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3/3/83

Carlton,

Le Clair asked me to
share this with you;
since you are a Dr. you
should be able to read her
writing better than I can.
I would like to have this
back, please, when you
have finished. Thanks,
Gil

Charter By-the-Sea Hospital

St. Simons Island, GA 31522

912/638-1999

AMERICAN MEDICAL SOCIETY ON ALCOHOLISM

733 Third Avenue New York, New York 10017



(212) 986-4433

2/16

Gail - Sorry to be slow in thanking you for your kindness to me in Washington. Re the specialty/subspecialty + credentialing issue for MD's, enclosed letter to Roth (who has been our liaison with AAFP as noted below) will tell the tale if you read it rather carefully.

Dr T. from Georgia had listed Dr Turner as expected to attend the Kroc Ranch bash before they met + while C.T. was still learning the cast. Evidently he claimed that Nancy Reagan had summoned him to the White House + implied strongly that he had full backing from the top. Dr Meyer attended the meeting + will know of formal statements made + actions taken.

I'm sceptical as you know. AAMSA per se does not, of course, support Talbot tho' individuals may. Many AAMSA members are also AA members + don't much like the "Academy of Addictology" + its "accidental" choice of initials any more than they trust its guru.

What to do about all this? The A of A consists for now of an incorporated body of perhaps a dozen Talbot supporters, some backing for Kroc + not much else - the more time + attention we give it, the more we help it appear valid. My impulse is to deny it publicity (hard to do with + (as the helms) + just try to do extremely well the things T. claims can't be done unless he builds a new empire.

over

LeCLAIR BISSELL, M.D.
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FRANK A. SEIXAS, M.D.

MAXWELL N. WEISMAN, M.D.

JOSEPH J. ZUSKA, M.D.

Sort of the "enough rope" approach -

I'm off to Florida later today - Okay to show Ruth letter + content of this note with Turner. I liked him + am glad you had us meet.

Hope all's well with you + the person you were worried about when we spoke.

All best -

McLean

Sorry about scribble. Secretary, Claire Osmer's husband had a coronary - He's fine now but things piled up.

If Talbott does have backing from your folks, please let me know if you feel you can. I'd probably best not make assumptions

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February 8th, 1983

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Oliver K. Roth, M.D.
10428 Kenwood Road
Cincinnati, OH 45242

Dear Dr. Roth:

I was genuinely saddened to hear that you will no longer be with us after April. I had become accustomed to seeing you at meetings, and it was wonderful to be able to rely on both your presence and your good sense. I sincerely hope that you'll continue active with AMSA in your own right, even though you will no longer be an official representative.

Something that might interest you is the result of my sending out letter authorization forms like the one enclosed. The intent was not to get an opinion survey of most of these issues, and I don't want to present this data as science. Knowing that many people do not want AMSA to be political, and that many simply don't pay much attention to their mail, we can only guess as to whether or not respondents are typical of our members. My hunch is that they are, but that's a hunch.

Look at the question on the back concerning where alcoholism belongs as a subspecialty, IF it is to be one, and IF it is to find its home within a currently existing specialty. Many people refused to play my game and said it should not be part of any other specialty, either because it was big enough to be a specialty in its own right, or because to put it in one area would automatically free the other specialties from any need to include it in medical education who could always disclaim responsibility and point out that it was a part of the curriculum handled by someone else.

On the other hand, about 250 people did answer the question as presented. Rather to my surprise, the clear favorite answer was Family Practice followed rather closely by Psychiatry. Then there was a gap and Internal Medicine made a strong showing. After that, there was a huge gap and then a scattering of other specialties named that included Industrial, Prevention, Pediatrics, and Rehabilitation.

Reasons given for choosing Family Practice were that it was best resource for the primary physician, that the whole family was involved when there was alcoholism in its midst, that Family Practice had credibility because of its stance re grandfathering and might well be trusted to insure competence.

now will over 300 - no real change - data

Roth

Oliver K. Roth, M.D.
February 8, 1983
page two

One could argue that people tend to suggest their own discipline as best, but several individuals made a point of the fact that they did not recommend their own, particularly some of the Psychiatrists from some of the more traditional settings.

Feel free to share this information as you see fit, but with the caveat that this is an informal survey only and does not reflect any official AMSA policy.

Personally, I would rather see us not be a subspecialty or specialty just yet, but laws and politics may force our hand. Again, personally, if I had to vote, I'd choose Family Practice too. I'm an Internist.

All best. Hope I see you in Houston.

Sincerely,



LeClair Bissell, M.D.
President

LCB:co
enclosure

cc:

Irvin L. Blose, M.D.
Stanley E. Gitlow, M.D.
Max A. Schneider, M.D.
Al J. Mooney, M.D.
James Halikas, M.D.

bcc:

Emanuel Steindler, Ph.D.

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PM
16 FEB
1983

AIR MAIL

