

Medical boards often lenient on doctors overprescribing opioids, research finds

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Researchers looked at over 100 cases of misconduct involving the overprescription of opioid drugs in an anonymized US state. The study investigated professional bodies composed predominantly of doctors

tasked with assessing and disciplining physician misconduct.

Almost 600,000 people are estimated to have died from [opioid overdoses](#) in the US and Canada alone over the last twenty years. The opioid epidemic is widely considered to be one of the worst public health crises in the US.

In the over 100 cases of opioid overprescription related misconduct that the researchers examined over a five year period, only six cases resulted in the doctor's medical license being revoked.

In the remainder of cases, the doctors were given comparatively lighter disciplines, such as temporary suspension, probation or reprimand of their licenses, and were allowed to continue practicing medicine. The researchers found this to be evidence of "bounded [accountability](#)." This refers to people charged with holding guilty professionals accountable for their misconduct implementing only limited discipline.

Four factors affected decision makers' judgements, including:

- Bureaucratic disciplinary systems and resource constraints that make strict discipline time consuming to implement
- A decentralized regulatory system where different regulatory bodies may have dissimilar information, creating loopholes that guilty professionals can exploit
- Shared professional beliefs among decision makers which can lead to leniency
- Decision makers feeling sympathy towards guilty professionals who show remorse, which can influence their judgements.

These factors all lead to a result of bounded accountability for physicians found guilty of overprescribing opioids, despite extensive transparency measures put in place to make the medical board more accountable to

the public.

Dr. Ece Kaynak, Lecturer in Organisational Behaviour at Bayes Business School (formerly Cass), said, "We wanted to find out how professional bodies hold their members accountable for misconduct in the face of heightened transparency measures. We know that professional self-regulatory systems are often ineffective at holding guilty actors accountable. With extensive transparency measures in place to make these systems transparent to the public, we were expecting more effective self-regulation.

"What we found instead was once again limited accountability for guilty actors. Unless the four factors we identified are addressed, our findings show that even with extensive [transparency](#) measures in place, when professionals are put in charge of disciplining the misconduct of members of their occupation, bounded accountability may be the most likely outcome.

"Our study has implications for policymakers, for example in designing appropriate systems to regulate new and potentially disruptive technologies such as generative AI."

Dr. Hatim Rahman, Assistant Professor of Management and Organizations at Northwestern University added, "Transparency is not a panacea to achieve accountability. Our study suggests that regulators and professionals, such as doctors, lawyers, and scientists, need to invest in systems involving broader stakeholders to ensure those guilty of misconduct are held accountable.

"Without serious reforms to how we hold professionals accountable of [misconduct](#), we may not only see threats to public safety but also an erosion of the public's trust in experts."

The paper, "[It Takes More than a Pill to Kill": Bounded Accountability in Disciplining Professional Misconduct Despite Heightened Transparency](#)," is available in *Organization Science*.

More information: Ece Kaynak et al, "It Takes More Than a Pill to Kill": Bounded Accountability in Disciplining Professional Misconduct Despite Heightened Transparency, *Organization Science* (2024). [DOI: 10.1287/orsc.2023.17932](#)

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