Psychology Today

Glenn C. Altschuler, Ph.D., is the dean of the School of Continuing Education and Summer Sessions, and a professor of American Studies at Cornell University.

Merchants of Death

Opioid prescriptions made medicine cabinets more dangerous than cars.

Posted Dec 07, 2018


West Virginia is ground zero of America’s opioid crisis. In 2006, the overdose death rate in the state was 16.2 per 100,000, well above the rest of the country. Most of the deaths involved opioids, prescribed to reduce pain, (especially OxyContin, which users often combined with benzodiazepines such as Valium). By 2016, the rate approached 52 per 100,000. The vast majority of victims were below the age of 50. Because of opioids thousands of children were placed in foster care, adding to the $8 billion the epidemic cost West Virginia for treatment, law enforcement, lost jobs and productivity.

No state, of course, has been immune from the ravages of opioid drug addiction. With a dramatic increase in deaths from fentanyl and heroin, the crisis has now taken a new, and perhaps even more ominous, turn. The Center for Disease Control estimates that drug overdoses topped 200 a day in 2017, a 13 percent rise over the previous year, and will continue to rise.
In *American Overdose*, Chris McGreal, an investigative reporter for *The Guardian*, provides a scorching exposé of an opioid crisis, “driven by greed, not need,” that made “medicine cabinets more dangerous than cars.” McGreal shows how Big Pharma relied on skimpy and false data (on pain management and addiction) to get FDA approval for OxyContin; enlisted doctors and pharmacists to push the pills; and then targeted “dumbass hillbillies” in Appalachia, many of them suffering from economic, emotional and physical pain. Most important, *American Overdose* tells the story of institutional failure and corruption: among local officials, in federal agencies (the FDA, CDC, and the National Institute on Drug Abuse), the United States Congress, and the White House.

*American Overdose* also provides riveting accounts of the victims and villains of the opioid crisis. A single pill, McGreal writes, killed Jerome Butler, a twenty-eight year old African American. While *smoking* cannabis and drinking beer with a friend, Jerome popped a pill stamped M367, the designation for Norco, a hydrocodone prescription *medication*, that was actually fentanyl. Discovered by his aunt on a couch, foaming at the mouth, in cardiac arrest, he was medivacked to the hospital, and kept alive by “a clutch of tubes.” Jerome’s mother made the agonizing decision to let him die, even before she knew what had happened.

Between 2002 and 2009, McGreal indicates, Dr. Diane Shafer wrote 118,445 opioid prescriptions. On average, she “saw” 113 patients a day. Federal agents seized $600,000 from her, divided among safe deposit boxes, bank accounts, and cash scattered around her house and office. Sentenced to six months in jail, Shafer saw herself as a victim. The raids on her office were illegal, she insisted, because the search warrant did not have her name on it. Shafer defended her treatment of coal miners suffering from injuries, accused federal agents of stealing from doctors, and pointed with pride to her service to the community.

The FDA has acknowledged that its approval of OxyContin was a mistake. However, McGreal concludes, agency officials are relatively silent about their complicity in the false claims about opioids made by drug companies “during the headlong rush into mass prescribing” – and about their failure to act “as the American medical system was hijacked by a mix of bad science and corporate money.”

Alas, amidst shifts in the battlefields, the prospects for success in the war against drug abuse appear meager, at best. In 2017, President *Trump* spoke eloquently about the “shocking death toll” and the number of families and communities “ripped apart” by the opioid crisis. He also nominated Tom Marino, the congressman who introduced legislation reducing the Drug Enforcement Administration’s ability to regulate opioid deliveries, as his new drug czar. After a former DEA official laid out Marino’s role on *60 Minutes*, the nomination was withdrawn. Meanwhile, the president’s proclamation of a national *health* emergency and his
proposal of the death penalty for drug traffickers have not resulted in legislation of regulations that adequately address the realities on the ground.

Moreover, despite mounting evidence that addiction is by no means rare and opioids are no better in alleviating pain for large numbers of patients than over-the-counter drugs, lobbyists for Big Pharma continue to shift responsibility for the epidemic on to the victims and dismiss regulations reining in prescriptions as a “kind of McCarthyism.” In 2014, the FDA overturned the recommendation of its own committee and approved Zohydro, a new and potent opioid drug; and heroine overtook prescription drugs as a cause of death. Two years later, the CDC issued guidelines discouraging physicians from prescribing opioids, while fentanyl deaths passed heroin and opioids, taking more than 20,000 lives.

Little wonder, then, that in April 2018, Jerome Adams, the Surgeon General of the United States, proclaimed that the danger was so great that people should carry overdose medicine at all times.

Psychology Today © 2018 Sussex Publishers, LLC