The Research Society on Alcoholism

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ABSTRACT

Until the 1960s, the small amount of federal funding available in the alcohol field in the USA was provided by a division of the Alcohol, Drug and Mental Health Administration. In the late 1960s, the National Council on Alcoholism (NCA) joined the American Medical Society on Alcoholism (AMSA, which accepted only physicians). A group of physicians at NCA–AMSA felt that progress in our field needed the concerted effort of both physicians and non-physician scientists, creating the Research Society on Alcoholism (RSA) in 1977. The National Institute on Alcohol Abuse and Alcoholism (NIAAA) had been created a few years earlier. From 250 members in 1978, the RSA has grown to 1500 in 2001, with a ratio of about three PhDs (with specialties that range from gene therapy to social policy) to each MD. The society holds yearly meetings—visitors can find more information on the web page (http://www.RSoA.org). The society publishes the journal Alcoholism: Clinical and Experimental Research. RSA committees are active in presenting the most recent findings to the public and to elected representatives, and in making recommendations on areas of research that need funding.

KEYWORDS Alcoholism, biomedical, history, psychosocial, research, society.

ALCOHOLISM RESEARCH IN THE UNITED STATES: FUNDING UNTIL THE 1970s

For decades, alcoholism research lacked recognition as a legitimate science. This was caused, in part, by the prevailing perception both among the public and the health professionals that there was not much that could be done about the alcoholism issue and its problems. In the 1960s, the small amount of federal funding available for alcohol research was provided by a division of the Alcohol, Drug and Mental Health Administration (ADAMHA), a governmental institution separate from the National Institutes of Health. ADAMHA had a broad mission, research being only one of its mandates. Within ADAMHA, there was internal competition for funding between alcohol and other drugs. In the 1960s, it was felt that the situation would be improved if the alcohol field in the United States had its own institute. Some countries had already developed a strong presence in the field. The National Institute on Alcohol Abuse and Alcoholism (NIAAA) was created in the early 1970s (Lieber 1989) and this event constituted a major turning point in terms of alcohol research in the United States. NIAAA provided the US alcohol researcher with recognizability in the research community and with a home in Washington to approach for help and advice. The Research Society on Alcoholism (RSA) was to develop following this achievement. The 2001 budget of NIAAA is of the order of $340,000,000, the majority distributed extramurally through peer-review mechanisms.

FROM A MEDICAL FIELD TO A MULTI-DISCIPLINARY FIELD: THE NEED FOR A NEW SOCIETY

In the late 1960s, the National Council on Alcoholism (NCA), the umbrella organization promoting alcoholism research, adopted as one of its components the American Medical Society on Alcoholism (AMSA), a national outgrowth of the New York Society on Alcoholism.
Table I RSA ‘Pioneer’ Members. The Research Society on Alcoholism (RSA), originally a division of the National Council on Alcoholism (NCA), was founded in 1976. The first RSA Membership Directory was printed in 1977 with 197 members listed. Of these, 53 were still RSA members in 1977 and they were honored as ‘Pioneers’ at the 1977 RSA Annual meeting in Hawaii.

<table>
<thead>
<tr>
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<th>PhD</th>
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![Graph showing composition of RSA membership comparison between 1977 and 2000](from Lieber 2000)

**Figure 1** Composition of RSA membership: comparison between 1977 and 2000 (from Lieber 2000)

Subsequently, they had combined annual NCA–AMSA medical scientific meetings which were successful in bringing together the enlightened lay community and that segment of the medical profession engaged in alcohol research (Lieber 1977). Successful as they may have been, these meetings ignored one very important segment of alcohol research, namely that carried out by non-MD researchers. Indeed, AMSA only accepted MDs in its ranks. However, a handful of visionaries at AMSA and other interested scientists, with NCA’s blessing, led in 1977 to the creation of the Research Society on Alcoholism, a society open to all investigators in the field (Lieber 1977). Its first formal Annual Meeting was held on 1 May 1977 in San Diego, CA, USA where a full slate of officers, including the first president Dr Charles Lieber, were elected. In 1978, RSA reached the 250 membership required to become a fully-fledged component of NCA. Twenty years later, in 1997, 57 members of the original 1977 group of 197 were still active in the Society; they were honored as ‘Pioneers’ of RSA at the annual RSA meeting in Hawaii (Table 1). A more complete account of the early years of RSA can be found elsewhere (Lieber 2000). In 2001, the RSA had reached 1500 members and the ratio of PhDs to MDs was about 3:1 (Fig. 1). While most of its members reside in the United States, the Society accepts fully-fledged members from all countries provided they demonstrate an active interest in this field and are sponsored by two present members.

**ALCOHOLISM: CLINICAL AND EXPERIMENTAL RESEARCH: THE OFFICIAL JOURNAL**

In the early years of RSA, and under the umbrella of NCA, RSA had several joint ventures with AMSA, mainly an Annual Medical–Scientific Meeting and a common journal: *Alcoholism: Experimental and Clinical Research*, which covered both clinical and basic topics. The first Editor of the journal, the late Frank Seixas, deserves much credit for launching the journal in 1977 (Lieber 1992) with the help of a dedicated editorial board. However, some members of AMSA felt that the journal was not clinical enough. Further, AMSA decided to expand into the drug addiction field. It actually underwent several name changes to that effect, the latest being ASAM, or American Society of Addiction Medicine. Many ASAM members wanted to change the journal’s policy, including a shift of emphasis away from basic sciences to more clinical medicine and also greater focus on drugs other than alcohol. However, the Editorial Board of the journal (Chaired by C. S. Lieber), supported by RSA, felt that the journal was successful because it filled an obvious need and that this change in emphasis was not
advisable. Most members of RSA concurred that the
prospect of de-emphasizing basic research and moving
RSA away from alcoholism was unacceptable. Eventually,
Alcoholism: Clinical and Experimental Research was to
become the journal of the RSA only. How to divide fairly
the journal which was common property of NCA, RSA
and AMSA consumed the energy of many meetings
between the board members of the three societies and the
first six presidents of RSA. In 1987, ASAM sold the
journal to RSA for $1 and, in 1988, NCA agreed for RSA
to become the sole owner of the journal Alcoholism:
Clinical and Experimental Research. In 1989 it also became
the official Journal of the International Society for
Biomedical Research on Alcoholism (ISBRA). Under
RSA's management, the journal continued its rapid
growth, both in stature and in size and, by objective
criteria, such as the citation index, became one of the
premier scientific publications in the field. Much of this
success is due to the exceptional dedication and talent of
our second editor, Marc Rothshild. Recently, the journal
passed to the able editorship of Ting-Kai Li.

The severance of the formal relationship of RSA with
NCA and AMSA facilitated many of these RSA initiatives
but it also had some drawbacks. It weakened an impor-
tant link between the research and the lay communities.
When RSA was a component of NCA, it played a major
role in the joint annual meeting of the two organizations
which allowed the Research Society to display to the lay
community some of its efforts of potential direct impact
on the delivery and improvement of care. This interaction
between the two groups also facilitated the enlistment of
the lay community in support of some of RSA's initia-
tives, including the promotion of research funding.
Similarly, the lack of joint meetings between RSA and
ASAM diminished the opportunities for collaboration in
joint projects and in the translation of the basic research
findings into corresponding clinical investigations and
clinical applications. This problem, of course, is not
unique to RSA and NIAAA; the weakness of so-called
translational research is being perceived increasingly
by the various NIH institutes. Over the years, the
membership of RSA has changed in nature from a pre-
dominantly clinical membership to one with a large
component of non-clinical scientists. This also pertains to
NIAAA-funded grants: currently four times more PhDs
than MDs hold NIAAA grants (S. Zakhari, pers. comm.).
It is clear that for our elected officials what counts,
and what drives the funding of research, is the prospect
of successful translation of the basic science research
into clinical applications and prevention strategies. A
challenge for RSA will be to foster such a successful
translation.

At present, RSA has expanded its links with the
public and the media and has joined forces with the

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<th>Table 2 RSA distinguished research awardees</th>
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<tr>
<td>Name</td>
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<tr>
<td>Charles S. Lieber</td>
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<td>Harold Kalant</td>
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<td>David H. Van Thiel</td>
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<td>Jack Mendelson</td>
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<td>Nancy K. Mello</td>
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Alliance project, comprising many organizations, includ-
ing the National Council on Alcoholism and Drug
Dependence (NCADD), the successor to NCA. Hopefully,
one day soon a strong organization will emerge from this
Alliance and again become a valuable ally in our dealings
with governmental agencies and the public. A growing
association is also developing with 'Mothers Against
Intoxicated Driving' (MADD). RSA has also become more
proactive in presenting research and research needs to
the US Congress. Further, RSA recently instituted a
'Journalism Award' to recognize professionals who com-
unicate research findings to the media.

Crossing the millennium: current activities of the
Research Society on Alcoholism

1 Promoting Scientific Exchange at the Annual Meeting
   of RSA (attendance about 1400 in 2000).
2 Society journal: Alcoholism: Clinical and Experimental
   Research (2200 pp/year) (available on the internet from
3 New RSA Lecture Series of biomedical and psycho-
   social areas (18 lectures and 500 slides available on the
   Internet from June 2001: http://www.RSaA.org).
4 Priority recommendation of research areas that
   require new or increased funding.
5 Liaison with government organizations.
6 Presentation of needs and accomplishments to US
   Congress.
7 Liaison with lay organizations.
8 Recognizing research excellence in the field ('Research
   Excellence Award', see Table 2, and 'Young Investigator
   Award').
9 Recognizing outstanding service to the field ('Seixas
   Service Award', see Table 3).
10 Recognizing illuminating presentations of research
    achievements in the media ('Journalism Award').
11 Funding opportunities and advertisements for posi-
    tions in RSA website (http://www.RSaA.org).
Table 3 RSA Seixas awards for service.

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<tr>
<th>Name</th>
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<tr>
<td>James Board/Fenton</td>
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<td>Isaacson</td>
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<td>Marcus Rothschild</td>
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<td>Nancy Day</td>
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<td>Ting-Kai Li</td>
<td>1993</td>
<td>Samir Zakhir</td>
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<td>Kenneth Warren</td>
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Executive: The Society has an elected Executive: President (Yedy Israel). Vice President-President Elect (Stephanie O’Malley), a Secretary (Bob Messing) and Treasurer (Kathy Grant). Past President is Edward P. Riley.

Board: The Society has a Board of Directors (comprised of the Executive plus the elected members, R. Anton, M. E. Charness, D. W. Crabb, H. de Wit, E. I. Ehlers, B. S. McCrady, S. J Nixon, T. Phillips), which along with the President are responsible for policy.

Executive Director: Ms Debra Sharp (debyrsa@bga.com), 4314 Medical Parkway no. 12. Austin Texas, USA. Tel: 78756 3332 (512) 454 0022.

Standing Committees

2001 Meeting Committee: Chairs: Kathryn Gill, Jan Hock and Harold Holder.
Publication Committee: Emanuel Rubin, Chair.
Web-page Committee: Kathy Grant, Chair.
Awards Committee: Ivan Diamond, Chair.
Education Committee: Donna Grul, Chair.
Membership Committee: Susan Barron, Chair.

Finance Committee: Steven Schenker and Michael Miles, Chairs.
Elections Committee: Janice Froehlich, Chair.
Research Priorities Advisory Committee: Ting-Kai Li, Chair.
GAAC Advocacy Subcommittee: Carlton Erickson, Chair.
Nominations Committee: past President, Edward Riley, Chair.

ACKNOWLEDGEMENTS

The authors wish to express their gratitude to Mrs Debby Sharp for her Directorship of RSA for the last 13 years. She has provided the continuity, the skills and the energy that have nurtured the Society into its present state. Our thanks to the National Institute on Alcohol Abuse and Alcoholism which allowed unprecedented growth in alcohol research in the United States in the past decade, leading arms-length to a strong Research Society on Alcoholism.

REFERENCES