

ER staffers under assault. Blame the opioid crisis.

October 2 2018, by Dennis Thompson, Healthday Reporter



(HealthDay)—Emergency departments are becoming increasingly

violent places as doctors bear the brunt of fallout from the opioid epidemic, a new survey shows.

Nearly half of American [emergency](#) physicians said they have been physically assaulted at work, and three in five report those assaults happened during the past year, according to a new poll commissioned by the American College of Emergency Physicians (ACEP).

Nearly seven in 10 of survey respondents said ER violence has increased over the past five years, with one-quarter reporting it has increased greatly.

"Pretty much universally, they felt it's been getting worse," said ACEP President Dr. Vidor Friedman, who has himself been hit in the eye, punched in the chest and threatened with death while working in the emergency department.

Why? Opioids are playing a major role in the violence, doctors said.

Half of emergency physicians reported that at least half of all assaults are committed by people who are either seeking drugs or under the influence of drugs or alcohol, the poll found.

"They go to the emergency department hoping to get some relief, from not just the pain but the symptoms of withdrawal," Friedman explained. "These folks are agitated, they're desperate and they don't really have anywhere to turn."

Efforts to curb the [opioid epidemic](#) require doctors to check prescription databases for potential misuse of painkillers, said Dr. Teresa Murray Amato. She is chair of emergency medicine at Long Island Jewish Forest Hills in Forest Hills, N.Y.

"This can lead to difficult conversations and at times outright threats to the physician when the physician denies the request," Amato said.

"Personally, I have noticed over the past year that, on almost every shift, I have been confronted by violence or the threat of violence when I attempt to redirect a patient away from opiate prescriptions," she added.

"In the past, these kinds of situations were much less frequent."

Nearly all (97 percent) of the assaults were committed by patients, doctors said, although about 28 percent also involved a patient's family member or friend.

Friedman explained that "you have people who are in a crisis, and they show up, and we kind of live in a McDonald's world. People want it hot and want it now, and want it exactly as they want it, and we can't always provide that."

And, Friedman added, "We also live in a world where it seems to be increasingly OK to express your anger. For some folks, that leads to them being particularly violent."

But patients are also paying the price for this continued violence.

About 80 percent of doctors said violence in the emergency department has harmed [patient care](#), and about half said patients have been physically harmed while seeking ER treatment.

These assaults keep emergency department physicians and staff from performing effectively, inflict emotional trauma and anxiety on patients, and increase wait times for treatment, doctors said.

Dr. Robert Glatter is an emergency [physician](#) with Lenox Hill Hospital

in New York City. He said, "Physical and verbal attacks on emergency department staff can lead to long-term psychological effects, including anxiety as well as PTSD [post-traumatic stress disorder]. Not only is patient care disrupted, but time devoted to critical emergencies is diverted to address these incidents."

Assaults on emergency physicians most often involved hitting or slapping (44 percent), spitting on them (30 percent), punching them (28 percent), kicking them (27 percent) or scratching them (17 percent), the findings showed.

Part of the problem is that people who carry out an assault in an emergency department rarely face consequences, Friedman said.

The poll found that nearly seven in 10 doctors said their hospital reported the incident to police. But hospital security only pressed charges in 3 percent of those cases, and hospital administrations advised [doctors](#) to press charges in only 6 percent of cases.

"I've been assaulted a number of times in the emergency department and every time it's happened the hospital asked me to not press charges," Friedman said. "If we don't press charges, we're telling our caregivers in the emergency department that it's OK for people to assault you, and it's not."

Hospitals also need to step up security measures, including more security guards and even metal detectors for some emergency departments, Friedman said.

"Hospitals need to understand that the emergency department is a place that's open to the world," he added.

Friedman also would like to see tougher penalties for those who attack

[emergency department](#) staff.

"If a caregiver is assaulted, the penalties for that should be the same as if you're assaulting a police officer or firefighter," Friedman said.

More than 3,500 [emergency physicians](#) across the nation were surveyed for the poll. The results were scheduled for presentation Tuesday at the ACEP's annual meeting in San Diego.

More information: Vidor Friedman, M.D., president, American College of Emergency Physicians; Teresa Murray Amato, M.D., chair, emergency medicine, Long Island Jewish Forest Hills, Forest Hills, N.Y.; Robert Glatter, M.D., emergency physician, Lenox Hill Hospital, New York City; Oct. 2, 2018, presentation, American College of Emergency Physicians annual meeting, San Diego

The Emergency Nurses Association has more about [violence in the emergency department](#).

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