

Will Americans become Kings of Pain?

By ACSH Staff — February 28, 2014



If you are suffering from moderate-to-severe pain, you can add one

more worry to your list the real possibility is that you will not be able to get effective pain-relieving drugs without considerable effort. And maybe not at all.

It is clear that there is a serious problem with narcotic addiction in the U.S. Virtually no one disagrees with this. But when it comes time to do something about it (assuming this is even possible), opinions differ widely.

And ACSH's Dr. Josh Bloom, whose recent [New York Post op-ed](#) ^[1] talks about precisely this problem says, Sure, if you make it difficult enough for people to obtain narcotic painkillers you will also cut down on abuse of these drugs. But, watch out for unintended consequences, because this is a 4 credit course on them.

There can be no better illustration of this than what happened when Purdue Pharma, the maker of OxyContin, finally came up with an abuse-proof formulation of their time-release drug. Prior to this, addicts found that by simply grinding up the high dose (40 mg of oxycodone) pill, they were able to overcome the time release properties and smoke, snort or otherwise ingest the full dose at once.

What happened next was fairly predictable. According to Dr. Bloom, After years of research, Purdue finally came up with an abuse-proof formulation. So, what happened? Use of OxyContin dropped sharply, but addicts switched to heroin, [causing a doubling of the number of heroin addicts](#) ^[2] seeking treatment within two years of the formulation change.

And now it is much more difficult to obtain Vicodin (hydrocodone and acetaminophen), since it has been moved up to a Schedule II drug the same as Percocet and morphine. Your doctor can't even call in an emergency supply over the phone. Patients in pain will suffer, and addicts will find another way to feed their addiction.

So, it is not clear whether the small [reduction in the number of prescriptions](#) ^[3] for opiate painkillers will be beneficial or harmful.

And, in a related story, many people are upset with the FDA's approval of Zohydro a time-release,

high dose form of hydrocodone without the acetaminophen.

So much so that a group of activists called the Fed Up! Coalition has submitted a [petition](#) [4] to FDA Commissioner Dr. Margaret Hamburg, calling for her to exercise your authority and responsibility to protect the public's health by keeping Zohydro off the market.

Dr. Bloom adds, Whenever I see activists and drug policy in the same story I get a little nervous. I'm sure they mean well, but the OxyContin story clearly shows how good intentions can backfire.

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[1] <http://nypost.com/2013/12/02/new-painful-casualties-of-the-drug-war/>

[2] <http://news.wustl.edu/news/Pages/24025.aspx>

[3] <http://www.medpagetoday.com/PainManagement/PainManagement/44499>

[4] <http://www.change.org/petitions/reconsider-approval-of-dangerous-new-opioid-zohydro>