MERRY CHRISTMAS FROM PROFESSOR JOSEPH FRIEDMAN AT UCLA

Joseph Friedman researches substance abuse issues. His recent column carried by *Longview Daily News* on December 28, 2022 discloses these facts and opinions:

The opioid crisis may have been initially due to increasing prescriptions of opioids for chronic pain, but when federal and state governmental regulations reduced the number of prescriptions, the overdose data got worse, and now at least 75% of ODs are due to Chinese fentanyl from Mexican drug cartels.

The massive coverage of the opioid crisis created a culture of fear among physicians, some of whom were even prosecuted for prescribing. Many doctors abruptly tapered doses to levels ineffective for pain relief, or even ceased prescribing at all. Thousands of patients were suddenly denied access to medicine that limited their pain and allowed a near-normal lifestyle.

CDC guidelines suggested a maximum safe daily dose of 90mg of morphine (or 60mg oxycodone, 90mg hydrocodone, 22mg hydromorphone, etc.), but instead of a recommendation, this became a rigid limit...despite the fact that many patients lost control of their pain when doses were reduced below 90. No studies have documented a standard amount of opioids to relieve pain in all patients.

As I discovered from a poll of KFC patients with chronic pain, those taken off would have many options, all bad:

- Try everything that failed in the past
- Bum pills from friends or buy from street dealers (hazardous)
- · Try heavy doses of alcohol or marijuana
- Try illegal heroin, or meth, or fentanyl
- Go to bed and stay there
- Commit suicide

The culture of today's medical community is one of fear of repercussions from prescribing, and many young doctors have been taught that any use of opioids will 100% lead to dose escalation and overdose death from respiratory suppression.

Back to Friedman. He cites two hopeful developments:

- The CDC has changed its 2016 policy; 90mg is no longer the cutoff; some patients need more.
- The US Supreme Court ruled (Ruan vs United States) that law enforcement must prove that clinicians knowingly/intentionally prescribed inappropriate doses, not just that doses were high.

It will take time, but eventually pharmacists and prescribers will conclude that opioids are effective treatment for chronic pain and that the bogeyman is Chinese/Mexican fentanyl.