

Guns and bioethics: a Q&A with Steve Miles

By: Susan Perry - April 9, 2013

Early this year, President Barack Obama signed an executive order to “clarify that the Affordable Care Act does not prohibit doctors asking their patients about guns in their homes.” He also reassured doctors that they can warn law-enforcement officials about credible threats of violence without violating health privacy laws.

"Doctors and other health care providers ... need to be able to ask about firearms in their patients' homes and safe storage of those firearms," the administration said in a statement released at the time, "especially if their patients show signs of certain mental illnesses, or if they have a young child or mentally ill family members at home."

This clarification had many medical groups and public-health officials cheering. But it angered many opponents of gun control. Rush Limbaugh declared that under Obama, doctors were becoming “deputies, agents of the state.”

Exactly what role should physicians and others in the medical community play in reducing gun violence? On Wednesday, April 10, Dr. Steve Miles, a professor of medicine and bioethics at the University of Minnesota, will be addressing that topic in the first of three public seminars in the university's 2013 “Mini Bioethics Academy Series.”

In a phone interview last week, Miles talked to MinnPost about the information he'll be presenting in his seminar, which he's entitled “Happiness Is a Warm Gun: Bioethics and Gun Policy.” The following is an edited transcript of that interview.

MinnPost: Do you believe that public-health officials are doing enough to reduce gun violence?

Dr. Steve Miles: No, I don't, and partly it's because they're hamstrung. Since 1996, the NRA, which also functions as an anti-science institution, has cut U.S. funding for gun-related research from a public-health perspective by over 95 percent. So, in terms of impairing the types of data collection and data analysis that's necessary to do a public-health perspective, we've currently wound up in a situation where the science itself is impaired.

MP: What do you think will most surprise your audience on Wednesday about gun-violence statistics?

SM: Clearly, everybody understands that having a gun available increases the lethality — that is, the deadliness — of the suicidal impulse. If one has a suicidal impulse and there is a gun available as opposed to a knife, then the suicide attempt is much more likely to be lethal. What's so interesting is that it's also true for homicide. The idea advanced by the NRA people is that homicides are basically done by monster criminals. But what really seems to be going on is that as the number of guns increases, as more houses have guns, as the gun saturation in the society rises, it's the availability of guns that turn ordinary

interpersonal disputes, including domestic disputes, into lethal events. So homicide looks very much like suicide in being gun-prevalence-driven.

MP: One of the statistics in your presentation that jumped out at me was the high number of American children who die in gun accidents. As you note, the accidental gun death rate is 11 times higher among 5- to 14-year-olds in the U.S. than the combined rates of 22 other high-income developed countries.

SM: It's a very sad number. When you have a gun in the house, for kids there is a 16-fold increase in the risk of a lethal accident involving a gun. So, despite what everybody says about gun education and gunlocks, it just doesn't work. A gun in the house is an accident just waiting to happen.

MP: As you also note in your presentation, the NRA often says that guns prevent their owners from becoming crime victims. In fact, they claim that huge numbers of gun owners find themselves in situations each year in which they are forced to use their weapons to defend themselves and their families.

SM: I spent some time tracking that down. Mostly, they cite an article from 1995 by Kleck and Gertz, which cites 2.5 million defensive gun uses per year. But the Cato Institute — which is an anti-gun-control conservative group — took a different approach. What they did is [search] eight years of news clippings. They found only a few hundred events over those eight years — somewhere around 450 or so. That's a long way from 2.5 million. When one looks at the number of justifiable homicides — which does not include, for example, instances when citizens deterred a crime — even so, one is talking about less than 100 a year. So these events where there is a defense-of-gun use are actually extraordinarily rare, especially when one puts it in the context of somewhere around 30,000 gun deaths per year.

MP: The American Academy of Pediatrics recommends that pediatricians talk at least once a year with parents about the danger of guns. Why is that important?

SM: I think one of the things that's important is for us to de-sanctify guns. We should treat a gun like we would any other risk factor for injury. We know that tobacco is a risk factor for injury, and we ask about it, even though there is no medical use for tobacco. We recognize that the non-use of bicycle helmets is a risk for injury, and so we ask about those. And we should ask about guns because this is an important way to protect the public health. Sometimes doctors are afraid for a variety of reasons to ask about controversial topics: multiple sexual partners, gay sex, guns, motorcycle helmet use, and so forth. But if the total job here is to decrease public death and disability, this falls within the range of fair questioning. Now Florida, for example, passed a law [now wending its way through the appeals process] that attempted to prevent doctors from asking such questions. If a patient is suicidal, asking whether or not there's a gun in the house is a key question for doctors to ask.

MP: Rush Limbaugh has said that this makes doctors “deputies [and] agents of the state.”

SM: Rush Limbaugh and his partners have made many claims [about the Affordable Care Act] that are not scientifically based, including death panels and all the rest of it, and this is just more of the same. I think the issue here comes down to anti-science. In many ways, the pro-gun groups, including the NRA, act like other industrial anti-science

groups, such as the tobacco lobby and the soft-drink manufacturers when they were trying to defend soft drinks in school. What these groups do is construct false facts, and they do their best to prevent real science from being done. That's what we're seeing with gun violence as well.

MP: How are we doing with reducing gun violence in Minnesota?

SM: The Brady campaign, which rates state legislation, puts us 18th out of 50 states. There are huge areas for improvement in Minnesota laws. I think that the best way to characterize Minnesota gun laws is that they are cowardly. We allow bulk purchasing of guns. We do not require the proper licensing of our gun dealers. We do not in any meaningful way try to prevent people who have violent records from obtaining guns. Essentially what we've done is adopt a middle-of-the-road conservative approach that says we will take a lobbying group and a lack of information more seriously than the lives of our citizens.

FYI: You'll find ticket prices and other information about Miles' April 10 presentation on the University of Minnesota's Center for Bioethics website. The other two presentations for the "Mini Bioethics Academy 2013" are:

- "Can Your Genes Be Patented?" (April 17) by Lelili Fatehi, a research fellow at the Hubert H. Humphrey School of Public Affairs and an adjunct law professor at the University of Minnesota Law School, and
- "At Home and in the Hospital: Ethics of Eldercare" (April 24) by Dr. Edward Ratner, an associate professor of medicine at the University of Minnesota School of Medicine.