

May 15<sup>th</sup>, 2023

House Committee On Behavioral Health and Health Care

Dear Chair Nosse, Vice-Chairs Goodwin and Nelson, and members of the Committee

For the record, my name is Gordana Nichols, and I am submitting this letter in support of SB607, a measure that requires OHA to study the membership of Oregon Pain Management Commission.

Oregon Pain Management Commission (OPMC) was originally created to provide assistance and protection to pain patients.

The goals of the Commission, according to ORS 413.570, are to:

- Develop pain management recommendations.
- Develop ways to improve pain management services through research, policy analysis and model projects; and
- Represent the concerns of patients in Oregon on issues of pain management to the Governor and the Legislative Assembly.

Analysis of the Commission available meeting minutes and materials shows that, since at least 2016, Commission has failed to fulfill its 3<sup>rd</sup> goal.

We all know that our country is struggling with the overdose crisis. Numerous measures were attempted to address it, a notable one being CDC guideline for opioid prescribing from 2016.

Regretfully, Oregon was one of the states that misapplied the guidelines and the ONLY state that attempted a force taper of pain patients, despite warnings from many reputable specialists not to do so (e.g Sean Mackey, MD, PhD, Chief Division of Pain Medicine, Stanford University letter to Governor Brown (<https://lynnwebstermd.com/2018/12/08/letter-to-governor-kate-brown/>)).

Consequently, thousands of Oregonians living with pain were harmed. Their medications, for most effective for many years, were reduced or discontinued. Patients were abandoned, stigmatized, treated with disrespect, called “seekers” or “abusers” and even offered transition to Suboxone to treat their pain. Suboxone is NOT FDA approved to treat pain, it is medication used to treat Opioid use disorder (OUD) and covered by insurance only if the patient has OUD. Some desperate patients accepted this, literally admitting OUD they do not have just to get some pain relief, some turned to the streets and the risks of taking illicit drugs.

Realizing the unintentional consequences of the measures to address overdose crisis, CDC issued an explanation of the guidelines in 2019 and published new guidelines in 2022.

What did OPMC do during this time? The main focus was on creating a Pain education module, and promotion and funding of it. Reading the OPMC materials feels like reading materials of a corporation interested primarily in the profit margin. The Pain education module, interestingly, tries everything to eliminate using opioids for pain. It emphasizes alternative methods of pain management, most of them proven to be only mildly effective.

The pleas for help from many patients and professionals that attended public hearings session are ignored. There is not one recorded discussion concerning the public input, not one report or plan of action to support the patients, not one legislative effort to stop unscientific, draconian measures proposed by interest groups promoting alternative and anti-opioid methods of pain management.

Opioids may not be considered the best choice to manage pain, however, they have been used for over 130 years and both efficacy and side effects are well known. More and more studies are pointing out the dubious efficacy of the alternative methods of pain management, including NSAIDs, prescribed antidepressants or anti-seizure medications. Actually, the combination of some medication prescribed to patients may be more dangerous than opioids themselves.

The fact is that Oregonians struggling with painful conditions need fair representation, assistance, and support, just like any other vulnerable or disenfranchised population does. They are not opiate addicts (actually, a very small percent of chronic pain patients get addicted). They are not a cause of overdose crisis (see the latest CDC National Center for Health Statistic <https://static1.squarespace.com/static/54d50ceee4b05797b34869cf/t/645563490577ef7a0ee337fe/1683317577574/CDC+overdoses.pdf>). They do not deserve to be treated like criminals when all they want is to live a life with as little pain as possible.

I support looking into OPMC membership and looking into the reasons why the patient representation and support stopped. A more balanced membership would benefit everybody. I encourage the Committee to pass SB607.