

Increasing Market Share and Locking In Tomorrows Profits

A cursory review of the moral and health risks of using Oxycontin in Pediatric Medicine

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Preface

It is the policy of Choopers Guide to restrain from endorsing or opposing issues, products and causes that are politically contentious. We are not physicians nor do we purport to be experts in clinical pharmacology. We do believe however that we understand very well the mindset of the addict, the addiction subculture and the fundamental biological, psychological, social and spiritual facets of addiction and that on certain occasions we would be morally remiss if we were to withhold commentary. Therefore, we have elected to make an exception and offer a few common sense comments on this clinical trial and its moral and social ramifications.

The Trial: Study Purpose:

The purpose of this study is to characterize the safety of oxycodone hydrochloride (HCI) controlled-release (CR) tablets in opioid tolerant pediatric patients aged 6 to 16 years, inclusive, with moderate to severe malignant and/or nonmalignant pain requiring opioid therapy.

Facts:

- hydrocodone and oxycodone (active ingredient in Oxycontin) account for 84.9 percent of opioid prescriptions
- High abuse potential particularly among young adults
- Oxycontin Abuse statistics surged from 2.1% to 25.6% in age group 12-25 in the last decade
- Oxycontin treatment admission by primary drug of abuse increased from 2.2% to 9.8% in the last decade
- Oxycontin was listed as the cause of death in 1,185 cases in Florida in 2009
- One in 4 of 18-24 age range will abuse prescription opioids
- 202 million opioid prescriptions in 2009
- Purdue Pharma Oxycontin Revenues: 2010 3.1 billion; 2009 2.8 billion
- Oxycontin accounts for approximately 90% of Purdue Pharma Revenues
- There are <u>178 Pill Mills in Southern Florida</u> that generate 85% of the nations oxycontin prescriptions.

Overview:

Oxycodone is semi synthetic opioid analgesic medication synthesized from opium-derived thebaine (paramorphine – opium alkaloid). It was developed in 1916 in Germany and approved for use in the US by the FDA in 1995 and became available in the US in 1996. The patent is held by Purdue Pharma, formerly Purdue Frederick. Unlike other oxycodone products available, Oxycontin is time released and contains no other substances such as aspirin, acetaminophen, caffeine, etc.

Purdue Pharma has been manufacturing and marketing Oxycontin for 15 years. It has the highest abuse potential of any opioid analgesic on the market today and has spawned a prescription pain reliever epidemic. Whether this is a result of the user experience of the drug, availability or widespread public awareness due to a combination of aggressive marketing and the sensationalism created by the news media and Hollywood, is irrelevant at this juncture. Oxcontin aka hillbilly heroin, oxycoffin, oxys, etc are now household words and should appear in Merriam Webster's Dictionary shortly. This lesson should have been learned with the media generated crack epidemic.

The questions are:

- Do we want to plant the memory of a euphoric sensation in children's memories which will remain a lifetime and will become a potential solution in their futures to emotional and physical pain.
- Risk/reward. Should a substance that has been marketed as the opioid euphoric of the century, the "top shelf" narcotic for addicts, now be administered to children?
- Why would one generation be less susceptible to the risk of abuse and addiction
- Do the benefits clearly outweigh the risks?
- Do we really need to ask this guestion?

There are many analgesics available on the market of which many have been being prescribed for over 50 years that have been used to effectively reduce and manage pain without generating a unique addict subculture. The social perception of oxycontin is now addiction not analgesia and as such this substance will be destined to be used in this manner. Conversationally, it is now used in the same context and has the same stigma as heroin (e.g., hillbilly heroin).

It is not the author's intention to question the legitimacy or efficacy of this drug as an analgesic but rather to assert the position that the public perception is that Oxycontin is no longer just another narcotic pain reliever. It has lost its medical legitimacy due to the incidence and prevalence of abuse and addiction and its association with the <u>disease of addiction</u>. Until such a time when addiction is accepted and treated by the medical profession and society as a lifelong brain disease and therefore no longer classified as deviant behavior subject to sanctions imposed by the criminal justice system, it should be reclassified as a Schedule I Substance.

By allowing this proposed usage of this drug we are in essence conveying our apathy or tacit approval of putting profits ahead of our children's' futures. When Thomas Jefferson said of the ideology of capitalism in America "Money and not morality is the principle of commerce and commercial nations", I sincerely believe he did not have this in mind.

In closing, I would like to extend my congratulations to Purdue Pharma, the news media and Hollywood. You have successfully created an epidemic based upon deliberate misrepresentation and glamorization of the pharmaceutical properties of an opioid analgesic to the medical industry and to the news media industry for providing the nation with sensationalistic media coverage that is killing people, destroying

families, clogging our criminal justice system and <u>costing society hundreds of billions of dollars</u> per year. And, you have done it without one shred of remorse.

This article is being published to the <u>Choopersguide website</u> as we are committed to the recovery of individuals who suffer from the <u>disease of alcoholism and drug addiction</u>. Choopers Guide is active in the <u>recovery advocacy movement in the State of Florida</u>. Choopers Guide is an addiction treatment and addiction information resource site with over 30,000 treatment provider listings for treatment programs, methadone clinics, <u>suboxone doctors</u>, <u>drug and alcohol counselors</u> and <u>interventionists</u>.