



Addiction is particularly destructive for skilled and licensed professionals due to the demands and expectations in their work.

This guide will provide timely information for Pharmacists struggling with drug and alcohol addiction.



Pharmacists and Addiction Treatment

Introduction

Numerous addiction studies over the years have suggested that between 10 and 12 percent of the general population will become addicted to alcohol or drugs at some point in their lives. Meanwhile, approximately 12 to 19 percent of those in the health professional will develop an addiction. Yet even among health professions, pharmacists represent a group at perpetually high risk for addiction.

The good news is that when pharmacists receive specialized treatment along with effective drug monitoring and aftercare, they tend to be very successful in overcoming their addictions. , According to a 2013 study, pharmacists battling addiction report an 87 percent recovery rate.

Prescription Drugs

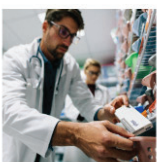
A 1984 study of more than 500 pharmacists, randomly selected from the membership list of a New England state's pharmaceutical association, found that nearly half of all eligible pharmacists reported using a controlled substance without a prescription at some point in their careers, with about 19 percent having done so within the past year.

The drug use involved was generally limited in amount, but 18 percent of pharmacists who ever used a drug either became dependent or were found to be at risk of drug abuse.

Pharmacists often suffer from “pharmaceutical invincibility,” meaning they feel that their knowledge of the pharmacodynamics of addictive medications can somehow keep them safe from substance addiction.

This is delusional thinking. While the reasons for developing an addiction to prescription drugs depends on the personality traits, upbringing, and genetic background of the person, it has been posited by numerous addiction experts that a pharmacist's work setting contains a number of risk factors that can result in addictive behavior—not the least of which is the ease of access to prescription drugs that all pharmacists have.

Other “occupational hazards” include accessibility to controlled substances, stressful and unpleasant workplace issues, a lack of addiction education related to the profession, and a sense of professional shame that develops with impaired pharmacists and can often compound the destructive behavior.



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Alcohol

A 2014 survey compiled the alcohol use habits of 349 pharmacy students, finding that 23 percent of this population—or one in four students—reported hazardous or harmful alcohol use, while just over 67 percent reported consuming alcohol at hazardous levels at some point in the past year. Single male students were found more likely than their counterparts to report hazardous or harmful alcohol use.

These pharmacy students reported social motives as the most common reason for drinking, while coping and enhancement motives were found to be more predictive of harmful or hazardous alcohol use.

Risk Factors of Addiction

The risk factors of substance abuse for any population involve a range of biological, psychological, and socioeconomic issues. While these factors interact differently in different people, there exist broad similarities across most populations.

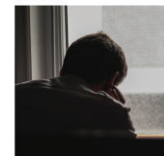
Professional Setbacks

When a pharmacist has been identified as having a substance abuse issue, he or she is often disallowed from practicing pharmacy, with the suspension or revocation of his or her licensure.

Only after successfully completing treatment will a pharmacist be allowed to return to his or her line of work. And even with the completion of a treatment program, reentry to the pharmacy profession can be a slow, difficult process.

Pharmacists who participate in a recovery program are generally required to sign a contract—often referred to as a Caduceus contract—that obligates them to adhere to certain rules and regulations that require them to maintain routine contact with an assigned counselor, submit to random drug testing, and attend regularly scheduled support group meetings.

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Requirements for returning to work include the following:

- Six months minimum in group or individual therapy or accredited treatment program

- The attendance of 90 recovery meetings in the first 90 days of recovery
- Submission to random drug testing
- The securing of a recovery sponsor
- Abstinence from mood-altering drugs
- Provision of monthly progress reports to his or her pharmacy board and employer

It should be noted that the successful treatment of pharmacists ought to address what is known as professional shame. Does the pharmacist understand his or her addiction as a disease state rather than an issue of character? Does the addicted pharmacist feel that he or she is “an embarrassment” to the profession? Do addicted pharmacists recover from their addictions and can they return to the practice of pharmacy?

Long-term Health Problems

Alcohol and substance abuse can have a variety of long-term health effects, depending on which drug or drugs are involved, how they are taken, the amounts taken, the person's overall physical and mental health, and other factors.

While short-term effects range from changes in heart rate and blood pressure, stroke, psychosis, and overdose, long-term effects can include heart or lung disease, cancer, mental illness, kidney damage, liver damage, HIV/AIDS, hepatitis, and other conditions.

Family Problems

Substance use disorders can wreak havoc on a family. Isolation, confusion, and resentment can set in not just on the part of the addict, but among his or her loved ones. In fact, the family members of an addict can and often do experience their own mental health issues as a result of their loved ones' substance abuse, including trauma and anxiety.

How JourneyPure Can Help

JourneyPure Center for Professional Excellence reaches out to the pharmacy community through its specialized programming. We provide comprehensive, specialized treatment with the individual client top of mind. In addition to medical detoxification and medication-assisted treatment (MAT), we provide residential, partial hospitalization, and intensive outpatient programming.

JourneyPure Center for Professional Excellence places a special emphasis on family and couples therapy. Not only does this therapy strengthen the bonds of understanding between partners and other loved ones, it helps educate the whole family unit, which in turn helps the addict realize he or she is not alone in working through his or her recovery.

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It is our mission to encourage strong, solidified recovery that lasts a lifetime so that pharmacists and other professionals can learn how to better manage the ups and downs of life—including the demands of their chosen careers.

Resources

The pharmacy profession has developed the Pharmacists' Recovery Networks (PRNs), which operate in nearly every state in the U.S. Find the PRN of your state here: <http://www.usaprn.org>

Founded in 1954, the American Society of Addiction Medicine (<https://www.asam.org>) is a professional medical society representing over 6,000 physicians, clinicians and associated professionals in the field of addiction medicine.