in God. Only one requirement, stated above.
• Through working the Steps many of us “Came to believe that a Power greater than ourselves could restore us to sanity.”
MAT

- Availability limited, but improving steadily.
Twelve Step Recovery

- Widespread availability of meetings.
  - Over a thousand AA meetings in Greater Los Angeles every day.
  - Available across the globe.
  - Directories available.
  - Other members will point you to nearby meetings.
- Meetings for all sorts of Twelve Step programs are available.
  - Wikipedia lists 35 different types. (I have heard that there are more than 130.)
  - AA, NA, EA (emotions), DA (debtors), FA (food addicts), FA (families), GA (gamblers), Alanon, Naranon, OA (overeaters), SA (sexaholics), etc.

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One of many AA Conventions

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MAT

• Many people have trust in the “medical mode” for addiction and alcoholism treatment.
• Some view AA as embracing hokus pokus or populated by religious fanatics.
Twelve Step Recovery

• Twelve Step Recovery presents a more holistic and natural approach.
• No drugs or chemicals of any kind that affect you from the neck up.
MAT

• Usually done in a more private setting.
• No need to fear large groups or speaking in public.
• Limited availability of support groups --may or may not have social support.
• No 13th Step Predators.
• May encourage isolation.
• Limited Accountability.
Twelve Step Recovery

• Strong social support.
• But freedom to not work a program if you so choose.
• Sharing of common experiences.
• Social gatherings and activities (picnics, parties, baseball, etc., etc.)
• Provides sense of being “a part of” a larger organization.
• Strong Accountability.
MAT

• Forms of MAT that create dependency are not easy to stop arbitrarily or on one’s own.
• Injectable and implantable forms help eliminate indecisiveness.
• MAT can offer a starting point for stability.
Twelve Step Recovery

• Some motivation required
  • But, not necessarily *self* motivation.
  • Family, financial, employer, judge, police, health, physician, etc. are all capable of providing motivation to the active alcoholic.
• “Hitting bottom” can open the door to “sweet willingness”.

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So, which is better, AA or MAT?
So, which is better, AA or MAT?

Or should the question really be:

How can we use these two diverse but equally powerful therapeutic modalities to do whatever we can to help save the lives of those who suffer from this terrible disease?

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Do we really have to choose one over the other?

- Alcoholism/addiction is a fatal illness.
- By the time somebody gets to treatment they have usually progressed quite far along the course of their disease...
- Although they rarely realize it, they may be reaching the point where the next step in the progression of their disease is death.
- If we value human life, it is time to pull out all the stops if we want to intervene to save their lives, it is time to put the academic squabbling aside and quickly get to the work that we were put here to do.
Most people suffering from alcoholism or addiction will die of complications of this disease.

- Alcohol poisoning, overdose, etc.
- Physical complications: encephalopathy, liver failure, endocarditis, pancreatitis, diabetes, various cancers, pneumonia, multi-system failure, etc., etc.
- Trauma
  - Loma Linda Trauma Center –
Loma Linda University Regional Trauma Center

• 50% of admissions have alcohol in their blood
• 65% have alcohol and/or drugs on board
• How many of the remaining 35% are there because they were involved in a traffic accident or altercation with someone with alcohol and/or drugs on board. (Alcoholism is one of the few diseases that can injure or kill people who do not even have it!)

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Alcoholism/addiction is a Fatal Illness

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Do we really want to squabble over whether AA or MAT is better?
Or, Do we want to work together to save the life of a fellow human being?
This encounter may be the only chance we have to save this life...
This encounter may be the only chance we have to save this life...
Let’s not waste the opportunity
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