

No Easy Answers

Emergency Physicians Engage in Gun Control Debate

by ERIC BERGER

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The inside of the fire station was a maelstrom of teachers, parents, children, and first responders. And it was amid this chaos that Robert Bazuro, DO, realized the true horror of what had occurred just a quarter of a mile down the street at Sandy Hook Elementary School, where his children attended.

“The kids sheltered at the fire station, and I was helping teachers help the kids to find their parents,” Dr. Bazuro recalled. “Then we started to realize that some of the kids weren’t there. It was truly chaotic, so we didn’t really know how bad it was until then. I guess you just can’t really imagine that 20 kids have been shot dead.”

On December 14 of last year, Adam Peter Lanza walked into an elementary school in Newtown, CT, and shot dead 26 people, including 20 children. Dr. Bazuro’s children were not at school that day.

The shootings ignited a nationwide debate on gun control.

Five days after the tragedy, the American College of Emergency Physicians (ACEP) joined this conversation by issuing a news release in which President Andy Sama, MD, stated in part, “We deplore the improper use of firearms and support legislative action to decrease the threat to public safety resulting from the widespread availability of assault weapons.”

The organization called for increased investment in mental health resources and a ban on the sale of assault weapons.

The reaction from some ACEP members was swift and unhappy.

“I personally took several phone calls from members who were upset with ACEP for talking about assault weapons,” said Dean Wilkerson, the organization’s executive director.

Some members were unaware that ACEP had an existing policy, in place since 2001, that endorsed efforts to “decrease the threat to public safety that results from the widespread availability of assault weapons and high capacity ammunition feeding devices including a ban on the sale of assault weapons and high capacity magazines.” Those members, Wilkerson said, believed that Dr. Sama’s remarks were being made in haste just after the Newtown tragedy. Other members were familiar with the policy, he said, but unhappy with it.

Because of Newtown, because of member concerns expressed after the late December news release issued by ACEP, and because of the nature of the Firearm Prevention Policy itself, which was cobbled together in 2001 from myriad firearm policy statements dating to 1989, Dr. Sama decided a reboot was in order. He created a task force of 5 members (Appendix), of which Dr. Bazuro would become a member, and named Marco Coppola, DO, council speaker at ACEP and an emergency physician in Fort Worth, its chairman.

The task force has the responsibility of rewriting ACEP’s policy on firearms, which is likely to be considered by the organization’s board of directors at its June meeting.

“Our goal is to try and find common ground,” Dr. Coppola said. “We don’t want to disenfranchise half of our membership by going overboard on one side or the other.”

This is no easy task in the emotionally charged wake of the Newtown shootings, which have awakened a long and slumbering national debate on gun control.

When guns and gun control were last a hot topic in the United States, it was the research of an emergency physician that helped to stoke those fires.

Art Kellermann, MD, MPH, the founding chairman of the Department of Emergency Medicine at Emory University and now the Paul O’Neill Alcoa Chair in Policy Analysis at the RAND Corporation, published several influential

early research articles on gun control in the 1980s and 1990s that ultimately helped to chill US scientific inquiry into firearms.

GROUNDBREAKING RESEARCH

Between 1986 and 1993, Kellermann was the lead or coauthor of a spate of research articles published in the *New England Journal of Medicine*¹⁻⁶ in which he found the following:

- In Seattle, during a 6-year period, “even after the exclusion of firearm-related suicides, guns kept at home were involved in the death of a member of the household eighteen times more often than in the death of an [intruder].”
- In a comparison between Seattle and Vancouver, a city with a much more restrictive gun policy, “the rate of assaults involving firearms was seven times higher in Seattle than in Vancouver.”
- A study that examined homicides in homes in Cleveland, Memphis, and Seattle during 5 years found that homicides occurred nearly 3 times more often in homes where guns were stored than in similar homes where there was no gun.

Kellermann’s work was one of the principal factors that led the National Rifle Association (NRA) to launch a successful campaign to clamp down on gun research.

At the time, for about a decade, the Centers for Disease Control and Prevention (CDC) had spent just more than 0.1% of its annual budget, \$2.6 million, on studies of guns, the majority of which produced results that favored gun control.

Initially, legislators allied with the NRA sought to eliminate the entire National Center for Injury Prevention and Control, which studies the best ways to prevent violence and injuries, and applies evidence-based solutions to keep people healthier and more productive. When this failed, US Rep. Jay Rickey, an Arkansas Republican, got an amendment passed that stripped the \$2.6 million from the CDC’s budget for gun control research. More recently, when the National Institutes of Health sought to fill

this void in federal research, NRA allies also successfully limited the NIH's gun research funds.

According to the NRA, government research into gun violence was not necessary.

Effectively, the moratorium on federal gun science stigmatized researchers who studied firearm injuries.

"The lack of federal money, I don't want to say the word *blackballed*, but it dissuaded many of us who do research in this area," said Megan Ranney, MD, MPH, an emergency physician at Rhode Island Hospital and an injury prevention researcher at Brown University. "It always struck me as ironic that we could research anything but guns."

AURORA STIRS ACTION

After the mass shooting last July in Aurora, CO, during a midnight screening of the film *The Dark Knight Rises*, Dr. Ranney decided this inequity in federal funding should no longer stand. She and other emergency physicians from around the country banded together to form an ad hoc group to press for ACEP to take a stronger stand on this and other firearm-related issues.

Emergency physicians, Dr. Ranney noted, are usually the first physicians to care for firearm victims. Working ahead of ACEP's annual council meeting last October in Denver, the group put together 2 resolutions that were passed by the council, stating: "RESOLVED, That ACEP condemns the recent massacres in Aurora, CO and WI, and daily firearm violence throughout our nation; and be it further RESOLVED, That ACEP states its commitment against gun violence including advocating for public and private funding to study firearm violence prevention."

The group sought to do more after the council meeting, Dr. Ranney said. "We rededicated ourselves to encourage ACEP to become more actively involved. And then Newtown happened."

Dr. Ranney and others believe Newtown ratchets up the pressure on ACEP to take a more prominent stand on the issue.

The task force named by Dr. Sama will have an important say in what that stand might be. In choosing its members, Dr. Sama sought to represent all views on

the gun issue, said its chairman, Dr. Coppola.

Is he himself a gun owner?

"Let me put it this way," he said. "I've been in the Army for 30 years. I live in Texas. You figure it out."

When it comes to the task force, Dr. Coppola said, the challenge is surveying existing gun research, which often presents conflicting findings, and drawing some kind of conclusion. "What I'm interested in is discovering the truth in the universe," he said. "And I don't know what it is. Who do you believe? Do you believe the economists? Do you believe the criminologists? Do you believe the physicians? That's why this is so hard."

Dr. Coppola said gun-owning members of ACEP he's spoken with have expressed the most frustration with the part of the policy that calls for a "ban on the sale of assault weapons and high capacity magazines." That verbiage is problematic, Dr. Coppola said, because the definition of an "assault weapon" is based on a gun's cosmetic appearance—for example, does it have a bayonet lug—rather than its function. "The cosmetic features can make an assault weapon look scary, but they have nothing to do with its lethality," Dr. Coppola said.

Connecticut instituted an assault weapons ban in 1993, but none of the guns Lanza used was an "assault weapon" under Connecticut law.

Instead of arguing over the semantics of gun definitions, the task force is likely to seek areas of common ground. Another member of the task force, Andrew Fenton, MD, president of the California chapter of ACEP, said this includes advocating for more federal research, better access to mental health services, and understanding the effect of violent media on young minds. After a better scientific understanding of gun violence is obtained, Fenton said, then it will be time for the difficult discussions on potentially limiting gun ownership.

"The contentious issues will take some time, and that's why we need the research to understand what works," he said. "But I think we all can agree the status quo is not acceptable. If we do nothing after a tragedy like this occurs, I can't think of a more damning thing for our nation. Let's put everything on the table. Let's research what works and what doesn't. We might

find out the NRA is right, if that's what works, then let's do that."

In the wake of Newtown, President Obama took the first step toward thawing the federal freeze on research into guns, issuing a Presidential Memorandum directing the CDC to research the causes and prevention of gun violence. He called on Congress to provide \$10 million to fund this research.

CAUTIOUS OPTIMISM

There's an important caveat," Kellermann said. "The President can direct the \$10 million, but Congress has to put the money in the CDC bank account. The optimist in me says this will allow thoughtful researchers to address important questions. But the worst-case scenario is that the CDC will be a rag doll between Congress and the White House."

In other words, Kellermann said he fears that the CDC's injury research program could become collateral damage, much like the case in 1996 when the original pro-gun lobby effort defunded the entire National Center for Injury Prevention.

Dr. Ranney and Fenton, who was also a member of the original ad hoc group formed after the Aurora theater shootings, say ACEP is playing from behind. They note stronger policy statements made on gun control after Newtown by organizations such as the American College of Surgeons and American Academy of Pediatrics.

A January statement from the American College of Surgeons, for example, calls for "[l]egislation banning civilian access to assault weapons, large ammunition clips, and munitions designed for military and law enforcement agencies."

Representing front-line providers of care to gunshot victims, Dr. Ranney, Fenton, and other advocates say, ACEP should be at the forefront.

"We are less active in firearm-related advocacy, and I would like to see us be more active," Dr. Ranney said. "We deserve as a specialty to be part of the national conversation and have our voice. We are one of the only groups that can effectively say what kind of research needs to be done."

After the Newtown shootings, Dr. Bazuero and other physicians in the Connecticut town formed a group called United Physicians of Newtown that seeks to pre-

vent a similar event from reoccurring. The group is seeking increased federal research, comprehensive and universal background checks, and more restrictions on the sale of guns.

For Dr. Bazuro, these are not easy issues. He supports guns, but he's also seen firsthand at the school his children attend what guns can do in the wrong hands.

"It's funny because I was [Reserve Officers' Training Corps] trained, and I go on a hunting trip every year, and I believe in the second amendment," Dr. Bazuro said. "But I don't believe it should be without restrictions."

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REFERENCES

1. Kellermann AL, Rivara FP, Lee RK, Banton JG, Cummings P, Hackman BB, Somes G. Injuries due to firearms in three cities. *N Engl J Med*. 1996;335:1438-1444.
2. Kellermann AL, Rivara FP, Rushforth NB, Banton JG, Reay DT, Francisco JT, Locci AB, Prodzinski J, Hackman BB, Somes G. Gun ownership as a risk factor for homicide in the home. *N Engl J Med*. 1993;329:1084-1091.
3. Kellermann AL, Rivara FP, Somes G, Reay DT, Francisco J, Banton JG, Prodzinski J, Fligner C, Hackman BB. Suicide in the

home in relation to gun ownership. *N Engl J Med*. 1992;327:467-472.

4. Sloan JH, Rivara FP, Reay DT, Ferris JA, Kellermann AL. Firearm regulations and rates of suicide. A comparison of two metropolitan areas. *N Engl J Med*. 1990;322:369-373.
5. Sloan JH, Kellermann AL, Reay DT, Ferris JA, Koepsell T, Rivara FP, Rice C, Gray L, LoGerfo J. Handgun regulations, crime, assaults, and homicide. A tale of two cities. *N Engl J Med*. 1988;319:1256-1262.
6. Kellermann AL, Reay DT. Protection or peril? An analysis of firearm-related deaths in the home. *N Engl J Med*. 1986;314:1557-1560.

APPENDIX

Full task force roster.

Marco Coppola, DO, chair

Robert Bazuro, DO

Andrew Fenton, MD

Rebecca Parker, MD, ACEP board member

John Rogers, MD, ACEP board member