Chronic pain affects millions of Americans. Perhaps someone you know.

In September 2018, we reported on data from the CDC about the prevalence of chronic pain. The numbers are staggering. About 20 million people suffer from high-impact chronic pain, which was defined as "limiting life or work activities on most days or every day in the past 6 months."

For many chronic pain patients, opioids are the only drugs powerful enough to provide relief. Given the ongoing opioid crisis, it is laudable that doctors and public health officials are concerned about whether we are over-prescribing these powerful drugs or if there is a better, less risky way to treat chronic pain patients. That's a conversation worth having.

A conversation that is not worth having is one in which facts are replaced by destructive myths, such as the erroneous beliefs that the opioid crisis is the fault of irresponsible doctors, greedy pharmaceutical companies, or addicted pain patients. Yet, "advocates" like Andrew Kolodny are doing just that, and getting filthy rich in the process.

Andrew Kolodny Says Chronic Pain Patients Are PR Pawns for Big Pharma

For the uninitiated, Andrew Kolodny is a self-appointed opioid regulator. His organization, Physicians for Responsible Opioid Prescribing (PROP), was largely responsible for a disastrous policy implemented by the CDC which ultimately made doctors afraid of prescribing opioids to chronic pain patients who needed them.

Worse, despite the restriction on opioid prescriptions, opioid overdose deaths continued to increase. Why? Because the opioid crisis isn't due to chronic pain patients becoming addicted to...
prescription pills. The actual problem, the history of which we detailed previously, is recreational drug users. It is true that too many prescription opioids once flooded the market. But they fell into the wrong hands -- namely, recreational drug users -- who have now switched to (often fentanyl-laced) heroin. That's the problem, and the data unambiguously prove it.

We aren't the only organization to say this. In 2016, Scientific American wrote:

"According to the large, annually repeated and representative National Survey on Drug Use and Health, 75 percent of all opioid misuse starts with people using medication that wasn't prescribed for them—obtained from a friend, family member or dealer."

In addition to correctly stating that prescription meds weren't the cause of opioid addiction, the article also argued, "Cracking down on highly effective pain medications will make patients suffer for no good reason."

So, case closed, right? Not if you're Andrew Kolodny, who continues pushing ineffective and, frankly, cruel policies that end up preventing chronic pain patients from getting the medicine they need. And just for good measure, he thinks chronic pain patients are PR pawns for Big Pharma:

Dr. Kolodny can call us whatever names he wants. But it's pretty insensitive for him to characterize chronic pain patients as a bunch of mindless addicts who have been duped by Big Pharma. In fact, it's downright insulting. But he has more to say. If you disagree with his misguided policies, it's only because you're a paid shill for opioid makers.

Critics (like me) of opioid makers (like Purdue) are routinely bashed by the American Council on Science & Health. Here's some background on ACSH: Leaked documents reveal the secret finances of a pro-industry science group motherjones.com/politics/2013/... via @MotherJones @thackerpd

Oh, he wants to talk about money? Let's talk about money. In 2016, while working for Phoenix House, Kolodny made $463,000 denying opioids to chronic pain patients. (That doesn't include his Brandeis University salary.) It's safe to say he makes well over half a million dollars per year, which is more than half of ACSH's entire budget.
So, let's review. Andrew Kolodny (1) has a long history of spreading misinformation about the opioid crisis; (2) insults chronic pain patients; (3) profits handsomely from doing so; and (4) calls everyone who disagrees with him an industry shill. Dr. Kolodny's version of compassion comes with poor bedside manner and a hefty price tag.

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