

The Opioid Misinformation Epidemic



By Iris Erlingsdóttir — January 29, 2019



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It is a sad commentary on American journalism that most news stories on the illicit fentanyl epidemic begin like the missives from the Centers for Disease Control and Prevention (CDC) disinformation agency: “*Drug overdoses killed 63,632 Americans in 2016.*”

The CDC would like you to think that 63,632 Americans were killed by opioid prescription medicine overdoses in 2016 (and 72,000 in 2017). **They were not** [1]. But because the media neglect to do their homework, Americans don’t know that these numbers refer to overdose deaths from **all drugs**, including aspirin, acetaminophen, antidepressants, and cocaine.

“*Nearly two-thirds of these deaths (66%) involved a prescription or illicit opioid.*” The CDC omits informing us how many prescriptions were “involved.” Five? Five thousand? Fifty thousand? Instead, the agency disingenuously feeds us a diet of “opioids, overdoses, abuse, addiction, and death,” with a side of the word “prescription,” carefully avoiding Drug Enforcement Administration (DEA) and its own reports stating that “*DEA has **not reported** [2]...increase in pharmaceutical fentanyl being diverted from legitimate medical use...*” Most “***fentanyl-related overdose deaths** [3] reported to DEA...were attributable to illicitly-manufactured fentanyl—not diverted pharmaceutical fentanyl...*”

For dramatic effect, the CDC likes to add embellishments to the gruesome death toll, “*higher than the peak yearly death totals from HIV, car crashes, or gun deaths.*” Unsexy **smoking** [4], the nation’s “*leading cause of preventable disease, disability, and death,*” claiming 480,000 lives annually, never makes it onto this captivating killer list of sex, cars, pistols, and pain meds.

Opioid prescription medications, however, don’t quite live up to their lethal-killer reputation. According to the National Institutes of Health (NIH), from 2002–2016 prescription pain medicines **resulted in deaths**

[5] ranging from 9,000–19,000, the latter figure about half the number of annual deaths by [accidental falls](#) [6]. (“Is there an ‘accidental fall epidemic? [Why not?](#)”) [1] These numbers don’t take into account that opioid overdose deaths are usually the result of polypharmacy. When the other drugs, especially alcohol, are included, it can reasonably be [assumed](#) [1] that overdose deaths from prescription pain medicines alone will be much lower.

It’s a well-established fact that the ever-increasing overdose deaths are caused by illicit fentanyl, not prescription opioids. Yet the urgent appeal in [CDC and DEA reports](#) [2] to policymakers that “*law enforcement strategies to reduce the illicit opioid supply must...be supported*” continues to be soundly ignored.

One would be hard pressed to think up more misguided strategies than the ones the US government has manufactured in its War on the Opioid “Epidemic.” *Strategy One*: Turn a blind eye to the incoming flow of Mexican and Chinese fentanyl; send doctors to prescription jail, and pain patients to the torturer’s dungeon. This accomplished gives us a *worse* crisis in the form of tens of thousands of dead and dying drug addicts *and* tormented pain patients (whom the government is content to let suffer in silence). Not to mention, “*continued increase* [7] *in...supply of [illicit] fentanyl*” because government agents are too busy shrinking the licit opioid supply (of which there is a shortage in the nation’s hospitals).

This crisis aided and abetted by *Strategy One* cries out for taxpayer money and action, and in the time-honored government tradition and belief that if enough money is thrown at a problem something will stick, ill-advised policymakers produce *Strategy Two*, which includes \$1 billion for a “solution” that Bankole A. Johnson, chairman of the department of psychiatry at the University of Maryland School of Medicine wrote in a [Washington Post commentary](#) [8] that “*we’re addicted to,*” *but unfortunately “doesn’t even work”*. The \$35 billion annual industry of Rehab.

“*There’s no such thing as an evidence-based rehab,*” [Dr. Mark Willenbring](#) [9], addiction psychiatrist, former director of treatment and recovery research at the National Institute on Alcohol Abuse and Alcoholism, and the founder of [Alltyr](#) [9] in St. Paul, Minnesota. “*That’s because no matter what you do, the whole concept of rehab is flawed and unsupported by evidence.*”

What *is* and is considered the standard of care by most addiction experts worldwide, and what the [World Health Organization](#) [10] described in 2009 as “*minimal requirements* [10]” in the treatment of opioid dependence—treatment with buprenorphine or methadone for withdrawal and maintenance management—is provided in only [one-third](#) [11] of US addiction treatment programs.

One would think that \$1 trillion and four decades of futile drug warring—and 74,000 illicit fentanyl and heroin overdose deaths in just over two years—would have alerted policymakers that something is flawed with America’s “war on drugs” in general and the illicit fentanyl crisis strategy in particular.

But one would be wrong. States and Congress don’t even have the enemy in their sights but focus on “*reducing medical prescriptions of opioids*” and [throwing taxpayer money](#) [12] at “solutions” that wouldn’t be considered acceptable treatments in any other areas of medicine.

Predictably, we have no results, only more misery, and another monster: The opioid

misinformation epidemic. Spread by CDC misinformation and irresponsible and sloppy journalism, it has harmed innocent people, translated into horrible policies and is the main reason no solutions exist to solve this devastating problem.

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Links

[1] <https://www.acsh.org/news/2017/10/12/opioid-epidemic-6-charts-designed-deceive-you-11935>

[2] <https://www.cdc.gov/mmwr/volumes/65/wr/mm6533a2.htm>

[3] <https://emergency.cdc.gov/han/han00384.asp>

[4] https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm

[5] <https://www.drugabuse.gov/related-topics/trends-statistics/overdose-death-rates>

[6] <https://www.cdc.gov/nchs/fastats/accidental-injury.htm>

[7] <https://www.cdc.gov/mmwr/volumes/67/wr/mm6727a4.htm>

[8] http://www.washingtonpost.com/wp-dyn/content/article/2010/08/06/AR2010080602660_2.html

[9] <https://alltyr.com/dr-w/>

[10]

<https://books.google.com/books?hl=en&lr=&id=yKV6i3ZK86kC&oi=fnd&pg=PP2&dq=treatment>

[11] https://www.samhsa.gov/data/sites/default/files/2016_NSSATS.pdf

[12] <https://www.nytimes.com/2018/06/20/upshot/congress-is-writing-lots-of-opioid-bills-but-which-ones-will-actually-help.html>