



We have all heard by now about the opiate crisis

By [Melanie Mills](#)

December 3, 2017



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We have all heard by now about the opiate crisis. We know about the senseless deaths and overdoses. Many young people are dead and their families are left to wonder why? Why my child, my sister, my dad? There are as many questions as there are answers, but I'm going to tell you a few statistics and I'm going to tell you about the other side of this story – the silent epidemic, the one about the chronic pain patient population and how their lives are quite literally being ripped apart.

By NIH estimates, 100 million people in the United States live in chronic pain and 1.5 billion live with chronic pain worldwide. Chronic pain is the number one cause of disability in the United States. Productivity lost due to chronic pain is \$299-\$325 billion annually. Chronic pain affects more Americans than diabetes, cancer, and heart disease combined, yet we are seeing the government wage a war on essential medications for chronic pain patients. What would people think if the government decided to withhold insulin for diabetics or heart medications for heart patients? There would be a total outrage. These medications are demonized, however, because people are overdosing, and quite frankly there is no standardization for these medications, nor is there a standard of care. Let's get to the nitty gritty.

Tom, for example, has stage 4 prostate cancer (name changed for privacy). He is only allotted 3 5mg Vicodin a day (which is barbaric), because heaven forbid it should get on the street. Yes I'm being quite sarcastic, but that small amount of medication in an opiate *dependent* or *tolerant* drug user is not going to cause an overdose. Now let's look at the real problem, fentanyl and heroin-laced fentanyl hitting the streets from China coming in through Canada & Mexico. In Nebraska about 6 months ago, a man was arrested with enough fentanyl to kill 5 million people that was seized on him. Usually, to stretch heroin, it is cut with fentanyl, and with the 2 drugs combined you get a speedball. When this is injected, people have rapid effects such as respiratory and heart failure.

Now let's take a look at the typical chronic pain patient. First of all, a narcotic pain contract must be signed. At every visit, urine or saliva and even hair are collected to make sure they are taking the medications prescribed, that the right amount of meds & metabolites are in the bloodstream (so no diversion is taking place) & there are also pill counts. That's a lot to keep up with when you're ill to begin with. This is setting up a dangerous protocol in the doctor/patient relationship. It states "jump through these hoops and until you do, I don't trust you." Can you think of anywhere else in the medical industry patients have to *prove* they are innocent to get care? I can't, and as a former RN I think it's discriminatory & demeaning. What did they do wrong but get ill or have a chronic condition, that's all.

To make things worse, people are being weaned down off their meds, or kicked off cold turkey. Doctors are running scared because the DEA is breathing down their necks. Insurance companies are only allowing a certain number of pills per month and this is being delegated by some insurance bureaucrat sitting in a posh office delegating and relegating who gets what, when and why. That takes the power from the doctor and throws the doctor/patient relationship straight out the door. Susie may have migraines and need butalbital PRN (as needed), but Dan may have been in a motorcycle accident and need 60mg oxycontin every 12 hours. Well the insurance companies are starting to balk if a doctor feels he may need more, as most chronic pain patients do for "breakthrough" pain. Then they require special forms from the doctor. The insurance companies are also denying patients more than 90mg ME (morphine equivalent) per day. That can also vary from state to state and even county to county. Another thing varying state to state is medical marijuana and kratom. You can have mm in Colorado, but it's illegal in Missouri. You can have kratom in Missouri, but forget it if you live in Arkansas. Are you beginning to see the conundrum this has become? America is going to have to consider some radical choices and make some big decisions soon or more will die from overdose and from suicide. If you take medication away from someone who is tolerant and dependent, they may become suicidal. Our healthcare system is already in crisis. This has the potential to become a financial fiasco as well.

If you are under 30, forget getting true pain relief, you are automatically seen as a "drug seeker" even if you're truly sick. It's beyond my comprehension the absolute discrimination that happens to patients because they need an opiate for relief. I saw it with my own two eyes when I was an RN. "Oh, they're just wanting that drug" and the patient literally has a medical record a mile wide. There's so much stigma against opiates, and it really needs to change. Why, you may ask? What happens when your teen breaks their knuckles and the most recent studies show 500mg of tylenol will do just as well as a 5mg Vicodin, or when you come in after a motor vehicle accident and you are given 1000mg of ibuprophen? You think I'm exaggerating, look it up on the internet. This opiate panic has got to stop. People are actually dying because they got kicked off cold turkey and had pre-existing illnesses like hypertension and end up having a heart attack because of withdrawal that wasn't treated properly. Taking an elderly person off cold turkey, that's just evil and it can kill them.

Obviously, this problem will get worse before it gets better, but the least the DEA and the medical community can do is develop a standard of care, and I'm not talking a one size fits all model, which they so often do. Bodies and medicine are NOT the law, they vary. You must consider the variables. Height, weight, male & female etc. Something must be done. People with real medical conditions are suffering because the DEA is bloodthirsty hunting down addicts and browbeating doctors. How about this for a revolutionary solution: give those who are ill with medical problems their meds and start treating addicts like they should be treated, people with a disease who need help and give it to them. Go after the cartels bringing in the heroin and fentanyl, instead of making criminals out of chronic pain patients and addicts, and then just maybe we will see the change we all so desperately want and need. Until then, pray you don't get seriously ill, because if someone stabs you in the abdomen, extra strength tylenol may be all you will get in the ER because the latest study shows NSAIDs work as well as opiates. I don't want to have to find that out the hard way, how about you?

People ask, well how do you know? I've been on both sides of the bedrail, that's how. I was an RN in the top 10th of my nursing class, but I also had endometriosis at age 15. I was also trained in research at the university I attended. I also understand that depression and alcohol use is up in pre-teens & teens, and so is the suicide rate. I used to be a psychiatric nurse and I used to help people my age 20 years ago come off heroin after rapid opiate detox. I have also had to take chemo and opiates due to many health complications. I also am part of chronic patient support groups on Facebook because even close family such as my own mother didn't believe my pain was real until after they pulled out the bladder sling that implanted itself in me &

caused scar tissue and painful adhesions I can never get rid of. Chronic pain patients are being yanked off highly addictive medications because the doctors are getting scared, but this is either going to create new addicts, people with chronic pain turning to alternatives such as medical marijuana, or we will have a surge in mid-life to elderly suicides. We may see an increase in all. Is America really ready to deal with what in many ways the government allowed Big Pharma to do: create a nation addicted on opiates, psychotropics, anxiolytics, and other medications? Are we ready to take a deep long look in the mirror? Are we ready to consider alternatives and look at our environment? Why is autism up and other chronic diseases, and why are we seeing new diseases we have never seen? Are we ready to understand much of our food, water, and air have been literally poisoned? Enter Flint Michigan.

America is the great & beautiful, but we have much work to do before we are restored and America is truly renewed. We have so much work to do. All drug use is up, all addiction is up and it is up in all ages – well why? People are stressed out now more than ever before, and our mental health system is not adequate enough to deal with it. It wasn't adequate to deal with it when I was a registered nurse in Behavioral Medicine 20 years ago. We have problems, big ones. We must face reality head on and get back to the values that made this country great, hope, charity etc. or we will continue to see the tsunami we are seeing in addiction, abuse and soon to be suicide. Please America wake up and take a look in the mirror. Let's get a grip and treat each group as they deserve to be treated, not what we assign a label or monetary value to. A life is precious and priceless and cannot be replaced once extinguished. America, let's pull together, not apart.

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