Shock Schlock is the presentation of lurid or otherwise shocking anecdotes in lieu of meaningful data and sober statistical analysis.

Consider again the “Scope of the Problem” section of the DEA’s “A Closer Look At State Prescription Monitoring Programs” [Peine, 2003] which, after all, was written by a DEA ‘Program Analyst:’

Kentucky is a hotbed of prescription drug abuse. The reasons are many—drug seeking patients, pill-pushing doctors, no-questions-asked pharmacists, and lax oversight and enforcement." Two examples cited: During a 15-month period, a woman visited 10 doctors a total of 45 times, went to three hospitals’ emergency rooms at total of 43 times, visited four dentists, had 30 prescribers of medicine, filled 159 prescriptions in 103 visits to eight drugstores. Cost to the state $14,508; after she was restricted, her treatment for one year dropped to $3,091. During a 15-month period, a man visited five doctors a total of 56 times, went to two hospitals’ emergency rooms a total of 18 times, had 224 prescriptions filled in 114 visits to 15 drugstores. Cost to the state $32,130; after he was restricted, his care for one year dropped to $5,604." [Peine, 2003]

One might expect to find data and analysis demonstrating, minimally, a mastery of the real situation and a reasonable plan of action and a plausible connection between the two. Instead, the taxpayer is treated to anecdotes worthy of tabloid journalism.