

April 17, 2020 Federal Register Notice

Management of Acute and Chronic Pain: Request for Comment

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Adapted from US Pain Foundation May Newsletter

Cindy Steinberg

CDC Announces Comment Period to Inform Updating of Opioid Guidelines

On April 17, the CDC opened an official docket requesting comments from patients living with acute and chronic pain about their perspective on the benefits and harms of opioid use as well as their experiences with non-opioid medications and non-pharmacological treatments for pain. CDC is also interested in the perspective of caregivers, family members and healthcare providers of patients living with pain.

The agency is interested in how issues such as cost, accessibility, benefits and harms factor into the choice of which pain management options to pursue as well as patients' experiences getting information on which to base treatment decisions. The information collected will complement CDC's work assessing the need for updating or expanding the agency's 2016 Guideline for Prescribing Opioids for Chronic Pain.

CDC's Opioid Prescribing Guideline has been controversial even before its final publication in March of 2016. CDC was widely criticized about the secrecy of the Guideline development process, the lack of transparency about who authored the Guideline and the "low quality" or "very low quality" evidence upon which each of the 12 guidelines were based. It was later revealed that five members of the Core Expert Group who helped draft the guidelines were Board members of Physicians for Responsible Opioid Prescribing (PROP) an anti-opioid lobbying group. There were no nationally known or widely respected pain management physicians, pain advocates nor pain patients participating in the Guideline development process despite the fact that the Guideline was intended for the treatment of chronic pain.

Beginning in 2016, CDC widely promoted the Guideline to the nation's state health departments licensing boards and frontline primary care physicians. The Guideline is commonly viewed as being responsible for the pendulum swing in the direction of steep reductions in opioid prescribing even for people with legitimate pain, with no history or signs of abuse who had been using opioid medication to successfully manage their chronic pain. Thousands of chronic pain patients had their medications reduced or discontinued. Many pain patients reported being discharged from practices and unable to find physicians willing to treat them.

Indeed, the situation got so bad that in April of 2019, the FDA issued a warning to healthcare professionals that sudden discontinuation or rapid decreases in opioid prescribing had led to "serious withdrawal symptoms, uncontrolled pain, psychological distress and suicide." The CDC Guideline authors subsequently published a commentary in the New England Journal of

Medicine saying the Guideline had been “misapplied” and that they did not mean for practitioners to cut people off whose dosages were above the CDC thresholds.

“The last time the CDC intervened in pain management practice, it did not go well for people with pain. I hope they are serious and sincere this time about getting input from people with pain about the benefits and harms of all available treatment options and that they use that information to inform any updates they make to the Guideline.” said Cindy Steinberg, Policy Council Chair for the Massachusetts Pain Initiative. “I also hope they engage widely respected pain management experts in the drafting process this time around”.

Comments are due to the docket by June 16, 2020.

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