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Consultation to the Medically Ill: A Survey of Addiction Psychiatry Fellowship Programs

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A national consensus of addiction experts recommended that addiction psychiatry fellows be given “opportunities to develop skills in providing consultation and in communicating with colleagues and referring physicians.”¹ The Accreditation Council for Graduate Medical Education (ACGME) has also required that addiction psychiatry fellows gain experience in consultation to “medically ill patients with substance use disorders (SUD) on emergency, intensive care, medical and/or surgical services of a general hospital.”² In this preliminary survey, we aimed to obtain data to characterize the consultation-liaison (C/L) rotation offered by Addiction Psychiatry Fellowship programs.

Methods

The survey was developed by the authors using a web-based survey tool and was made available from 2009–2010. All forty two Addiction Psychiatry fellowship programs were identified through the ACGME website and invited to participate in the anonymous survey. The responses were analyzed using descriptive statistics. The Partners Human Research Committee approved this study.

Results

Eighteen of the 42 programs (43%) responded. Fellows spent on average 196 hours on the C/L rotation (SD 125, range 64–480 hours). A board-certified addiction psychiatrist or an ASAM certified psychiatrist was identified as the rotation supervisor in 44% of the programs. Fellows received consultations requests from the following services: medicine (100%), surgery (100%), ICU (92%), neurology (81%), OB/GYN (50%), ED (50%), transplantation (38%), hematology/oncology (25%), pediatrics (13%). On average, 23.8 hours (SD 35.2 hours, range 0–80 hours) of didactic teaching was offered, including lectures, seminars, rounds and case conferences. Fellows had opportunities to supervise psychiatry residents (77.8%), third-year medical students (50.0%), and fourth-year medical students (22.2%) during the C/L rotation. Fellows rotated on a general psychiatry C/L service and a specialty addiction psychiatry C/L service in 61% and 39% of the programs, respectively.

Discussion

Addiction psychiatrists in a general hospital can play an important role assisting the medical and surgical teams because SUDs are disproportionately represented in medical settings

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compared to the general population.³ The C/L rotation, therefore, offers fellows unique opportunities to learn about the interplay between acute medical illnesses and SUDs, and to learn how to function effectively as an expert consultant.

The survey results indicate that fellows spend, on average, approximately 10% of their training on the C/L rotation. Fellows receive consultations requests from a wide variety of medical and surgical services, as well as over 20 hours of didactics. Yet, it is interesting to note that approximately half of the programs did not identify an addiction trained supervisor during the rotation. While C/L psychiatrists are also experienced with treating SUDs, the availability of addiction psychiatry role models in this setting may be important from a training perspective.

The survey results also indicate that addiction psychiatry fellows are given opportunities to supervise psychiatry residents and medical students during the rotation. Given that medical students and psychiatry residents are often required to rotate on a general psychiatry C/L service, the supervision offered by fellows may represent an important opportunity to inspire trainees to consider further training in addictions—an important consideration given the limited number of psychiatry residents entering fellowship training in addiction psychiatry.⁴

The current study has several limitations. The response rate was modest, and the results may not generalize to all fellowship programs. Although the survey questions were checked for clarity, questions may have been interpreted differently by the training programs. Nevertheless, further research is needed to assess the adequacy of the current C/L training for addiction psychiatry fellows, and to explore ways in which their education can be further enhanced.

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