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- {+1} will appear as a superior numeral
- {-1} will appear as an inferior numeral
- {B} will appear as a beta
- {a} will appear as an alpha
- {u} will appear as a Greek mu
- {*} will appear as a bullet

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???Have changes been made since originally issued to IMNG???

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A. Blum

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DATE 17 1987

By Anthony Newman
Staff Writer

BECKLEY, W. Va. -- A family physi-
cian practicing in this small West Vir-
ginia town has decided to stop accept-
ing new patients who smoke.

"I reached my decision on the basis
of medical ethics," Dr. John Cannell
said in a telephone interview with this
newspaper. He continues to treat his
patients who smoked before he reached
his decision, and will treat any individ-
ual in need of acute or emergency med-
ical care, but will refuse to act as
regular primary care physician for any
new patients who smoke unless they
first commit themselves to quitting.

The inability of physicians to im-
prove the condition of patients who
smoke is the primary reason for his
decision. Since the major illnesses
caused by smoking are usually incur-
able, physicians who see patients who
smoke and find them otherwise healthy
after a routine physical are transmitting
a subtle message that smoking isn't
harmful, Dr. Cannell said.

By accepting patients who smoke, "I
was giving them a false assurance that I
could help them if they continued with
their addiction. But when these pa-
tients develop lung cancer or chronic
emphysema, there is just nothing I can
do for them," he said.

Dr. Cannell reached his decision af-
ter years of negative personal and med-
ical experience with smokers. His fa-
ther died from lung cancer when Dr.
Cannell was 6 years old; one of his last

61 memories of his father, a smoker, is of
62 the man "coughing up blood all over
63 my mother."

64 He also maintains that he "killed"
65 three emphysema patients by treating
66 their disease even as they continued to
67 smoke. Had he not treated these pa-
68 tients, they would have been unable to
69 smoke and would have been forced to
70 give up their cigarettes.

71 Instead, he treated them with theo-
72 phylline and inhaled bronchodilators
73 while trying, unsuccessfully, to keep
74 them off cigarettes. Dr. Cannell had to
75 increase drug therapy as the patients
76 continued to deteriorate.

77 "My treating them let them continue
78 smoking. Finally, they got so bad they
79 couldn't breathe even with the medi-
80 cine and died," he said.

81 Asked if the patients would have
82 found another physician to treat them,
83 Dr. Cannell responded, "What other
84 physicians do is up to them. My point
85 is this: I shouldn't do harm to someone
86 because others will anyway. I treated
87 these patients, they died, and I have to
88 live with this."

89 Dr. Cannell finally reached his deci-
90 sion not to accept smokers after diag-
91 nosing lung cancer in a 40-year-old
92 mother of 3, also a cigarette smoker.

93 "At that point I decided I was tired of
94 dealing with it. If people want to kill
95 themselves, I'm not going to help
96 them."

97 He placed a small notice in the Beck-
98 ley newspaper to inform the 21,000
99 residents of his decision. A number of
100 smokers Dr. Cannell treated regularly
101 changed to other physicians in town or
102 to the two other physicians in Dr.
103 Cannell's clinic. Although some smok-
104 ers have remained his patients, they
105 continue to dislike his assertions that
106 they are drug addicts and need to be
107 treated for tobacco dependence.

108 However, Dr. Cannell estimates that
109 more of his patients have quit smoking
110 in the 3 months since his ban went into
111 effect than in the 5 years that he has
112 been practicing. He also has gained
113 several nonsmoking patients who sup-
114 port his position.

115 Reaction among his associates also
116 has been mixed. Several "addicted phy-
117 sicians" have told Dr. Cannell that his
118 measure is too severe; nonsmoking as-
119 sociates have praised his decision, but
120 none has adopted a similar position.

121 Editorials in the Beckley Post-Herald
122 and other lay newspapers have been
123 mostly negative. The Pittsburgh Press
124 wrote that "by extension, his logic
125 would deprive alcoholics treatment for
126 their damaged livers," and accused him
127 of "renegeing" on the promises of the
128 Hippocratic oath.

129 Dr. Cannell does not agree that the
130 logic of his refusal can be extended to
131 alcoholics. Alcoholism is a disease that
132 people may somehow be prone to de-
133 velop, as is obesity; tobacco use is a
134 harmful drug addiction and a conscious
135 choice. "I know of no physician who
136 would accept a heroin addict as a pa-
137 tient [if that patient] said, 'You can
138 treat me but I'm going to continue
139 abusing heroin.' "

140 He also does not see any inconsis-
141 tencies in refusing routine treatment to
142 smokers but not to drunk drivers or
143 those who refuse to wear seat belts. A
144 car is a necessity for many people and
145 serves the primary purpose of contrib-
146 uting to the quality of life, even though
147 it carries the risk of a fatal accident.
148 Smoking, however, serves no purpose
149 but to enable addicts to consciously
150 endanger their--and others'--lives, Dr.
151 Cannell said.

152 He added that his position resulted
153 from his rereading the Hippocratic
154 oath, not disregarding it; that's when
155 he decided he was doing harm by tell-
156 ing patients who smoke that they were
157 otherwise healthy, giving them a false
158 sense of security that allowed them to
159 continue smoking.

160 The unquestioned treatment of smok-
161 ers also points out a conflict between
162 ethics and monetary reward. "If every-
163 one were to stop smoking tomorrow
164 our incomes would be reduced by one-
165 third. That many physicians do not even
166 ask if their patients smoke may be . . .
167 a further example of our financial in-
168 centives working against the Hippo-
169 cratic oath," Dr. Cannell said.

170 Nevertheless, he does not think smok-
171 ing should be made illegal and does not
172 recommend that every physician take
173 the same stance. "I do what I have to
174 do to sleep well. I don't like advocating
175 my own views, but I do think physi-
176 cians need to accept part of the blame
177 for widespread tobacco use," Dr. Cannell
178 said.

179 Dr. Richard C. Inskip, immediate
180 past president of the American Acad-

181 emy of Family Physicians, said he re-
182 spects Dr. Cannell's position and his
183 right to refuse treatment to any patient
184 he believes he is unable to manage.

185 However, he did not agree that treat-
186 ing smokers, even if they have an in-
187 curable illness, is consistently hope-
188 less. "Treatment can delay the amount
189 of damage that occurs," especially
190 through infection and high blood pres-
191 sure, said Dr. Inskip, in private prac-
192 tice in Reno, Nev.

193 He said he hopes Dr. Cannell does
194 not blame himself for patients' inability
195 to quit smoking. The recidivism rate of
196 smokers is greater than 80%; physi-
197 cians have to realize that refusals to
198 quit aren't always the physician's fault.

199 Dr. Inskip also expressed concern
200 that residents of Beckley unable or un-
201 willing to accept Dr. Cannell as their
202 primary care physician might be unable
203 to find another physician with relative
204 ease. If a large number of people in the
205 area are counting on a few physicians,
206 Dr. Cannell's position may be a dis-
207 service.

208 Dr. Alan Blum, of Baylor College of
209 Medicine, Houston, and a noted anti-
210 smoking activist, said Dr. Cannell "is a
211 man of conviction who deserves ap-
212 plause.

213 "At first, [Dr. Cannell] may sound
214 like he's on a high horse, but he's not
215 He's turning away those patients who
216 he feels unable to help, and he's show-
217 ing he cares by sacrificing his own
218 income. No one would criticize a phy-
219 sician for referring elsewhere patients
220 who are difficult to manage, and that's
221 exactly what he's doing," said Dr.
222 Blum, who is also former editor of
223 the New York State Journal of Medicine.

224 He also predicted that, given the
225 current "wild" litigious climate in med-
226 icine, more physicians will adopt such
227 a position, especially as they hear of
228 other physicians sued by patients who
229 develop lung cancer or chronic emphy-
230 sema and blame their physician for not
231 taking their habit seriously.

232 Dr. Cannell said his decision not to
233 accept patients who smoke will stand,
234 and that he will gladly treat any pa-
235 tients who come to him seeking treat-
236 ment for their addiction. He also has
237 begun an antismoking campaign in
238 Beckley and has hired several local
239 teenagers to help him.

240 END

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