Preface

The Internist’s Challenge: Addressing Our Patients’ Unhealthy Substance Use

The first two decades of the twenty-first century will be remembered as the time when the harm of illicit drug use, longstanding cause of substantial morbidity and mortality, gained the undivided attention of North Americans due to a devastating opioid crisis. Remarkably, the adverse consequences of opioids and other drugs are an almost-daily feature in the media as deaths from overdoses mount. At the same time, legal substances, alcohol and tobacco, continue to quietly but dreadfully leave even greater overall health consequences in their wake. Other substances without clear medication treatments increasingly produce negative health effects (eg, cannabinoids, stimulants, and designer drugs).

To address the harm caused by these substances, new opportunities have emerged to identify and engage individuals at risk, prevent substance use-related consequences, and optimize treatment for those seeking help for problems caused by substance use. To highlight these efforts, articles in this issue of *Medical Clinics of North America* describe medical innovations and models of treatment to advance substance use care in the following domains: engaging patients when they are hospitalized; providing addiction treatment within primary care clinics and other general medical settings; increasing clinicians’ awareness of the scope of addiction-related problems, such as sleep disruption; considering novel approaches for those who have failed traditional treatments, including adolescents and young adults as a group with special needs; and using new technologies to achieve addiction treatment goals.

In 2016 the American Board of Medical Specialties established Addiction Medicine as a new subspecialty. Soon after, the accreditation council for graduate medical education approved fellowship training in addition. Since then, over 50 Addiction Medicine Fellowship programs have taken shape. Addiction Medicine subspecialty-trained
physicians can assist general internists, family physicians, psychiatrists, and physicians from all medical specialties in the treatment of complicated patients who are suffering from addiction and its consequences. The expansion and dispersion of an addiction-trained workforce, often integrated into general treatment settings, offer new hope for millions of North Americans and substance users worldwide.

This is an incredibly exciting time in medicine. Medications to address addictive disorders are now available and have been tested in clinical trials. Physicians are working in new teams and configurations with greater attention to the breadth of addiction’s effects. Health system administrators are becoming aware of the health and cost benefits of assisting substance-using patients at every contact point. The notion that Addiction Medicine addresses mainstream medical problems that demand the attention of all generalist physicians is becoming the norm. This timely issue of Medical Clinics of North America, Substance Use and Addiction Medicine, will serve as a resource to all who want to provide medical care around these important issues in a well-informed and effective manner.

We very much appreciate the support of Katherine Calver, PhD, who worked with the editors and authors to produce the high quality articles in this volume of Medical Clinics of North America.

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