

SB559

I strongly oppose this bill

There are so many concerns I have with the Secretary of State audit, and this is one of them. First the data collected for this bill is outdated and there is no evidence that proves that people are harming their pets to get medication. This assertion is a complete conjecture based on clickbait website stories created for hype and gaslighting. We owe our system better laws than those made based on such biased reporting.

The measures to fix the opioid epidemic have been based on a lack of quality evidence which has led to patient harm, yet Oregon continues to trudge down the same path. The FDA, CDC, AMA, and countless other agencies have acknowledged patient harm from the measures we've imposed on patients. All laws, restrictions, guidelines, and policies, especially those that affect the lives and wellbeing of vulnerable patients, need to be based on high quality evidence without bias. If we are going to take any risks with vulnerable populations, we need to be able to guarantee our actions are based on evidence that it is necessary, helpful, and will not cause further harm. We have none of this evidence for this bill because it doesn't exist. You must send the message that we won't vote yes on something that could harm pets, create undo hardships on veterinarians, and possibly invade the privacy of their owners.

A big problem with the audit and the opinion of the Secretary of State is that she admits to being affected by a family member's addiction to opioids. In addition, Ian Green, her principal auditor, appears to have family member(s) who are affected by this as well. I am sorry for their families and struggles, but unfortunately their life experiences can't be separated from their opinion in this audit. Putting someone in the position of auditing restrictions for people they believe (wrongly) are in the same condition as their vulnerable family members creates a bias. Their opinions need to be buffered with the knowledge of this bias.

Current data shows that the opioid epidemic is driven by illicit, not prescription opioids. This data wasn't available in 2018 but is now. Overdoses are skyrocketing despite drastic reductions in prescribing. Continuing to restrict and limit prescriptions is continuing to harm pets and patients without improving the opioid epidemic.

Requiring veterinarians to participate in PDMP will not solve the opioid crisis, it will require more staff, more time, a breach of client medical history which invades client's private medical records. It will adversely affect pet care creating an environment (which is exactly what patients already have) where providers increase their refusal to prescribe pain care.

If passed this bill will have unintended consequences. Pets will be in more pain. People will (and already are) refuse to get their pets spayed and neutered because they don't want to watch their pets suffer in pain. Pets will be less likely to get needed surgeries and their overall health will suffer. There is the potential that owners with chronic illness and disability might be denied

pet care based on suspicion. There are many other possible consequences and we have already seen many of them in the human patient population.

It is already difficult to get proper pain care for pets. Veterinarians are already refusing to provide necessary medications to ease pain (even surgical pain and hospice care) for pets. It is heartbreaking to watch as a furry family member cries in pain and there is nothing you can do to help them. Two of my dogs were spayed with nothing but NSAIDS for pain and they were miserable. I fail to see how a 150-pound human could possibly get enough pain medication (even on the very unlikely chance they would ever do it) from a prescription for a 15 pound dog. Even with a much larger dog, there is no evidence to substantiate any claims that owners would harm their pets for medication. It would be much cheaper and easier to buy it off the streets than to pay expensive pet bills for unnecessary treatments.

The claim that most other states have veterinarians as a part of the PDMP is false in 2023. Most states are now reversing the overreach created by misapplication, misinformation, and situation bias that has created much of the harm we now face. Bills need to be passed (especially when dealing with the health and wellbeing of living creatures) based on evidence, not bias. We need to end the opposite approach where we rely on poor quality evidence and hype to pass regulations that ends up devastating an entire population of Americans.

I also object to taking away a public seat. I'm confused why this would be a part of this bill. How does that help anything? We need more public seats. We need more patient (nonaddicted intractable and chronic pain patient) specific seats.

Please send the message that we will not accept less than quality evidence when it comes to our pets and to our Oregon patient population's healthcare. Please show everyone that we will no longer focus on compliant patient population to solve the problem of illicit drugs. Please signal a change in attitudes where patients are included at the table with a valued voice when it comes to decisions that will affect our lives.