

Book Review

Jihad and American Medicine
by Adam Frederic Dorin, M.D.,
MBA, published by Praeger
Security International, 2007

A practicing CSA member from San Diego with a military background, Dr. Dorin has written a detailed exposition of plausible security vulnerabilities in the health care sector that could adversely affect hospitals, other health care facilities, and research institutions. Dr. Dorin identifies and examines the many means available to terrorists to inflict great destruction of life by harming our health care sanctuaries. As certainly is the case with surgery centers—where virtually anyone has almost full access to these facilities—hospitals don't lag too far behind (if at all). Obstetric suites, busy emergency departments, outpatient clinics, and admitting areas also raise security concerns when one considers the meager number of minimally trained and unarmed security guards “protecting” our institutions. For additional reflection on hospital security beyond “jihad,” Dr. Dorin also describes well-documented intentional killing of patients by “insiders,” usually psychopathic non-terrorist health care providers.



Among his many recommendations, Dr. Dorin suggests several ways to prevent the intentional contamination of our drugs and parenteral solutions and how to enhance current security technology, protocols, and procedures. While the scientific validity of a number of his claims is lacking, many of his recommendations seem reasonable and ought to be considered by those who are responsible for institutional security. Although hospitals are only one small segment of our public structures that are potential terrorist targets, this is not to detract from the critical role they would play should terrorists strike other public institutions. Indeed, intentional damage of this “last resort” for the injured might well be part of an even more Machiavellian terrorist plot.

Allegedly, the book has been given the “cold shoulder” by some major newspapers and even colleagues. The sensationalistic title itself may have something to do with this; beyond that, however, every single enterprise is potentially vulnerable in an age of terrorism, and the potential administrative

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burden of dealing with each security concern is staggering. Dr. Dorin's response is that "the themes of re-engineering the way health care is delivered to minimize medical errors and decrease the potential for intentional disasters are timely and important." He refutes claims that his book is a political statement, but rather he declares that it is an attempt to better control a largely unacknowledged and neglected source of potential morbidity and mortality within our health care system.

Medicine is a moral enterprise, and physicians, by and large, live according to the ethical standards to which they have been inculcated in both their professional and personal lives. Expecting similar behavior, most physicians tend to live their lives with a powerful sense of trust, while the deliberate harming of any human being is alien to them—all the more reason we should begin to confront the vulnerabilities and security needs in America's diffusely organized health care sector.

Stephen Jackson, M.D., Editor

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