

# Doctors and Legislators: Listen to Patients, Not the CDC



By Richard "Red" Lawhern — January 24, 2017



Next Time You're Suffering, Thank The CDC

It is now impossible not to see that a revolution of awareness is underway in America: awareness of pain; and that the US government is lying to its own citizens by claiming a greatly exaggerated relationship between pain and prescription opioid addiction. Sadly, there are far too many examples of the damage done. Let's look at an especially poignant one—a recent article in STAT (an online medical newsletter produced by Boston Globe Media), which informs us that “a ‘civil war’ over painkillers rips apart the medical community — and leaves patients in fear”

As interesting as the article itself are comments from readers, many of whom are pain patients. The majority can be characterized as “...mad as hell and we're not going to take it any more...” (to quote from the 1976 movie *Network*). They are collectively, the tip of an iceberg of over 100 million chronic pain patients in America. Politicians have largely ignored these people, but will now do so at their own peril.

One comment by a woman who names herself “Donna J” is particularly telling in its scope and precision. Donna's critique gets right to the heart of the matter. CDC bureaucrats and the legislators who oversee them really ought to pay attention.

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“There is something seriously wrong in this country when we decide that the entire medical and legal communities must be all about coddling, babysitting, and protecting criminals. PROPaganda ... [PROP = “Physicians for Responsible Opioid Prescription”, a professional group deeply hated by large numbers of pain patients]... has confused and conflated two different medical issues,

chronic pain and drug addiction, as well as padding the numbers by equating prescription medication with illicit heroin and fentanyl... To top it off, they deliberately throw together addiction, dependence, and tolerance as if [they're] all the same. It's bad enough [that] this ignorance is forced to the average citizen, but the medical community blithely goes along with this charade and abandons and destroys patients who are in desperate need of care.

"How about some of you actually use [your] brains and education? There is no such thing as "hyperalgesia." Instead of taking the word of rehab industry stooges, you might want to check with, oh let's see... how about pain management doctors and nurses? Millions of patients have been on stable regimens for years. How did that happen when "we all know" that's impossible, what with all of us needing increasing doses to oblivion and back due to tolerance?

I've been on opioids for 12 years, still not an addict, still passing urine analyses, pill counts, compliant and cooperative. But I'm the one who isn't allowed HIPAA privacy and must sign away my rights... [I'm] not allowed to participate in treatment decisions, just do as I'm told; not given any trust or respect, and ... treated like a criminal.

"Instead, I [am forced] to do a trial of off-label drugs -- who cares if I'm injured. Lyrica gave me permanent high blood pressure and edema. I must now take lisinopril hydrochlorothiazide every day. Thanks Jane Ballantyne! You ass. I was also "addicted" to Cymbalta... I had severe withdrawals when my doctor weaned me off when it didn't work. Oh wait, that's "dependence" -- you know, like how many chronic pain patients are dependent on their opioids BUT NOT ADDICTED? PROP conflates the two, [to] fill those rehab beds! Thanks Andrew Kolodny! You ass.

"NSAIDS kill 16,000 a year due to gastrointestinal events. No one is apparently concerned with that epidemic. And we aren't even counting the deaths due to cardiac or renal events. No need for panic and hysteria because at least no junkies died. But PROPsters think I ought to be happy with their advice to take NSAIDS regularly and think happy thoughts -- while billing me \$200 per office visit for a chance at unremitting pain while vomiting blood due to ulcers.

"...Now they're talking free Naloxone. But where are free Epipens to kids who may die from a peanut allergy? Why must we coddle drug addicts who are [assigned] zero responsibility for their own situation, who refuse treatment until they are arrested and then go to a place like PROP's Phoenix House for a chance at a 5% cure rate? These folks will be shooting up again... as soon as they are off the premises. [But there is] lots of money to be made in their revolving door industry....

"Many online and mainstream media don't want to look at these clowns' biases. I'd love to see a news item about the dismal success rates [in addiction treatment]. They're clueless about addicts, whom they supposedly treat -- but now they are experts on chronic pain that most of them have never treated? But the media just repeat [whatever] PROP says -- "anyone who prescribes opioids must be biased by Big Pharma!" No way there could be actual medical professionals and patients who know what works for their patients or themselves.

"What is wrong with this picture? The CDC's advisers on Chronic Pain were greedy rehab industry insiders, [who] don't even know what to do with their own addict clients. But they sure are looking forward to that rehab gravy train coming from Congress. Anyone who had expertise or an

informed opinion about chronic pain was shut out [of the CDC Guidelines process]. Is the CDC next going to convene a panel of Podiatrists to inform them about fetal development? Maybe some Dermatologists to advise on pulmonary embolisms?

“There are two sides to the [chronic pain] story. The most biased, ignorant, useless side is getting all the ink and attention. Pain management professionals who successfully treat their patients just [aren’t] sexy enough for the news industry, nor their fellow medical professionals, apparently. “

Donna J is obviously bitter. She is also factually correct. This edited extract is used with her permission.

The evidence is conclusive. CDC guidelines for prescription of opioids to adults with chronic pain were written by a group of consultants who were unduly influenced by anti-opioid advocates, addiction treatment professionals and PROP. The writers cherry-picked study data to intentionally exclude anything positive concerning success rates or low risks attending the management of chronic pain with prescription opioids. The resulting guidelines are being incorporated into highly restrictive State laws that utterly mischaracterize the causes of the so-called “epidemic” of opioid overdose deaths. As a result, physicians are leaving pain management practice in droves, deserting their patients and driving some of them into the streets for illicit drugs. Others have committed suicide, overwhelmed by agony.

How long will it take our government to wake up and smell the coffee? It is time to withdraw and rewrite the CDC opioid guidelines in a group led by pain management specialists and patients themselves. It is time to stop the war against chronic pain patients!

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