

Helping Patients See the Light Amid the Darkness of Addiction

BY GABRIEL KILEY

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PORTLAND, Maine — Mark Publicker's affinity for Catholic health care was evident when talking with him at his office at the Mercy Recovery Center on a recent January morning. He shared the story of Sr. Ignatia Gavin, who was responsible for making St. Thomas Hospital in Akron, Ohio, the first hospital in the world to treat alcoholism as a medical condition in 1935, and for incorporating Alcoholics Anonymous into the hospital setting.



Dr. Publicker

"Catholic hospitals are the last place in America where the mission of providing care regardless of social status or ability to pay remains," said Publicker, MD, the center's medical director.

This attraction to the Catholic health ministry led Publicker to the Mercy Recovery Center, Maine's

largest substance abuse treatment center.

"I'm fairly confident that there isn't another hospital-based facility of this kind built in the U.S. this decade," said Publicker, 58, who moved here from the Washington, D.C./Baltimore area in 2003. "Hospitals have been closing addiction-treatment units, and it's a tremendous commitment on the part of Mercy Hospital to build this beautiful facility."

With 29 years in medicine, Publicker is not only a nationally recognized leader in the field of addiction services (see sidebar on p. 77), he is also an advocate for addiction services as a legislative lobbyist and lecturer. Colleagues praise him as a compassionate medical professional dedicated to his patients and passionate about developing innovative practices to help patients' recovery. And recently, he's begun applying his expertise to

patients in China and Turkey.

"Mark really spends a lot of time teaching (patients) that (addiction) is a disease, that they have to take ownership of that disease, that it's not a moral failure, and that we have ways to help them address this," said Burma Wilkins, administrator, Division of Behavioral Health at Mercy Hospital. "He sees it as a chronic relapsing disease. That philosophy goes throughout the culture of the center."

MOVING FROM D.C. TO MAINE

Publicker spent 11 years (1993 to 2003) as regional chief of addiction medicine at the Mid-Atlantic Region branch (Maryland, Virginia and Washington, D.C.) of Kaiser Permanente, a not-for-profit managed health care organization operating in eight regions across the United States. But after more than a decade of living in a major metropolitan area, Publicker moved to Portland, a community of just 230,000 residents. Although this move would be a cultural shock to some people, he craved a slower-paced lifestyle.

"I was tired of the traffic and managing multiple offices in D.C.," Publicker said. "I had never been to Maine, but the first time I came to Portland, I fell in love with the city and the hospital."

The Mercy Recovery Center is part of Catholic Health East, which has facilities stretching across 11 eastern states from Maine to Florida. The center, which opened in 2002, treats the spectrum of addictions from alcohol to all types of drugs through various inpatient and outpatient programs for adults. The staff of therapists, nurses, physicians, psychiatrists and volunteers manages 15,000 yearly outpatient visits and 2,000 annual inpatient visitors from all across the state.

Although Publicker's staff treats a variety of cases, one of the biggest problems is opiate addiction. In fact, Maine owns one of the nation's highest rates of opiate addiction. Opiates are highly addictive narcotic drugs containing opium or an opium derivative that are commonly used in legally prescribed pain management medication such as morphine, vicodin and oxycodone.

**CELEBRATING
OUR COLLEAGUES
WHO CONTINUE
THE MISSION**



Dr. Publicker shares the story behind a photo from a recent trip to Turkey with colleague Vivian Bean at his office in the Mercy Recovery Center, Portland, Maine.

An illegal opiate drug, heroin, is also part of the growing opiate-addiction problem in Maine and across New England.

A major culprit of the opiate epidemic Publicker cites is the rural state's struggling economy that continues to affect small towns across the state. "There's poverty, there's boredom, there's limited transportation. Those probably play a role in drug experimentation as well as in a culture that's permissive of it," Publicker said.

One particular area of focus for Publicker is treating opiate-addicted women. Through the development of specialty programs, his staff has successfully treated more than 60 women in its maternal addition group alone. Publicker says women across the nation have higher rates of opiate-addiction than men.

"Part of the reason likely relates to risk factors for these women," he said. "Post-traumatic stress disorder and sexual abuse are major risk factors for the development of addiction. Young women are more likely to have untreated, unmet needs with self-esteem, depression, body image, all of which predisposes them to the risk of substance abuse.

"Frankly, a lot of times, these girls get involved with the wrong guys. And you have problems with poverty and family disruption, and the risk seems to be amplified. Of course, this is a population of girls who may not think ahead and are more likely to engage in unprotected sex. The rates of pregnancy are really high."

Publicker credits the center's success in treating patients to its highly evidence-based model of treatment, and the integration and communica-

tion between the inpatient and outpatient staffs.

Colleague Charles Morris, therapist and outpatient program manager at Mercy Recovery Center, said Publicker "is in the forefront in wanting to use evidence-based approaches."

"All of our staff has been trained in a style of communication called 'motivational interviewing,' which is a respectful means of engagement that is the cornerstone of our work with patients," Publicker said. "Our therapy model combines 12-step facilitation with cognitive and dialectical behavioral therapy, both of which are research supported interventions styles. We use a fair amount of medication to support recovery."

LEGISLATIVE ADVOCATE

The move to Portland also allows Publicker to continue one of his passions: lobbying government leaders on behalf of patients battling substance abuse. During his years living in the nation's capital, Publicker participated in national task forces regarding addiction services, and while establishing his practice in Pittsburgh in the early 1980s, he participated in several community organizations.

In Maine, Publicker worked for more than two years with U.S. Sen. Susan Collins, R-Maine, in support of expanding a doctor's ability to treat opiate-dependent patients with Suboxone, an alternative drug to methadone, another treatment option. Proponents say Suboxone does not create the same level of dependency as methadone, suppresses drug cravings more effectively, and is easier to use. Even more, methadone's higher abuse potential requires it be administered by the dose

at clinics. Thanks in part to Publicker's efforts, new federal legislation passed in 2006 now allows doctors to treat more patients with Suboxone.

This experience and others, Publicker said, is indicative of the opportunity Maine offers him in terms of working closely and effectively with legislators. Publicker is also actively involved in local organizations and speaks an average of 50 times yearly across Maine.

"We never found a community in D.C.," he said. "I really hungered to be part of a community and be active in a community. Portland and Maine are perfect in that regard. You have a high degree of connectedness here."

LOOKING OUT FOR PATIENTS

Publicker's interest in addiction medicine developed in the early 1980s as a family physician in Pittsburgh. He started attending AA meetings to learn more about the disease, and eventually took an active role in helping patients by starting an addiction treatment program, which quickly became the focus of his practice. Publicker credits Abraham Twerski, MD, then the medical director of St. Francis Hospital in Pittsburgh, as his mentor in addiction medicine.

"I started to get 'God Bless You' letters about six months into it. That was a surprise," he said. "There was some heartfelt gratitude from patients. Contrary to my fear, people didn't react with anger or any significant degree of resistance" when properly approached about their problem with alcohol.

To this day, Publicker said he receives letters and e-mails from former patients who express their gratitude for his help. He also reflects on those patients who struggle to remain clean and sober.

"One thing you learn early on (in addiction medicine) is we don't have any control over others. We only have some control over ourselves," Publicker said. "It's sad when somebody I've been helping relapses. But some people need to



Dr. Publicker traveled to Turkey twice in 2008 where he worked to help establish a residential program for inhalant-addicted youth in the city of Gaziantep.

go through cycles of suffering many times before turning a corner.

"It's not given to us to help everybody. I can give people opportunities and if I'm particularly skillful, I can increase the likelihood that somebody will seize the opportunity."

Publicker also credits the presence of spirituality in patients' lives in overcoming chronic illnesses such as addictions. "I've been convinced for a couple decades now that it's ultimately spirituality that transforms people's lives," he said. "What people do in NA (Narcotics Anonymous) and AA is a much greater power than any doctor, including myself, can offer. Science has given us the tools, but without the spirit, we're not going to be effective."

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Publicker Leads National Study on New Treatment Option for Opioid-Addicted Adolescents

Mark Publicker, MD, is being credited in a Nov. 5, 2008, article in the *Journal of the American Medical Association* for his work on the first national study of a new treatment for opioid addiction in adolescents. As part of the study, Suboxone, an alternative to methadone, was given to 30 teenage patients at the Mercy Recovery Center for up to three months. In addition, they received group and individual counseling twice a week. Those patients experienced dramatically fewer incidences of relapse in the short- and long-term.

In Maine, an estimated 6,000 opioid addicts between ages 12 and 17, and another 13,000 between ages 18 and 25, lack access to treatment for their addictions. Publicker said the study may offer some hope for young people. "Maine is faced with an epidemic of opiate addiction in its young people," he said. "This trial is important because it provides a strong evidence base for more effective treatment of opiate-addicted adolescents and young adults."

The article is available at <http://jama.ama-assn.org>.



Dr. Publicker shares the stories behind the collection of photographs in his office.

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— Burma Wilkins, administrator, Division of Behavioral Health, Mercy Hospital

WORLD TRAVELER

Publicker’s office is decorated with photos of his recent trips to China and Turkey, where he has taken his expertise overseas to help people with addiction problems. His two trips to China (to the cities of Beijing and Kunming) gave Publicker the opportunity to teach addiction medicine to doctors working with AA patients.

Publicker initially traveled to Turkey in June 2008 to help develop policies and procedures for a residential treatment facility that treats inhalant-addicted street children in the city of Gaziantep. He returned to the city in November to screen the next group of boys for admission and to continue staff training.

Gaziantep, which is 30 miles from neighboring country Syria, grew quickly to more than 1 million

residents within the decade as a consequence of the Kurdish insurrection that drove villagers from the countryside to the city. “The boys were the consequence of the trauma of war, of terrorism, of social dislocation, and of fathers who became alcoholics. Many of these boys were living on the streets,” he said.

Publicker plans to return to Turkey this year as the center continues to add and graduate patients. He said the overseas trips have been personally fulfilling.

“When you are put on the spot, work with another language, work with a different culture, it ramps you up. It stimulates you. You can’t rest of your laurels,” he said.

CLOSING THOUGHT

Now after nearly three decades in medicine, Publicker remains dedicated to his craft and the mission of Catholic health care.

“Mark has accessible reservoirs of compassion, which you need to have when dealing with this type of population,” Morris said. “This is a very unique thing that he does. He makes it look easy but it is a completely difficult job.” ■



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