In Editorial, RIH’s Dr. Ranney Calls for Research into Gun Violence

PROVIDENCE – A Rhode Island Hospital emergency medicine physician says in a new editorial that gun violence is a public health issue, and needs to be addressed in the same way as other causes of injury. The editorial, written by Megan Ranney, MD, MPH, is published online in advance of print in the Annals of Emergency Medicine.

Dr. Ranney writes that when it comes to firearm violence, physicians are limited in their ability to make evidence-based recommendations due to federal bans on the research of the nature, causes and potential prevention of firearm injuries. Since 1996, the Centers for Disease Control and Prevention has been banned from using funds to research gun violence, and in 2011, this ban was extended to the National Institutes of Health. These bans were lifted by President Obama’s executive order of January 16, 2013, but there is still a lack of appropriated money to do this research.

“It’s ironic, really,” Dr. Ranney noted, “that James Holmes, the alleged shooter in the Aurora, Colorado, theater massacre, received $21,600 from the National Institutes of Health to pursue his education. Yet using that money to fund research that may have prevented the massacre would have been illegal. It simply doesn’t make sense.”

Dr. Ranney also noted in the editorial that in Florida a bill has passed the House that subjects physicians to potential sanctions, including loss of their medical license, if they discuss or record gun safety information with their patients. The Affordable Care Act also contains language (subsection 2727[c]) that limits the ability of physicians and researchers to keep data on patient gun ownership.

“Emergency medicine physicians are on the front lines when it comes to gun violence,” Dr. Ranney said. “We are the first doctors to see these patients – the victims of gun violence – and we see them every day. We therefore have a unique perspective on the issue.”

She added, “It stands to reason that just as we are permitted, and indeed encouraged, to ask patients about their use of drugs and alcohol, similarly we should be able to ask if they have a gun at home, especially if the patient is particularly distraught and at possible risk of self-injury or injuring others.”

In the editorial, Dr. Ranney calls for physicians to take action to increase research funding for firearm-related violence. She also encourages her peers to advocate for an immediate ban on assault rifles and high-capacity magazines, mandatory background checks for all firearm transfers, immediate restoration of funding for research on firearm-related injuries, improved access to mental health services, and for protection of the First Amendment Rights of physicians.

“Based on the limited data we have, all of these changes in legislation would make a difference in rates of gun violence,” she says. “Change is never easy, but the road we are on is dangerous,” she added. “Changes must be made if we are to make any progress in reducing gun violence in our country.”