

Prescribing for self, family, and friends widespread among young Irish doctors, poll shows

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Prescribing for self, family, friends and colleagues is widespread among young Irish doctors, suggest the results of a survey, published online in the *Journal of Medical Ethics*.

And some doctors are prescribing addictive and controlled substances, such as sedatives and opiates, despite clear guidance issued by the UK's professional regulator, the General Medical Council (GMC).

Quite apart from the potential legal pitfalls, self-prescribing has been linked to increased suicide risk among doctors, say the researchers, who point to the high prevalence of serious mental health issues in the profession.

Previous studies on doctors' personal prescribing habits have been few, and limited by the small number of participants and fears of repercussions following disclosure. To try and get round these issues, the researchers posted an anonymised online survey on a closed Facebook group for young doctors during the spring of 2017.

At the time, 4445 young doctors of all specialties and grades working in Ireland belonged to it, representing around a fifth of all those registered to work in the country.

The 16-item questionnaire aimed to assess what had been prescribed,

and to whom; obtain basic personal background information; find out whether respondents were trainees; and if they were registered with, and/or had seen, a [family doctor](#) (GP) since qualifying.

Some 729 doctors responded, representing 16% of those in the Facebook group. Nearly two thirds (470) were women and two thirds (487) were younger than 31. Only a few were qualified GPs (42) or consultants (18).

The respondents represented a range of specialties, including [hospital medicine](#), general practice, surgery, paediatrics, psychiatry, anaesthetics, emergency medicine, and obstetrics and gynaecology.

Two thirds of the respondents (466) were registered with a GP, and most (379, 81%) had visited their [family](#) doctor since qualifying. But registration with a GP wasn't a factor in whether they prescribed for themselves or others they knew, were close to, or worked with.

Two thirds (67%) had prescribed for themselves. Nearly three quarters had done so for family (72%) and over half had prescribed for friends (58.5%) and colleagues (59%). Nearly all (93%) had been approached by friends, family, or colleagues to prescribe drugs, suggesting that doctors may feel under pressure to prescribe to those they know personally, say the researchers.

The over 30s were twice as likely to self-medicate as their younger peers, and older doctors were more likely to prescribe [psychotropic drugs](#) for mental health issues. Between 3% and 7% of respondents had self medicated with a benzodiazepine (sedative), an opiate, or other psychotropic drug.

Men were more likely than women to self medicate with opioids. They were also more than 3 times as likely to prescribe these drugs to friends,

and more than 7 times as likely to do so for colleagues.

Nearly half of the women who responded (43%) had prescribed the Pill for themselves.

Those not on training schemes were more likely to prescribe drugs for themselves and family members, including opiates. And they were more likely to prescribe benzodiazepines to colleagues.

Patterns of prescribing behaviour varied by specialty, with GPs, paediatricians, and those in hospital medicine more likely to prescribe to a family member, while surgeons were more likely to prescribe to a [friend](#), and psychiatrists less likely to do so.

Anaesthetists were more likely to self medicate with opiates and benzodiazepines and to prescribe opiates to family and friends. Surgeons were also more likely to prescribe opiates for themselves and their friends, while psychiatrists were more likely to prescribe benzodiazepines to [family members](#) and colleagues.

"Prescribing outside a professional relationship can place the doctor in a compromised position and is unlikely to be covered by conventional malpractice insurance, exposing the doctor to legal or professional recourse in the event of an adverse reaction or prescribing error," warn the researchers.

But there are many ethical and potential patient safety implications as well, including for the prescribing doctor, they point out.

This is an observational study, and the survey wasn't designed to collect complex data, nor were comparative data available, the researchers acknowledge.

Nevertheless the study was large, and shows that "self prescribing and prescribing to personal contacts remains widespread among young Irish doctors, despite recent GMC guidelines," they write.

"Further education is needed to protect doctors from the risks posed by this practice, namely, risks on physical health or of addiction and suicide," they urge. And they call for this to be included in undergraduate medical degrees and postgraduate training, particularly for 'high risk' specialties, such as anaesthetics and surgery, as well as continuing professional development.

More information: Physician, heal thyself: a cross-sectional survey of doctors' personal prescribing habits, *Journal of Medical Ethics* (2019).

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