**Instructions: before copying,**

* enter you Senator or Representatives name in the [ placeholder ] under “Subject:”
* enter the name of your State in the [ placeholder ] in 1st paragraph following item 2. at beginning
* enter your contact information in the [ placeholders ] at end of letter
* download letter

**Subject:** *HHS Pain Management Best Practices Inter-Agency Task Force*

**[ place Senator or Representative name here ]** –

As I write, the Department of Health and Human Services (HHS) is conducting analysis via the Pain Management Best Practices Inter-Agency Task Force in Washington D.C. (link to testimony below - very concise). The data I present below shows that it is imperative that you ensure:

1. provisions that protect physicians who implement their prescribing duties responsibly are included in any new legislation and
2. those who suffer with documented intractable and chronic illness and resulting pain are provided continued treatment for their illness even when said treatment requires opioid medication. All decisions relating to the appropriate care of a patient must be left to the physician

I am a member of the **[ state name here ]** Don’t Punish Pain organization, a State chapter of the National Don’t Punish Pain organization. I am also a chronic pain patient. We represent millions of intractable chronic pain patients both here in New Hampshire and across the United States.

Within this message I explain my reasons for making the statement above.

***“Opioid Crisis” or “Drug Overdose Crisis”***

In all honesty, what is referred to as the “opioid crisis” is factually a “drug overdose crisis”. Most may not recognize the distinction but there is a glaring one and it is backed up by factual data as well as newly released studies from both the CDC and the FDA. Understanding the difference is critical as it will lead you to focus funding and other resources toward the true root cause of the crisis. To ignore the distinction will result in a waste of funding and resources and ultimately have no positive impact on the crisis whatsoever. With each day, the true story is being revealed. Massachusetts recently passed new legislation providing protection for doctors who practice responsibly as well as for those who suffer with intractable chronic illness and pain for which there is no cure. Nevada has legislation in the works now, proposed by the Nevada State Board of Medical Examiners, that would return decision making relative to prescribing regulations and disciplinary action against physician’s to the Medical Board. You do not want to get caught “sleeping” on this issue.

Unfortunately most social communication, regulations, policies and even legislation “parrot” or are based on information that is now known to be “greatly exaggerated” (as described in the latest CDC report) or flat out incorrect. The propagating of such information results in injury to innocent segments of our communities in the same way an innocent person is injured when an overzealous police department might tailor evidence to point at one suspect in place of performing due diligence relative to the investigatory process.

For example, the Late Show’s host, Stephen Colbert, recently stated on this nationally televised program that “drug overdose is the No. 1 cause of preventable death in the United States, and in 2015, opioids were linked to nearly two-thirds of overdoses". His first claim is factually wrong and the second borders on misinformation at the very least and contributes to the false notion that “prescription” pain medication, which aids in the treatment of millions of intractable chronic pain patients, is at the root of all addiction. The comments of a late night TV show host may not seem to be of much importance, but he, and many others like him in all of media communications, have the attention of millions of viewers who, unfortunately so, form their opinions based on news media and entertainment media. Relative to his comments, the facts are as follows:

***Preventable death:***

* The National Institute on Alcohol Abuse and Alcoholism reports that alcohol causes 88,000 deaths each year. All other drugs combined only cause 30,000 deaths a year.
* The Center for Disease Control and Prevention (CDC) latest reports, as explained by the American Journal of Public Health, that less than 16,000 preventable deaths include prescription opioids as a contributing factor (not the only drug found in toxicology reports). With additional analysis, it is anticipated that a very large percentage of the 16,000 deaths are due to the "misuse of a prescription" or by "obtaining from a friend or relative", (both being illegal means of obtaining prescription pain medication).

The CDC reported in September of 2018 that their initial data, that prescribing guidelines issued in 2016 were based on, was "greatly exaggerated". The CDC's "Enhanced State Opioid Overdose Surveillance (ESOOS)" program documented the latest and most accurate data based on an in-depth study of toxicology reports of 12,000 of those drug overdose deaths (see ESOOS link below). This effort caused for additional focus within the CDC on a more detailed investigation into all overdose deaths.

Before the data, it is important to note that the powers that be have created this false narrative that addiction patients and chronic pain patients are enemies, that to help one group means to hurt the other, that only one group deserves care and only one group’s lives matter. There is simply no reason why we cannot have adequate access to our doctor approved medications while addiction recovery patients also have their own unique treatment. There is no shortage of healthcare and both chronic pain patients and addiction patients deserve adequate, humane health care.

There should absolutely be regulations in place over short term prescriptions meant to help minor injuries. These are the prescriptions that wind up in the wrong hands. Chronic pain patients cannot afford to misuse or misplace their medication because we cannot replace it and we will suffer immensely without it. Data shows that less than 1% of chronic pain patients become addicted to their pain medicines and the vast majority feel no sense of euphoria from their medications. Medical science shows that, at a physiological level, receptors in the human brain, when inundated with pain signals, prioritize “messages” of pain relief over all others.

All that being said, I do not wish to demonize substance abuse patients. I feel for their struggle and at my core I believe we all deserve accessible humane healthcare. The CDC guidelines and new regulations trying to prevent opioids from hitting the streets have not managed to prevent the overdose rates from rising sharply but have created a hell for chronic pain patients who somehow got caught in the crossfire of an epidemic that has nothing to do with us. This is not a general opioid epidemic, this is a drug overdose crisis fueled by heroin and illegal fentanyl. I have plenty of statistics to back this up, in addition to the links provided in this email.

Chronic pain patients are suffering and dying. Statistically, we are at a higher risk of death by suicide than we are at becoming addicted at all. We do not deserve to suffer thanks to an ill-fated attempt at controlling the influx of heroin and illicit fentanyl. We need education, mental health resources, and whatever care we and our doctors choose, both chronic pain patients and addiction recovery patients.

Those in decision making positions relative to policy and legislation need to understand that much more accurate and timely data is now available. Decisions relative to policy and legislation should be made using this more accurate and timely data.

***Links included in this communication-***

* CDC's ESOOS latest findings.
* FDA Commissioner's latest findings.
* Red Lawhern. Engineer, chronic pain research analyst, and patient advocate, presenting before the HHS Pain Management Best Practices Inter-Agency Task Force in Washington DC on September 24/25, 2018. Very brief, but very much to the point.
* Dr. Stephen Zeigler, addiction and chronic pain specialist.
* Huffington Post, "When white lies kill" - straight from the mouths of those fighting their own disease of addiction.

***Link to CDC ESOOS - new and more accurate findings - summarized below -***

https://www.painnewsnetwork.org/stories/2018/8/31/cdc-most-overdoses-involve-illicit-opioids

***“Enhanced State Opioid Overdose Surveillance” (ESOOS) looked into 12,000 overdose deaths from July of 2016 to June of 2017.***

* of the 12000 drug overdose deaths, 59% were due to illicit opioids such as fentanyl and heroin.
* of the 12000 drug overdose deaths, ONLY 2160 were attributed to prescription opioids only.
* evidence of injection use was found in half of all the illicit opioid overdose deaths
* “*findings from this analysis indicates that illicit opioids were a major driver of opioid deaths especially among younger persons and were detected in approximately three of four deaths overall*”. CDC researchers reported in the Morbidity and Mortality Weekly Report.
* Another key finding was the frequent involvement of other drugs in opioid drug overdose deaths.
* The CDC’s warning is now at odds with their own RX awareness program that focuses solely on what the CDC, at that time, described as the stories of people “whose lives were torn apart by prescription opioids”.
* Fentanyl, heroin and other drugs commonly involved in drug overdoses are NOT addressed by the CDC’s Rx Awareness campaign.
* Earlier this year, CDC researchers acknowledged that they overestimated the number of overdoses involving prescription opioids by combining them with deaths attributed to illicit fentanyl and other synthetic opioids. The ESOOS program was launched, in part, to correct that error.
* ESOOS data is considered more reliable because it includes blood toxicology reports, as well as death certificates, medical examiner and coroner reports, death scene investigations, and an overdose victim’s history of substance abuse. A total of 32 states participate in ESOOS.
* VERY IMPORTANT is that the CDC has yet to detail how many of the 2160 overdose deaths attributed to prescription opioids only, were the direct result of chronic pain patients taking their own lives after their meds were either tapered far too much or shut off abruptly due to the CDC reporting false numbers!

***This report is directly from the Commissioner of the FDA -***

https://www.painnewsnetwork.org/stories/2018/8/31/cdc-most-overdoses-involve-illicit-opioids

***FDA Commissioner's report:***

***Excerpts from an article from the News and Media website, “The Hill”, Food and Drug Administration (FDA), in which Commissioner Scott Gottlieb explained:***

* “*Gottlieb cites that the amount of opioids prescribed is at a 15-year low. Yet the preliminary data for 2017 suggests there were a record breaking 72,000 drug-related deaths*.”
* “*There appears to be a disconnect between the amount of opioids prescribed and the number of drug overdoses*.”
* *“In fact, there is an inverse relationship between the two. This leaves an enormous problem.” Gottlieb estimated "that about 9 percent of the parcels shipped into America through nine international mail facilities contain illegal drugs, which includes synthetic opioids like fentanyl*." He plans to increase inspections of packages that are shipped to the United States.
* However, Gottlieb admits that the FDA *“...is not capable of inspecting more than 0.1 percent of the packages they presume contain drugs through the international facilities.*”

***HHS Pain Management Best Practices Inter-Agency Task Force - VERY BRIEF***

https://m.facebook.com/story.php?story\_fbid=2128956320691144&id=100007303904375

***Straight from a physician who deals with those fighting addiction as well as chronic pain patients*** -

https://www.youtube.com/watch?time\_continue=34&v=Ci\_snaj4mkE

***The words of a person fighting the disease of addiction, from the Huffington Post -***

https://www.huffingtonpost.com/entry/when-white-lies-kill-we-need-to-tell-the-truth-about\_us\_5a304403e4b04bd8793e9535?ncid=engmodushpmg00000004

Again, it is imperative that you ensure:

1. provisions that protect physicians who implement their prescribing duties responsibly are included in any new legislation and,
2. those who suffer with documented intractable and chronic illness and resulting pain are provided continued treatment for their illness even when said treatment requires opioid medication.

Thank you for taking the time to read my message. I will look forward with interest as to your input to any new legislation regarding this topic.

Sincerely,

**[ your name here ]**

**[ your address and phone number here ]**