

November 17, 2015

The Honorable Sylvia Matthews Burwell  
Secretary of Health and Human Services  
Hubert H. Humphrey Building  
200 Independence Avenue, SW  
Room 120F  
Washington, DC 20201

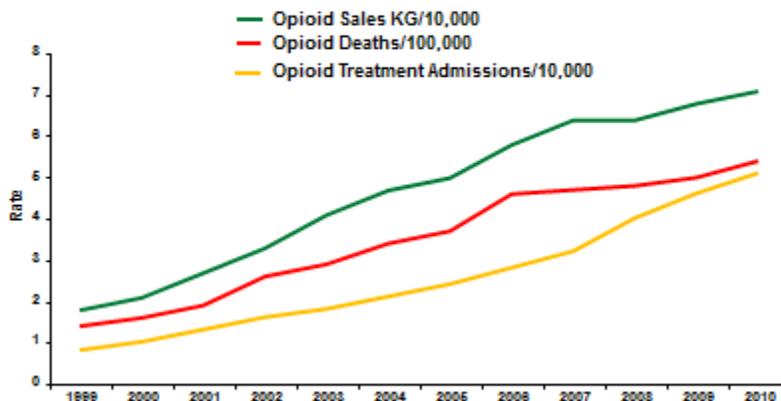
Re: Draft CDC Guidelines for Prescribing Opioids for Chronic Pain

Dear Secretary Burwell:

As leaders of national, state and local organizations concerned with public health, we share your goal of addressing the rising rate of prescription drug overdose injuries and deaths. To this end, we are coming together to express our support of the Centers for Disease Control (CDC) efforts to draft guidelines for prescribing opioids for chronic pain.

The data clearly show the scope of the epidemic. Opioid overdose deaths, once rare in the United States, have resulted in more than 220,000 lives lost in the past 15 years (175,000 from painkillers and 45,000 from heroin). Drug overdoses have become the leading cause of accidental death, surpassing motor vehicle crashes, and every hour in the United States, 5 people die as a result of a drug overdose. As the graph below demonstrates, this increase in deaths and treatment admissions is directly correlated with a rapid increase in opioid sales.

### Rates of opioid overdose deaths, sales and treatment admissions, US, 1999-2010



Paulozzi LJ, Jones CM, Meck KA, Rudd RA. Vital signs: overdoses of prescription opioid pain relievers—United States, 1999–2008. *MMWR Morb Mortal Wkly Rep.* 2011;60(43):1487-1492.

Prescriptions for opioids have skyrocketed over the past 15 years, yet we are not doing a better job of treating chronic pain. Indeed, it is individuals suffering from chronic pain that have been disproportionately harmed by aggressive opioid prescribing.

Evidence suggests that prescribing guidelines can reduce opioid-related harms. For example, opioid overdose deaths have declined in Washington State after the introduction of guidelines that called for more cautious prescribing. The Washington Department of Health reported in November 2014, a 29% decrease in prescription opioid-related fatalities since implementation of their Interagency Guidelines Opioid Dosing for Chronic Non-Cancer Pain.

Long-term use of opioids for chronic pain is not an evidence-based practice and may be more likely to harm pain patients than help them. Patients and doctors should be aware of their options when it comes to pain relief, including alternatives to opioids. Non-pharmacological treatments such as physical therapy and therapeutic massage can also produce relief. For many patients, non-opioid analgesics are safer and have fewer side effects.

We appreciate your leadership on this issue, and we look forward to continuing our work together to reduce aggressive opioid prescribing, save lives, and turn back the tide of this epidemic.

Sincerely yours,

American Society of Addiction Medicine  
California Consortium of Addiction Programs and Professionals  
CompPharma  
FedUp  
Illinois Alcoholism and Drug Dependence Association  
International Certification and Reciprocity Consortium  
James' Place  
National Coalition Against Prescription Drug Abuse  
National Safety Council  
Network of Employers for Traffic Safety  
Physicians for Responsible Opioid Prescribing  
Rise Together  
Safe States Alliance  
Save the Michaels of the World  
Shatterproof  
Steve Rummier Hope Foundation  
Washington State Agency Medical Directors' Group