



Monday, July 8, 2019

Megan Brooks

Pain Societies Told to Disclose Financial Ties to Opioid Makers

The US Senate Finance Committee is demanding that pain societies and advocacy groups disclose any and all payments received from opioid manufacturers.

Sen. Chuck Grassley (R-IA), who heads the committee, and Sen. Ron Wyden (D-OR), the minority leader, sent [letters](#) to 10 organizations asking about their financial relationships with opioid makers and other medical entities that manufacture products to treat pain.

"As Chairman and Ranking Member of the Senate Finance Committee, we have a responsibility to ensure transparency and accountability in matters that directly affect Federal healthcare programs and tax-exempt organizations. This responsibility includes examining the extent to which pharmaceutical manufacturers fund tax-exempt organizations and how these payments may influence pain treatment practices and policy," the senators write.

The letters were sent to the American Chronic Pain Association, the American Pain Society, the American Society for Pain Management Nursing, the American Society of Pain Educators, the Center for Practical Bioethics, the Federation of State Medical Boards, the Joint Commission, the American Academy of Physical Medicine and Rehabilitation, the Alliance for Patient Access, and the International Association for the Study of Pain.

The Senate Finance Committee has a long history of investigating pharmaceutical manufacturers and their ties to tax-exempt entities that influence pain treatment practices and policy, the senators point out in their letter.

Sen. Wyden recently identified several individuals and tax-exempt organizations with "significant" financial ties to opioid manufacturers who have been appointed to various federal panels charged with making decisions and recommendations relating to opioid prescribing practices, the letter states.

Accountability Needed

In December 2018, Wyden launched an investigation to examine conflicts within medical advisory boards and asked the Department of Health and Human Services for information relating to "apparent conflicts" within its Pain Management Best Practices Inter-Agency Task Force (Task Force), as well as Task Force members affiliated with the US Pain Foundation and the American Academy of Pain Medicine.

"Based on information from the Centers for Medicare & Medicaid Services' Open Payments database, some members on the Task Force have received tens of thousands of dollars from opioid manufacturers.

"It is imperative that Congress ensure that these organizations and their members are adequately disclosing these conflicts to the Federal government to ensure that their guidance remains objective and transparent to the medical community and to patients," the senators write.

Federal data show that every day in the United States, about 130 people die after overdosing on opioids, including prescription pain relievers, heroin, and synthetic opioids, such as [fentanyl](#).

The total economic burden of prescription opioid misuse alone tops \$78 billion a year. This figure includes the costs of healthcare, lost productivity, [addiction](#) treatment, and criminal justice involvement.

"These figures demonstrate that the US continues to suffer from an opioid epidemic and that taking prescription opioids for an extended period of time or in higher doses increase a patient's risk of [opioid addiction](#), overdose, and death," Grassley and Widen write.

"At the same time, the relationship between opioid manufacturers and non-profit medical organizations remains robust, which calls into question their ability to make impartial recommendations to the medical community and to patients on opioid prescribing practices," they add.

The senators acknowledge in the letter that the answer to the opioid epidemic continues to be "anything but simple. However, we believe that it is important to shed light on these financial relationships to ensure transparency and accountability in matters that affect Federal healthcare programs and the patients that participate in them," they write.

The committee has asked that the requested information be sent by July 29, 2019.

From: Pain Societies Told to Disclose Ties to Opioid Makers

Comments (28) as of July 8, 1:45 pm

M Kielian | Health Business/Administration

Unseal this investigation from May 2012. And while your at it, tell us why it has been sealed and tell us why sealed by Orin Hatch.

[https://www.finance.senate.gov/imo/media/doc/05092012 Baucus Grassley Opioid Investigation Letter to Purdue Pharma.pdf](https://www.finance.senate.gov/imo/media/doc/05092012_Baucus_Grassley_Opioid_Investigation_Letter_to_Purdue_Pharma.pdf)

Debra Nolasname | Health Business/Administration

When is Congress as a whole going to admit they failed to rid the US of illegal drugs? This is, and remains, the real numbers behind the ODs and addiction along with millions of federal funds up for grabs. To say it started with 'parents meds' is a false narrative in 90% of cases.

I'd like to know who exactly is supporting these Senators?

The 'Addiction Specialists' and 'Treatment Facilities' are the ones to gain from this whole effort! They are after federal tax dollars up for grabs. Never forget what's behind this as a whole. Follow the money and don't believe all the propaganda produced by these groups. Why isn't this more clearly recognized and commented about?

They are self proclaimed specialists in pain? Really? Kolinsky and cohorts have never treated a true pain patient, only addicts, so how dare he go after a federal funding by throwing critically ill, terminal ill, and veterans under the bus?

Our nation is suffering more from alcohol than prescription opioids! Verify the numbers!

Dr. Richard Free | General Practice

What percentage of Anesthesiologists are dedicated pain management specialists ?

Rene Neville | Nurse Practitioner (NP)

If the specialty societies disband, they don't have to disclose Anything! The Right to Remain Silent is sacrosanct...

Paul Tierney | Other Healthcare Provider

I'm not a legal expert, but my impression is that the right to not incriminate oneself pertains to individuals, not to organizations or corporations. More interesting is your response to the request for disclosure of possible conflicts of interest.

Rene Neville | Nurse Practitioner (NP)

@Paul Tierney: If the Federal Government can force privately funded organizations to disclose information, what do you imagine their Next Step will be?

There are far too many other issues that Congress should focus on, rather than the current witch hunt.

M Kielian | Health Business/Administration

How about we get the US Senate Finance Committee Investigation of the same associations, societies, the JCAHO and others from May 2012 released? It has been sealed from the public by Orin Hatch. Why? That would make more sense and some more truth would be revealed.

Linda Webb | Other Healthcare Provider

I want the names of the people and the groups who are involved. This looks like another broad brush stroke to deal with opioid disorders that have nothing to do with people who have been legitimately using pain medication to function in their everyday lives. Grassley and Widen??? Please.

Dr. John Swicegood MD | Pain Management

Curious, does anyone know what a "pain doctor" is? I think the simple answer is that all of us are, or should be- that is, all caregivers should know and understand pain, and the duty to be able to treat pain- within their scope of practice. Opiates were essentially distributed by cash "pain clinics", driven by greed, reprobates who found it much easier to distribute drugs than to practice honest medicine. The fault of everyone else- was to refer our patients to "pain clinics", directly or indirectly, or to deny pain care altogether, fueling pill mills, of course staffed with weak to absent credentiaing of pain credentials- distorting those physicians who had spent years in fellowship pain care training, and actually tried to avoid substance use/misuse, illicit use, etc. Were their exceptions and bad players in this group? Of course, but not to the extent that is being portrayed. Our problem is a sick culture, riddled with substance abuse, of which contentment is found demonizing all physicians, thus allowing the crumbling of credentialing, and looking to the Federal government, who created this problem, to give us another solution (ie another problem).

Joerg Pirl | Other Healthcare Provider

A friend and neighbor, I have been counseling for for several years. I watched him slowly escaping from the "pain management" cycle. Finally after a long time he changed and came to me totally elated and relieved. He said: "and all of these years I thought I was sick and now I realize that I have been an addict. I have been off narcotics for three weeks and I am feeling better." It's now been one year and, after 20 years, he is working again and holding a job. His "physician" should be prosecuted.

Dr. Matthew Klein | Pathology

Fantastic! I for one am sick and tired of 'Pain Management' physicians making patients feel like druggies for wanting to use cannabis and NOT opioids. What ludicrous hypocrisy among these folks.

Jason Brusky | Registered Nurse (RN)

This is a witch hunt! Do the other specialty societies disclose financial ties to the drug makers for the products their constituents are using? How about our congressmen and policy makers disclose their financial ties?

Dr. Pamela Wilson | Anesthesiology

WHAT ABSOLUTE HYPOCRISY.

Margaret Blank | Other Healthcare Provider

I want to know how the states that regulate pain medication can pass a law that a patient has to go to a pain management clinic that allows a higher than normal copayment. So now a pain medication costs \$100.00 copayment to the physician, and then to fill a monthly prescription is the normal copayment. A primary physician is \$20.00. Its a scam! To bad the patient with long term pain that has been managed for 20 years now has to pay four times as much to receive what works for thier condition!

Shae' Slonsky | Health Business/Administration

It is disgusting for any patient who already is targeted and therefore branded. The pain Management doctor's most often graduate these patient's to more highly addictive opioids and know that they are a standing order for money= a salary. The pain facilities definitely harrass patient's into unnecessary procedure's that cost more as a one-time occurrence and if they don't comply they threaten them with medication.

The THC/ Cannabinoids are and have indicatively been proven to cure even terminal Lung and Brain Cancer. Nixon, who was in bed with the pharmaceutical companies and federal government had known it was a cure. Nixon got a report on his desk about the efficacy of Cannabis and it verified there was no risk to patient's directly. He got pissed and actually threw away the report and made it illegal to research online unless you were a pharmaceutical company!

Since there is "No Paton on Marijuana the pharmaceutical companies are going to loose billions of dollars because they can't poison the patient's directly and knowingly. Shame on the pharmaceutical companies and their shit policies.

Fact, the United States has more pharmaceutical companies than any other country. The United States charges more for prescription medication than any other country. In Connecticut there are 100 pharmaceutical companies who manufacture medications.

Everyone deserves to make a profit, but not create death to many patient's and market the most vulnerable with "untrue facts" based off of just a few patient's. All the while setting the tone that a particular drug is going to extend a person's life!

Great example is Keytruda. The average client died but there were components simulating that if you have been diagnosed with terminal lung or brain cancer that it would extend their lives. Not true. If you research ALL CLINICAL TRIAL'S were halted in December of 2018. Those that had multiple myeloma would surely die because of the P1 blocker's in conjunction with the thialomines.

Rene Neville | Nurse Practitioner (NP)

So now cannabis can CURE brain and lung cancer you say?

How extraordinary! We would all like to know what dosages and length of therapy should be for this CURE.

Can't figure why any of the old tokers got sick in the first place if this is true...

Suzanne Knighten | Registered Nurse (RN)

Yes! Why is this being kept a secret from oncologists?

T. Braun | Pharmacist

So what else is new? The pharmaceutical manufacturers control the FDA. If they were objective and independent They would be stopping the contaminated drugs company in from India.

Shae' Slonsky | Health Business/Administration

It's because they legally are not culpable and only the doctor's and pharmacist is. So infuriating because we go by their recommendation and studies.

Steve Irsfeld | Pharmacist

They might also consider looking into foundations that help pay for co-pays of specialty drugs. Patients are not going to pay a \$1000 copay so the foundation kicks in and pays for it. I wonder who funds the foundations??? They won't tell you cause i have tried to find out. The only way to keep the price elevated is to fund the back side same way with patient coupons for just about every brand name drug. Just another reason the cost of prescription drugs continues to go through the roof. Unfortunately no co-pay = patient complacency. Why would i start to exercise and eat right when i don't have to pay anything for my diabetes medications. Nanny state in healthcare.

Rene Neville | Nurse Practitioner (NP)

Foundations are made up of evil rich people like Bill Gates, didn't you know?

THOMAS McCLOSKEY | Pharmacist

Capitalism at its finest. Scott Gottlieb is now working for Pfizer on their board making millions. Draining the swamp really working for us, right? How's that MAGA thing going. I am really looking forward to the tanks rolling through Washington D.C. for a celebration of our freedoms and protection of oppression and greed.

Rene Neville | Nurse Practitioner (NP)

@THOMAS McCLOSKEY: How strongly did the Pharmacy profession stand up to the bureaucrats when they created the 'opioid epidemic' back in 2014? Or any other Medical groups for that matter?

Do NOT gripe about oppression and greed if you still think that the Federal Government is a big teat from which all blessings flow while pushing the sheep aside.

It is not possible to drain a swamp when the same beavers keep building dams.

You must remove them (like, Vote them OUT! and push for Term Limits!) or the whole effort is destined to fail.

Michael Breton | Other Healthcare Provider

@THOMAS McCLOSKEY Yup. No problems at all until January of 2017. Nope, not one.

Daniel Long | Pharmacist

The Senate and Congress should apply the same measures to themselves. But pretty sure full disclosure from one and all is not the solution to the opiate crisis.

Leslie Dixon | Pharmacist

@Daniel Long: Agreed, but specialty societies create best practice guidelines, which over time become the standard of care and drive insurance coverage. Private funding of guideline development can influence guideline recommendations. This is part of how the opioid crisis evolved, and I see it as an important step to learn from the mistakes of the past.