

Episode: *Author Interview: “When Are ‘Paraphernalia’ Critical Medical Supplies?”*

Guest: Donald Egan, MD, MPH

Host: Tim Hoff

Transcript: Cheryl Green

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[bright theme music]

[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I’m your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Donald Egan, a fourth-year psychiatry resident at UT Southwestern Medical Center in Dallas, Texas. He’s here to discuss his article, coauthored with Drs Adriane M. dela Cruz, Sarah E. Baker, and John Z. Sadler, “*When Are ‘Paraphernalia’ Critical Medical Supplies?*,” in the July 2024 issue of the Journal, [Harm Reduction and Opioid Use Disorder](#). Dr Egan, thank you so much for being on the podcast. [music fades]

DR DONALD EGAN: It’s my pleasure. Thanks for having me, Tim.

[00:00:47] HOFF: So, what’s the main ethics point that you and your co-authors are making in this article?

EGAN: We wanted to discuss the ethical point that many of us from states that may have more restrictive laws about drug paraphernalia, particularly fentanyl testing strips and syringe exchange programs, the ethical consideration that practitioners and clinicians have about prescribing these medical equipments to patients. Particularly, we presented a very real case—it was a hypothetical case, but a case that can definitely happen in a state like Texas or other states that have these laws in place—about a patient or an individual who comes from a state where laws may be different and have more access to things like fentanyl testing strips and syringes. And what happens when those patients come to a state, whether for leisure or to move, and what happens if they’re pulled over, if they interact with law enforcement agencies? And then what do we do as clinicians when we know it’s pretty straightforward that these equipment are used and that they lower mortality and morbidity for people who use opiates?

[00:02:14] HOFF: And so, what’s the most important thing that your fellow health professions students and trainees should take from this article?

EGAN: I think the important thing to take away, and I hope that not only trainees take away from the article but anyone who reads the article, is that it’s not a losing game. Even in states where there are restrictions, there are ways to go around this. There are plenty of organizations that operate to help individuals obtain these devices and these supplies. And I think the other takeaway that I want for everyone who reads the article, regardless of their specialty—whether it’s psychiatry, primary care, or any subspecialty

or specialized area in medicine—is that we should be having these conversations with our patients at every stop, every time that we see them. This isn't the job of a primary care physician. This isn't, definitely not a job of someone who specializes in addiction medicine. And we should be especially talking to patients and making sure that they're aware and educated about the differences in laws across jurisdictions if they plan to travel, if they plan to move, or if they're just going about their lives, that they should be aware of these laws and the restrictions that are in place, so that they don't find themselves in one of these circumstances that we describe in our case.

[00:03:50] HOFF: And finally, if you could add a point to your article that you didn't have the time or the space to fully explore, what would that be?

EGAN: One of the...one point that I wish that we had more space and time to put in this article is that these laws are not static, that these restrictions and these regulations are always changing. And we have a plethora of examples, not only from our state of Texas, but in other states, where clinicians and advocates are working very hard for lawmakers to make these changes, and we're seeing those changes slowly but surely. And that everybody from medical student, or even outside of medicine, all the way to those who are in high positions of power within medical institutions, have a voice. And those voices need to be heard in order to make changes to these restrictions and these regulations. [theme music returns]

[00:04:48] HOFF: Dr Egan, thank you so much for your time on the podcast today, and thanks to you and your co-authors for your contribution to the Journal this month.

EGAN: Thank you. I appreciate it.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.