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## OVER-THE-COUNTER MEDICATION:

### A GUIDE TO SAFE MEDICATION

We'd like to remind participants that not all over the counter medications are considered safe for those in recovery. When the flu strikes, or coughs and fevers are wearing you down, you need a medication that is both effective and safe. The MPHP considers medications unsafe for a few reasons:

First, many cough and cold remedies (especially liquid medications) contain alcohol. As this is an abstinence based program all prescriptions, over the counter medications and personal hygiene products need to be alcohol-free. Second, some remedies contain chemical compounds that are similar to substances being tested and will produce

a positive urine screen. Pseudoephedrine can show up as a positive for amphetamine. This can be ruled out by further testing, but these tests are quite costly. Examples of other drugs which may not be a wise choice for those in recovery are dextromethorphan, sedating antihistamines such as diphenhydramine,

*(Continued on p.2)*

## PRESCRIPTION REPORTING

### COMPLETING THE PRESCRIPTION REPORT IN AFFINITY

All your prescriptions and over the counter medications need to be reported to the Medical Professionals Health Program. Case managers will review the prescriptions to ensure the substances are in keeping with your contract requirements.

As many have noted, the prescription report does not have a due date as other reports do. This report is to be filled out as prescriptions change.

We want to make sure this process is as easy as possible. So, when completing the prescription report we ask that you can divide your prescriptions into two categories - those taken over the course of a longer period of time, and those used for a brief period of time.

**Chronic Prescriptions** - prescriptions taken for ongoing medical conditions like diabetes, high blood pressure, depression, replacement therapies, herbal or vitamin supplements, etc. **Enter these prescriptions, listing your contract end date as the end date for the report.** This will keep these prescriptions active and eliminate the need to re-enter each month.

**Episodic Prescriptions** - prescriptions taken for temporary conditions like dental treatments or following surgery. These prescriptions are limited in duration and directly related to a particular issue or event. **Enter these prescriptions as the need arises, using the prescription end date that includes refills.**

### Mission:

The Medical Professionals Health Program, a program of the Maine Medical Association, assists medical professionals of Maine by providing confidential and compassionate assistance and advocacy. Our clinical professionals and committee members help participants with diagnosed substance use disorders. Although we do not provide evaluation or treatment, we help participants better understand the treatment and recovery process and help implement strategies for return to safe practice.

If you have any questions or need assistance, please contact Affinity at:

1-877-267-4304



Prescription Document

**Add/Edit Prescription**  
All fields in this section are mandatory. To add a Medication, click the Medications button. In the row displayed, click in each field (Medication, Amount, and # of Refills) to activate the cursor and type the appropriate values

Start Date:  End Date:

Medication	Quantity	Dosage	Frequency	Edit   De
ACETAMINOPHEN	2	325 mg	Twice daily	

All fields in this section are optional.

Prescribed By:  Reason:

Phone:

Pharmacy:

*The phosphatidylethanol (PEth) test, a blood smear, provides an extended alcohol history, detecting alcohol consumption over a three week window.*

## TOXICOLOGY MONITORING: ALTERNATIVES TO URINE SCREENS

Many participants have asked about alternative testing to standard urine toxicology testing. Some of the newest and most efficacious ways of toxicology testing now include hair, nail and blood testing.

These alternative screens, launched by the United States Drug Testing Laboratories (USDTL), monitor long-term drug and alcohol exposure. The blood, fingernail and hair specimen tests have been shown to reliably provide exposure history over an extended period. These tests not only detect exposure, but exposure levels as well, which studies have shown are directly related to dosing history.

Hair and nail tests, promise

to detect a wide array of drugs, including alcohol. While more expensive than the standard urine screen used by MPHP to monitor participants, these tests offer wider detection windows and may, in certain instances, be required as a supplement to or replacement for the urine screens. The phosphatidylethanol (PEth) test, a blood smear, provides an extended alcohol history, detecting alcohol consumption over a three week window. PEth, a mid- to long-term biomarker, is helpful in separating incidental expo-



sure (hand sanitizer or hygiene products) from repeated consumption.

Because certain drugs are quick to vanish from the body, testing of hair, nails and blood are an effective means of resolving toxicology and monitoring inconsistencies.

When participants leave the country for an extended visit or travel to remote locations and random selections are temporarily suspended, case managers may order a PEth or hair test to have toxicology results that are reflective of a broader period of time.

We are always mindful of the cost of toxicology monitoring and the expensive nature of urine screens, so while we are using these tests, accessibility to collection sites and cost are limitations in utilizing these tests more routinely.

## OVER-THE-COUNTER MEDICATIONS

(CONTINUED FROM P.1)

chopheniramine and brompheniramine.

The bottom line is to take care of yourself when you are sick - eat well, get lots of rest, treat your symptoms appropriately and, when necessary, take medications that are safe. Many medications, like non-sedating antihistamines (loratadine and fexofenadine), can be taken

safely. We want to help you make safe choices that will prevent the need for costly confirmation and follow-up testing.

Remember to contact your case manager if you have any questions and to report medications used as soon as possible through the Affinity system.

***Affinity has posted a "Guide to Alcohol-free Products" in the "Documents" tab of their website.***

## WEB RESOURCE:

### SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES

Substance Abuse and Mental Health Services Administration (SAMHSA) has a helpful website, providing information on drug treatment programs and recovery and health

The site offers many resources - articles, books,

journal articles and search engines for researching and understanding treatment and recovery. ***Many of the resources guides are free and will be mailed to you free of charge.***

Here are some resources we found interesting and helpful.

- Understanding Drug Abuse and Addiction.
- SAMHSA's Resources for Coping with Traumatic Events.
- The Next Step Toward a Better Life.

*Visit their site at:  
<http://www.samhsa.gov>*

## EFFECTIVE TOXICOLOGY MONITORING: UNDERSTANDING CREATENINE AND SPECIFIC GRAVITY

In the course of toxicology testing, it is likely that many participants will at some point produce a urine sample that, when analyzed, will be determined to be dilute and/or low in creatinine. Specific gravity and creatinine are two of the tests routinely performed on urine samples. These results can be indications of serious health issues, over-hydration and calls into question the validity of the sample results.

### What is Creatinine?

Creatinine is a product of creatine phosphate breakdown in muscles, and is usually produced at a fairly constant rate by the body during muscle metabolism. It is also formed when food (protein found in salmon, pork, tuna and beef) is changed into energy. Creatinine is taken out of your blood by the kidneys and passed in urine.

Men generally tend to have

higher levels of creatinine because they have more skeletal muscle mass than women.

### Creatinine Levels are Important

Specific gravity and creatinine are indications of sample validity. Low specific gravity and low creatinine are indications that the sample is dilute, making detection of drugs and their derivatives more difficult. So, while we understand that low levels of creatinine can occur naturally, dilute samples fail to provide us with necessary objective documentation of sobriety.



### Factors Affecting Creatinine:

- Illness - malfunction or failure of kidneys, muscular dystrophy, myasthenia, or liver disease.
- Pregnancy.
- Hydration – consumption of water, coffee, tea or soda within 5 hours of testing.
- Low protein diet – participants consistently eating a low protein diet may produce samples low in creatinine.

### Increasing Urine Concentration

If you are struggling to produce urine samples with appropriate creatinine levels, there are a few things you can try:

- Get to the collection site early to provide the morning's first urine.
- Limit your consumption of beverages prior to providing a sample.
- Increase protein consumption.

*Considering the high cost of these screens and the role they play in documenting sobriety, it is imperative that each and every sample be negative and scientifically valid.*

## PERSPECTIVES IN HEALTH

### THE EFFECT OF STRESS

As we begin 2012 and make our New Year resolutions, it seems an appropriate time to discuss stress. Though out our lives, we will experience two main types of stress - acute and chronic. Acute stress results from traumatic, high in impact events or experiences, often milestone events like marriages, births, deaths, accidents or injuries. The second, chronic stress, is the result of stressors that are around you every day in both your professional and personal life.

Over time, unmanaged stress has the ability to cause psychological and physiological complications. These include, but are not limited to, elevated blood pressure, decrease in appetite, loss of muscular strength, depression, anxiety, and drug and alcohol use. If not managed appropriately, it can affect your quality of life, affecting both work and personal relationships. The bottom line... if you don't deal with your stress, it can make you sick.

Stressors will always be present in your life, whether from "good" things, such as a wedding, promotion, or new job, or from negative things- such as a conflict in the work place or the loss of a loved one. While you cannot necessarily control the stressor, you can control your own response and how you cope.

**AWARENESS...** It is important to understand that your bodily reaction to stress is directly linked to your perception of the stress-causing event. After you begin to feel stress, take time to reflect upon why. If you look upon the cause as being negative, try rethinking the problem - what did you learn from it? What did you learn about yourself? How can you "move on"? It is helpful to see your problem in a more positive light.

**SELF CARE...** Take time to take care of yourself. Carve a few moments out of your day to do something you enjoy – meditate, take a bath, engage in physical activity, or enjoy nature. As professionals and caregivers, you have a natural tendency to get caught up in the needs of others but it is essential to make time for YOU each and every day, even if just for a few moments.

**RESOURCES...** Make use of your resources. It is harder to overcome a stress if you try to do it alone. Talk to your spouse, family, friends and/or a trained professional therapist you trust. Be active in AA or Caduceus groups as others there may relate to what you are going through and provide the support you need.

*This new year, take time to build your own stress management plan, as it will truly help you be and stay healthy.*

## Medical Professionals Health Program

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Recipient Address

### Helping:

- Dentist
- Denturists
- Hygienists
- Nurses
- Pharmacists
- Physicians
- Physician Assistants
- Veterinarians

### Supported by:

- Maine Professional Licensing Boards
- Maine Hospitals and Medical Staffs
- Medical Malpractice Carriers of Maine
- Individual contributions

### Published by:

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Manchester, Maine

### Key Dates:

Monitor and Self Reports: due  
end of the month - no later  
than the 10th of the month.

### Caduceus Groups:

**Monday ~**  
Bangor: 7:00pm, Acadia Hospital

**Wednesday ~**  
Portland: 7:15pm, Mercy Hosp.  
Bangor: 7:00pm, Acadia Hosp.

**Thursday ~**  
Manchester: 7:00pm, Community Church  
Calais: 7:00pm, 37 Palmer St.  
Presque Isle: 7:30pm, AMC



## RELATED RESOURCES:

### Stress:

- <http://www.mayoclinic.com/health/stress-management/SR00032>
- <http://changingminds.org/explanations/behaviors/coping/coping.htm>
- <http://www.mindtools.com/stress/UnderstandStress/StressMechanisms.htm>

### Online Resources & Recovery Sites:

- [www.drugabuse.gov](http://www.drugabuse.gov)
- Maine Office of Substance Abuse (DHHS)
- Maine Prevention Calendar
- New England Institute for Addiction Studies (NEIAS)
- Center for Substance Abuse Prevention (CSAP)
- Center for Substance Abuse Treatment (CSAT)
- National Clearinghouse for Alcohol and Drug Information (NCADI)
- National Institute of Alcohol Abuse and Alcoholism (NIAAA)
- National Institute on Drug Abuse (NIDA)
- National Institute of Mental Health (NIMH)

### Books recommended by staff, committee members and/or participants:

- Finding Your Moral Compass, Craig Nakken
- The 4 Agreements, by Miguel Ruiz
- Siddhartha, Hermann Hesse
- Substance Abusing High Achievers, Abraham Twerski
- It Happens to Doctors Too, Abraham Twerski