

# Mental Health Questions for Licensure

## *Who Benefits?*

**T**HE ARTICLE by Sansone et al<sup>1</sup> calls attention to a dilemma facing physicians and state medical boards: how to protect the public from impaired physicians while at the same time protecting the physicians' individual rights. Boards, of course, have the responsibility to ask personal questions, but the authors point out the inconsistency of the questions that physicians are asked when they make initial application or renew their medical license. The wording of the questions leads to significantly different interpretations across the states. Moreover, many of the questions, if they are answered exactly, would mean that recovered physicians would have to respond positively for the rest of their lives. An adolescent experiment with illegal drugs, for example, would have to be explained decades later.

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One could also ask what are the benefits of asking these questions. Are any impaired physicians identified this way for the first time and thus introduced to a treatment program? It is doubtful that this occurs often, if at all. People with substance abuse or other mental health problems are typically identified because of difficulties that arise on the job or within their families. Perhaps the major reason for these questions is to protect the boards; however, it is doubtful that they even do this.

It would have been interesting if the authors could have gone a step further in their study and found out what actually happens when a respondent indicates that he or

she did indeed have such a problem. The reactions of the boards are probably just as variable as the questions and may vary over time depending on the composition of the board. This is the most important question raised by the article. About 92% of the questionnaires have at least one question on substance abuse. How many of the boards recognize that addiction is a treatable medical disorder and that physicians who receive treatment for these disorders have a high probability of returning to full function in the practice of medicine? Since all states have some form of a physicians' health program, there are systems and services available for treatment and monitoring. How often are these programs triggered by the response to a questionnaire?

The study by Sansone et al calls attention to the variability of the questions dealing with substance abuse and other mental disorders and stimulates us to think of better ways to protect the public. For physicians employed at hospitals, there is a required recertification procedure that involves affirmation by the physician's supervisor that there are no physical or mental problems impairing the ability to practice medicine effectively. Such a procedure, while not practical for physicians in solo practice, would seem to be a far more effective way to protect the public and the privacy of the individual physician.

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1. Sansone RA, Wiederman MW, Sansone LA. Physician mental health and substance abuse: what are state medical licensure applications asking? *Arch Fam Med.* 1999;8:448-451.