

Author Full Name : Matthew Havrilla**Received Date :** 01/15/2025 12:07 PM**Comments Received :**

These guidelines have been disastrous from their inception. They were dictated by an obviously biased panel that broke CDC requirements and provided absolutely zero transparency. 7 years of data shows how destructive these guidelines were before there was any attempt to made to "revise" them. And that revision was done in a way that allowed frightened doctors in opioid phobic states to increase their stranglehold over patients. No patient should have to go with long-term intractable pain when opioid painkillers are readily available. It's been proven of the last 7 years that the addiction rate for patients using opioid pain medications for the intended condition is no higher than the addiction right for any other substance like alcohol or cannabis. In point of fact, opioids are no threat to the public and are neither a catalyst nor driving factor in the current street epidemic. The CDC, FDA, federal government and American public need to recognize that the CDC opioid prescribing guidelines has severely damaged the ability of modern practitioners to treat pain at any level. Whether that be traumatic injury, surgical trauma, prolonged cancer pain or any number of other issues. Because the CDC prescribing guidelines allowed the DEA to be weaponized against practitioners in good standing who were practicing within the medical guidelines of their own state. The CDC opioid prescribing guidelines, weather in their original 2016 format or the revised format, need to be repealed. The field of pain medicine needs to be rebuilt because it has been systematically dismantled by the DEA and, rightfully so, new practitioners don't want to go into the field for fear of being litigated because they are doing their job in an entirely legal fashion. Get out of our doctor's office. You don't belong there. And since you caused the damage, help us rebuild. We need government incentives for people being trained in medicine to specifically go into the field of pain medicine. Because in many states they are our only option as a patient and the field has dwindled to such a small number of practitioners that even in areas where their rights to practice have been legally reinforced by state bills there are nowhere near enough practitioners to meet patient demand.