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Re: 202412-0920-006
CDC comment

First I would like to state that again the CDC has made it exasperatingly difficult for the public to comment on the subject of Opioid Prescribing Guidelines.

One can only assume that this is an effort to limit the number of comments on a subject that has completely destroyed and literally caused significant loss of life to one of the most vulnerable populations in this country.

Chronic pain patients should not be defined by the fact they suffer from pain, pain is a symptom of an underlying medical condition, most often pain is caused by life altering, progressive and destructive diseases.

The 2016 and 2022 CDC Opioid Prescribing guidelines have ruined healthcare in this country. It has pushed patients to commit suicide, it has caused patients to seek refuge from their pain by going to the streets for relief and it has devastated families.

The CDC guidelines are scientifically inaccurate and the authors must have been aware of their errors prior to publication.

Such as:

- over-emphasis of risks of opioid prescribing while deliberately and inappropriately ignoring the benefits
- Continued-over-emphasis on tapering of legacy patients to opioid dose levels that are inadequate to control pain, regardless of a well-established clinical record of patient health crises and medical collapses due to tapering.
- never discussing polymorphism-some patients process medication faster than others
- continually using MME when that measurement is lacking any scientific proof of its validity.
- continually recommending "non-opioid" therapies over opioid therapy despite a complete lack of published clinical trials demonstrating any validity

The CDC has persistently resisted measurement of harms to patients and clinicians due to the issuance of their guidelines. Guidelines that have contributed to patient harm due to the undertreatment of pain. Based on the CDC recommendations, nearly all states designed and implemented new laws, regulations, and policies due to increasing rates of opioid overdoses. In addition, many states' Medicaid programs, insurers, pharmacy benefit managers, and pharmacies used the CDC guidelines to create opioid prescribing limits. CDC acknowledged that misinterpretation of their guidelines most likely led to the unintended consequence of untreated and undertreated pain, serious withdrawal symptoms, worsening pain outcomes, psychological distress, overdose through use of illegal drugs, and suicidal ideation and behavior.

Millions of patient desertions have occurred due by clinicians' fear of sanctions or persecution by State Medical Boards, insurance companies or law enforcement on fallacious grounds derived from the CDC guidelines. This remains true despite CDC publication of warnings against misuse of the guidelines, and nominally conciliatory wording in the expanded and revised 2022 version thereof.

The CDC has played a major role in the destruction of US pain medicine. It will literally require years to correct the mess that CDC made by adhering to their unacknowledged but largely political agenda, to the exclusion of well-established science.