

# The Real Facts Behind the “Opioid Crisis” and the Abandonment of Pain Patients:

(updated: 1-4-2019)

- 2012 - Andrew Kolodny and Physicians for Responsible Opioid Prescribing - PROP ( mostly addiction specialists with little experience treating pain with opioids) petitioned the FDA to change opioid manufacturing guidelines for patients with non-cancer pain, asking FDA to limit dosing to 100 MED and limit treatment to 90 days. FDA denied this request in 2013 due to a lack of scientific evidence to support limiting usage or dosage and no evidence to suggest cancer pain is different from non-cancer pain. Most patients treated with opioids on higher doses and long term treatment do well and live productive lives without addiction or death.
- 2014 - Illicit fentanyl added to other illicitly manufactured drugs such as heroin, hydrocodone, xanax, etc. Addicts buy their drug of choice on the street not realizing it has fentanyl in it. Fentanyl is 50-100 times stronger than morphine. Addicts began dying in mass quantities catching the attention of the media and the government.
- Thinking the increase in deaths were from prescription opioids, DEA stepped up enforcement on doctors and pharmacies, threatening and prosecuting doctors for "over prescribing" opioids to pain patients.
- CDC published the 2016 opioid death report which falsely implied pain patients were addicted and dying in massive numbers even though historically pain patients are rarely addicted or involved in opioid-related deaths.
- CDC contracted with members from the anti-drug lobbying group PROP to help draft CDC guidelines for opioid prescriptions written by primary care physicians even though CDC and PROP knew that illicitly manufactured fentanyl and heroin was the cause of the deaths. CDC Guidelines were implemented by the states as rule rather than guidelines as originally intended, forcing pain patients off their medication or to a lower, non-therapeutic dosage. This was done in spite of CDC having no prescription regulatory power and FDA already telling PROP there is no scientific evidence to suggest these limitations are necessary or useful.
- Pharmacies and insurance companies began limiting opioid quantities and/or refusing to fill opioid prescriptions based on perceived addiction bias against patients with pain from all causes, including cancer due to media/government misinformation, namely the original 2016 CDC opioid death report and guidelines.
- FDA cut production of opioids creating shortages and leaving many hospitals, cancer patients, and pain patients without medication to treat pain.
- In 2018, CDC finally issued a correction for the 2016 opioid death report admitting that the majority of the deaths were from illicit fentanyl and heroin, not legal prescription pain pills. CDC and National Institute on Drug Abuse (NIDA) concede pain patients are almost never involved in opioid-related deaths. According to SAMHSA 2016 and similar studies the addiction rate for pain patients is less than 1%. That means 99% do not get addicted.
- Regulators ignore CDC corrections, continue threatening doctors and targeting patients. Many doctors stopped treating pain patients and closed practice due to fear of losing license or being prosecuted. Millions of patients are abandoned leaving them to suffer in agony with no medical support. Many committed suicide.
- Late 2018 - American Medical Association (AMA) supports patients/doctors, states CDC guidelines well-intentioned but should not limit physician prescribing, misapplication is harming patients. HHS Pain Management Task Force assigned to address opioid policy gaps discourages physicians from using arbitrarily defined MME's and dosing limits on chronic pain management as CDC recommended, instead promotes utilizing established and measurable goals such as functionality, activities of daily living, and quality of life measures. Dosing should be based on individual patient needs. Regulators ignore statements, continue harmful policies.
- 2019 - CMS implements new policy for Medicare and Medicaid based on CDC guidelines in spite of AMA and HHS warnings that the CDC guidelines are medically inappropriate for many patients. The war on pain continues.

**Pain patients and providers need your support! Please call your state and federal legislators, the Medical Board of California, DEA, FDA, CMS, and media and tell them to protect pain patients and their doctors from unfair discrimination. Tell the DEA to leave our doctors alone! Tell them to remove the CDC guidelines and allow access to opioid treatment as allowed by the manufacturer's guidelines. Spread the word!**



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[dontpunishpainrally.com](http://dontpunishpainrally.com)  
[dontpunishpainrally.com/docs/](http://dontpunishpainrally.com/docs/)

## **Resources**

### **FDA Refuses PROP's Request To Limit Opioid Dosage and Usage**

[http://paindr.com/wp-content/uploads/2013/09/FDA\\_CDOR\\_Response\\_to\\_Physicians\\_for\\_Responsible\\_Opioid\\_Prescribing\\_Partial\\_Petition\\_Approval\\_and\\_Denial.pdf](http://paindr.com/wp-content/uploads/2013/09/FDA_CDOR_Response_to_Physicians_for_Responsible_Opioid_Prescribing_Partial_Petition_Approval_and_Denial.pdf)  
[https://www.huffingtonpost.ca/marvin-ross/doctors-evidence-pain-patients\\_a\\_23371118/](https://www.huffingtonpost.ca/marvin-ross/doctors-evidence-pain-patients_a_23371118/)

### **PROP Involved in Drafting CDC Guidelines**

<https://www.painnewsnetwork.org/stories/2015/9/21/prop-helped-draft-cdc-opioid-guidelines>  
<http://nationalpainreport.com/cdc-opioid-prescribing-guideline-unintentional-consequences-8836710.html>

### **Illicit Fentanyl on the Rise**

<https://www.cdc.gov/drugoverdose/images/pbss/CDC-Fentanyl-overdoses-rise.pdf>  
<https://www.drugabuse.gov/related-topics/trends-statistics/overdose-death-rates>

### **CDC Admits Death Data Inaccurate**

<https://ajph.aphapublications.org/doi/10.2105/AJPH.2017.304265>  
<http://www.clinicalpainadvisor.com/opioid-addiction/the-issues-with-the-cdc-guidelines-on-opioids-for-chronic-pain/article/524976/>

### **Pain Reliever Use Disorder - SAMHSA**

<https://www.samhsa.gov/data/sites/default/files/NSDUH-FFR1-2016/NSDUH-FFR1-2016.htm#opioid4>

### **Cochran Report - Rate of Addiction Rare**

[https://www.cochrane.org/CD006605/SYMPT\\_opioids-long-term-treatment-noncancer-pain](https://www.cochrane.org/CD006605/SYMPT_opioids-long-term-treatment-noncancer-pain)

### **Living with CDC Opioid Guidelines**

<https://www.practicalpainmanagement.com/treatments/pharmacological/opioids/living-cdc-opioid-guidelines>  
<https://www.practicalpainmanagement.com/treatments/pharmacological/opioids/inhumane-dangerous-game-forced-opioid-reduction>

### **The Myth That Prescriptions Caused The Opioid Crisis**

<https://amp-newsobserver-com.cdn.ampproject.org/c/amp.newsobserver.com/opinion/op-ed/article145348794.html>

### **HHS Pain Management Task Force Recommendations - Draft Published 12-28-2018**

[https://www.hhs.gov/ash/advisory-committees/pain/reports/2018-12-draft-report-on-updates-gaps-inconsistencies-recommendations/index.html?fbclid=IwAR2m0h8WXY-PZIDRd6hort3qOW8u2ckBxZK16nD\\_vhU\\_c33SiqFi2ISiRw4#4-review-cdc](https://www.hhs.gov/ash/advisory-committees/pain/reports/2018-12-draft-report-on-updates-gaps-inconsistencies-recommendations/index.html?fbclid=IwAR2m0h8WXY-PZIDRd6hort3qOW8u2ckBxZK16nD_vhU_c33SiqFi2ISiRw4#4-review-cdc)

### **Human Rights Watch Report:**

<https://www.hrw.org/report/2018/12/18/not-allowed-be-compassionate/chronic-pain-overdose-crisis-and-unintended-harms-us>

### **AMA Resolution 235 - Inappropriate Use of CDC Guidelines for Opioid Prescribing (pg. 24 of 40)**

<https://www.ama-assn.org/system/files/2018-11/i18-refcomm-b-annotated.pdf>