Lawmen vs. the Drug Warriors - Attorneys General Seek Change in DEA Policy

Doug Smith; Arkansas Times; 2005-12-15 ; Posted: 2005-12-15

[Identifier: http://www.doctordeluca.com/Library/WOD/LawmenVsDrugWarriors05.htm]
[Related resources: http://www.doctordeluca.com/Library/LibPages/WODjournalism-lib.htm]
[Source: http://www.arktimes.com/Articles/ArticleViewer.aspx?ArticleID=f8fba3b-e0b9-4f4b-b50f-474ef5e7eb6b]

See also:

Comment on Prescribing Controlled Substances for the Treatment of Pain (PDF) – NAAG; 2005-03-21

For months, full-page advertisements challenging government policy toward pain management doctors have been appearing in national magazines.

“The government is waging an aggressive, intemperate, unjustified war on pain doctors,” the headline on one ad says. It goes on to quote from a study published by the Cato Institute, a libertarian “think tank” in Washington:

“By demonizing physicians as drug dealers and exaggerating the health risk of pain management, the federal government has made physicians scapegoats for the failed drug war. Even worse, the Drug Enforcement Administration’s renewed war on pain doctors has frightened many physicians out of pain management altogether, exacerbating an already serious health crisis — the widespread treatment of intractable pain. Experts agree that tens of millions of Americans suffer from undertreated or untreated pain … according to one 1999 survey, just one in four pain patients received treatment adequate to alleviate suffering.” The ad was placed by Common Sense for Drug Policy, a “drug reform” organization.

Another ad, placed by the same group, quoted from a Jan. 19, 2005, letter to the DEA signed by 30 attorneys general: “We, the undersigned Attorneys General, “We have learned that adequate pain management is often difficult to obtain because many physicians fear investigations and enforcement actions if they prescribe adequate levels of opioids or have many patients with prescriptions for pain medications. We are working to address these concerns while ensuring that individuals who do divert or abuse drugs are prosecuted …”

One of the signers of the letter was Arkansas Attorney General Mike Beebe, who is now a candidate for the Democratic gubernatorial nomination. A Beebe spokesman had little to say about the letter except that it grew out of discussions within the National Association of Attorneys General, a common occurrence, and that three attorneys general had been in the forefront of drafting the letter and seeking support. One of those was Oklahoma Attorney General Drew Edmondson. (Beebe might not be so willing to join with Edmondson today. In June, Edmondson, a Democrat, filed a lawsuit against Arkansas poultry plants, accusing them of polluting streams that flow into Oklahoma.
Beebe said the suit was improper and asked the U.S. Supreme Court to stop it. Edmondson said Beebe was carrying water for corporate polluters.)

Edmondson, Maryland Attorney General Joe Curran and Vermont Attorney General Bill Sorrell met with DEA Administrator Karen Tandy in April. Neither side has given a full accounting of the meeting. Rogene Waite of the DEA public affairs office in Washington said the meeting was “excellent and positive” and suggested that further questions be submitted to the attorneys general. Edmondson said in a news release that he and the other attorneys general had spoken “openly and frankly” about the pain management issue: “Many physicians have expressed a reluctance to prescribe needed dosages of pain medications because they fear DEA prosecution.” He didn’t describe Tandy’s response, but he concluded, “I think this meeting in the very least puts us on the road to finding workable solutions.”

On the road, perhaps, but not very far down it, sounds like.

Mike Beebe’s likely opponent in the 2006 gubernatorial election is former Congressman Asa Hutchinson, who is seeking the Republican nomination. Hutchinson is a former head of the DEA. Asked his reaction to the letter from the attorneys general to the DEA, Hutchinson said that as he read it, the letter was calling for a return to a DEA policy that was adopted in 2003. Hutchinson, who left the DEA in January 2003, said that policy was an outgrowth of his negotiations with pain-management physicians who said they were reluctant to prescribe drugs because they feared the DEA. “We recognized their position, and they recognized the importance of the role of the DEA in preventing diversion.” (Diversion is the illegal sale of drugs by people who obtained the drugs legally from physicians.) Hutchinson said that if his reading was correct, he had no quarrel with the letter or with Beebe for signing it.

The letter does indeed speak favorably of the 2003 policy and unfavorably of a DEA policy statement issued in November 2004 that “emphasizes enforcement, and seems likely to have a chilling effect on physicians engaged in the legitimate practice of medicine.”

Anything that has a chilling effect on physicians who prescribe pain drugs will have an even more chilling effect on their patients. And, as in all such matters, it is the people at the bottom of the economic ladder who get chilled the most. A University of Michigan Health System study published in October 2005 found that patients in minority and low-income neighborhoods were much more likely to lack access to pain medications than patients in whiter and more prosperous neighborhoods.

The war on drugs has many casualties. And they’re all people, not drugs.

[END]