Surgeon General Backpedals on Flawed Tylenol Study. Because of ACSH.

By Josh Bloom — July 15, 2019

Fireworks can be an awful lot of fun on July 4th, but not so much if they blow up in your face. Unfortunately for Surgeon General Dr. Jerome Adams, his face was in the wrong place on Independence Day because of a ridiculous paper in a ridiculous journal called Emergency (Tehran).

"Comparison of the Analgesic Effect of Intravenous Acetaminophen and Morphine Sulfate in Rib Fracture; a Randomized Double-Blind Clinical Trial" concludes that IV Tylenol works better (or as well) as morphine for patients who go to emergency departments for broken ribs - a notoriously painful injury.

Here are Dr. Adams' Tweets from July 3rd and 4th. Pay special attention to the one from July 4th on the right. Dr. Adams tells us that he unquestioningly believes the study results and offers no doubt about its accuracy.
It appears that Dr. Adams didn't bother to read the paper from which this conclusion was drawn. So I did. And it was a colossal mess, something I explained on July 8th (See Need General Surgery? Ignore The Surgeon General) [3]. The study was so bad that it was impossible to tell whether Tylenol worked better than morphine, morphine worked better than Tylenol, or either drug worked at all.

A few days later ACSH friend, Dr. Aric Hausknecht, a New York neurologist and pain management expert, who has both written for and been interviewed by us) must have read the paper as well because his July 12th letter made what I had to say seem rather tame by comparison (See Dr. Aric Hausknecht Responds To SG Jerome Adams' Tylenol Recommendation [4]).

Apparently, we hit the mark because in subsequent Tweets Dr. Adams was backpedaling like the bicycle scene from The Wizard of Oz played backward. Here are a few from July 13th...

1/? GM twitter! Let’s reset the discussion on pain management and opioid misuse. First, we must acknowledge/ I’ve always felt and said that we have a crisis of un and undertreated pain in the US, and it can lead to suicide, self medication w illicits, and other bad outcomes.

...now that ACSH has caught me

2/? We also have an overdose crisis in our country. It is NOW largely fueled by fentanyl, but there traditionally have been, and still are many people who first become dependent due to opioids prescribed to them - or diverted from others to whom they were over prescribed.

This has been true for five years

5/? I understand many chronic pain patients feel unheard- I HEAR YOU- and I am appreciative for your feedback. Whenever I speak on opioids, I ALWAYS discuss the need to protect chronic pain patients/ not pull the rug out from under them. We must NOT target the wrong people!

That rug is long gone
Finally, there’s this...

What Dr. Adams did is no different than what PROP, certain members of the CDC, politicians, academic zealots, and various other self-serving individuals and groups have been doing for almost a decade - making up a story and backing it up with faulty (or non-existent) research to "prove" a point.

We just happened to catch him.