**HOSPITALS AND HEALTH SERVICES MUST BE PROPERLY RESOURCED TO DEAL WITH ‘ICE’ PATIENTS**

***AMA Position Statement on Methamphetamine (2015)***

The AMA today released its updated *Position Statement on Methamphetamine (2015)*, which was first drafted in 2008.

Acknowledging the increased use of methamphetamine (‘ice’) in Australia, the AMA is making a number of recommendations, including improved resources – incorporating security – at hospitals and health services that deal with patients affected by ‘ice’.

AMA President, Professor Brian Owler, said that ‘ice’ is having detrimental effects on the health of far too many Australians.

“Doctors have seen a significant increase in the number of people using ‘ice’, and a significant increase in the severity of the health conditions associated with methamphetamine use,” Professor Owler said.

“Methamphetamine users are at significant risk of mental illness, but there is also a wide range of serious physical illnesses that can result from methamphetamine use.

“The impact is also being felt in emergency rooms across Australia.

“Affected patients can be difficult to treat, and are more likely to be aggressive, non-communicative, and non-cooperative.

“Methamphetamine-induced psychosis is particularly problematic, with many users requiring hospitalisation for their own safety or the safety of others.”

Professor Owler said the AMA welcomes Government leadership through the establishment of the National Ice Taskforce and the impending National Ice Action Strategy.

“Swift action and an increased focus on the health implications is important,” Professor Owler said.

“But it is critical that the National Ice Strategy is supported by a strong commitment to implementation from all levels of government.

“It is important that doctors and other healthcare workers are well supported to engage with methamphetamine users, many of whom may be reluctant to disclose their use.

“GPs should be encouraged and supported to screen for illicit drug use.

“There must be appropriate treatment and rehabilitation services for doctors to refer their patients on to.

“Treatment services must reflect the full range of methamphetamine users, including intensive inpatient support involving a number of medical specialists through to less intensive care and support provided in the community setting.”

Recommendations of the updated Position Statement include:

* education and training opportunities for all medical practitioners, as well as inclusion in the medical curricula
* appropriate security arrangements in all hospitals
* quiet areas within emergency departments might be used to help settle and treat patients,
* health financing systems to include specific funding for methamphetamine treatment, rehabilitation, and support, and
* the need for generic life skills programs to reduce the health and social consequences.

The AMA this year established a Methamphetamine Working Group, with expert members from across the medical profession, to provide ongoing policy direction for the AMA.

The AMA Position Statement on Methamphetamine (2015) is at <https://ama.com.au/position-statement/methamphetamine-2015>

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