



# Pennsylvania MEDICAL SOCIETY®

**Addressing the Opioid Abuse Crisis  
The Center for Rural Pennsylvania  
July 9, 2014**

Good morning Senator Yaw, Senator Baker, Representative Everett, Representative Mirabito, Representative Keller, and members and guests of the Center for Rural Pennsylvania. I am Dr. David Talenti, a practicing gastroenterologist with The Guthrie Clinic in Sayre, PA, and vice-chair of the Board of Trustees of the Pennsylvania Medical Society.

Thank you for inviting me to testify today regarding our nation's opioid abuse crisis. This is an issue of particular interest for me, as I chair the Pennsylvania Medical Society's multi-specialty work group on opioid abuse.

There's no question that we're dealing with a prescription drug abuse crisis. According to a new report by the Centers for Disease Control (CDC), there were 16,917 opioid overdose deaths in the U.S. in 2011, the most recent year for which statistics were available. Pennsylvania's death rate exceeds the national average, and in 2011 we ranked 21<sup>st</sup> per capita among the states in opioid prescriptions written. Magnifying the problem, prescription opioids can become gateway drugs to heroin. Indeed, up to 80 percent of heroin addicts started on opioids.

While there is a clear need to act aggressively in response to this epidemic, we must also act prudently, because prescription opioid medications are an essential tool for physicians who treat patients who are living with chronic pain.

Reducing opioid abuse requires a comprehensive effort, and the Pennsylvania Medical Society has initiated a multi-pronged approach to the problem:

- Our "Pills for Ills, not Thrills" campaign provides physicians with a wide range of information and resources they can use in their practices;
- We secured a grant to host a six-credit Risk Evaluation & Mitigation Strategies Continuing Medical Education (CME) program on extended release and long acting opioids;

- We actively promote Governor Corbett's medication drop box program. More than **two tons** of medications have been turned in since the program was initiated six months ago;
- We were early advocates for the creation of a statewide controlled substance database, where prescribers could look to identify patients who might be scammers or have an abuse problem;
- We are strong supporters of Senator Pileggi's Senate Bill 1164, which would provide Good Samaritan protection to those who seek to aid persons who experience a drug overdose, as well as provide life-saving naloxone to first responders as well as friends and family members of persons at risk of experiencing an overdose.
- Additionally, we initiated a process to create opioid prescribing guidelines, giving physicians clear, concise guidance as to best practices when utilizing these pain medications. We merged our effort with that of Governor Corbett's own task force, and the product of that joint undertaking will be announced tomorrow by Gary Tennis, the Governor's Secretary of the Department of Drug and Alcohol Programs;
- Finally, we are actively participating in the Joint State Government Commission's recently-initiated examination of the state's drug laws and regulations.

Of course, much remains to be done. We urge the members of the House and Senate to complete work this fall on legislation to establish the controlled substance database I mentioned a moment ago. The state's existing database, which is operated by the attorney general's office, is limited to Schedule II drugs and cannot be accessed by prescribers or dispensers. With the exception of Missouri, where there is no database at all, Pennsylvania truly is at the bottom of the barrel when it comes to providing this important tool to physicians who prescribe opioid medications.

Also, we ask the House and Senate to send the Governor Senator Pileggi's Good Samaritan and naloxone legislation as soon as possible. It will save a lot of lives.

Before I conclude I would like to offer a word of caution. Overzealousness in the campaign to eliminate opioid abuse can also lead to negative consequences. According to published reports, new laws aimed at eliminating Florida's pill mills have left many legitimate chronic pain sufferers scrambling to find pharmacies that have controlled substances, like Oxycodone, and are willing to dispense them.

Additionally, legislation like House Bill 2203, which would require physicians who prescribe Zohydro to follow a rigid, one-size-fits-all protocol, may be detrimental to patient care by impeding the individualized care that is the hallmark of the physician-patient relationship.

The Pennsylvania Medical Society is committed to continuing its campaign to eliminate opioid abuse. We look forward to working with the Governor, the General Assembly, and other stakeholders in that ongoing endeavor.

Again, thank you for inviting me to participate in today's hearing. I'll be happy to answer any questions you may have.