

## L E T T E R S

---

Editor:

I read with interest the editorial entitled “Criminal Background Checks for Psychiatry? Michigan’s Mental Health Exceptionalism.”<sup>1</sup> The authors cover a variety of significant topics. What is missing, however, is a discussion of the need to protect patients in long-term care facilities. I recall at least half a dozen cases of individuals who were driven by psychopathology to homicidal behavior toward incapacitated patients. Among them was the notorious Cincinnati Angel of Death, who killed more than 50 patients at various institutions. I have examined nurses who justified suffocating patients with the rationale that they were ending the patients’ suffering. I was the consultant to the FBI team that investigated the nurses at the Ann Arbor VA Hospital who were charged with killing many patients. The number of patients who were killed by these nurses by administration of Pavulon has never been fully determined. There is real danger that patients in long-term care facilities will be abused and killed by individuals who are prone to sadistic and homicidal behavior. The real question is, what would be the most effective method of protecting the vulnerable population?

Emanuel Tanay, MD, PC  
Wayne State University  
Ann Arbor, MI

## References

1. Zivin K, Nosowsky R, DiFranco D, *et al*: Criminal background checks for psychiatry?—Michigan’s mental health exceptionalism. *J Am Acad Psychiatry Law* 36;6–9, 2008

## Reply

We thank Dr. Tanay for his interest in our article and agree with him that it is important to protect patients in long-term care facilities. In our article, we asserted that it is inappropriate to single out certain health care providers (whether it is long-term care facilities or psychiatric facilities, the focus of our paper) to be subject to criminal background checks, to the exclusion, for instance, of acute care facilities that treat equally vulnerable populations. We also agree that researchers and policy-makers should identify the best mechanism by which to protect vulnerable patients most effectively.

Kara Zivin, PhD  
Duane DiFranco, MD  
Marcia Valenstein, MD  
Helen C. Kales, MD  
John F. Greden, MD

University of Michigan Medical School  
Ann Arbor, MI

Rachel Nosowsky, JD  
Miller Canfield Paddock & Stone PLC  
Ann Arbor, MI