



## DEA SEEKS COMMENTS ON PAIN MEDICATION PROPOSAL

by  
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Under-utilization of pain medication has been a serious health care problem in this country. Although effective medication is available for the treatment of severe chronic pain, patients often find it difficult to gain access to such medication because its distribution has been tightly controlled by the federal Drug Enforcement Administration (DEA). DEA has recently proposed constructive measures to help alleviate the problem. Those interested in supporting DEA's proposed efforts to improve access to pain medications should consider filing comments with DEA by its November 6, 2006 filing deadline. *See* 71 Fed. Reg. 52724 (Sept. 6, 2006).

Medications approved for treatment of severe pain are addictive and have been subject to recreational abuse. Accordingly, DEA has classified them as Schedule II controlled substances, the classification assigned to controlled substances that have the highest potential for abuse, and are the most likely to cause dependence, of all controlled substances that have an approved medical use. Federal law imposes tight controls on doctors' prescriptions of Schedule II substances. For example, no prescription for such drugs may be "refilled." 21 U.S.C. § 829.

In practice, this ban on refills has limited the prescription of the pain medications at issue to a maximum 30-day supply. Patients with long-term needs for medication have been required to return to their doctors every 30 days to obtain a re-supply. The costs and inconvenience of such frequent visits has been more than some patients could bear, with the result that they have had to go without medication to treat their severe pain.

DEA's proposed regulation addresses that issue by narrowly defining what it means to "refill" a prescription. The proposed regulations permit doctors to issue multiple prescriptions simultaneously to a single patient for a Schedule II drug, provided that the combined prescriptions provide no more than a 90-day supply of the drug. The doctor also must specify the earliest date on which each prescription may be filled, thereby preventing potential drug abuse by preventing the patient from filling all of the prescriptions at once. DEA's proposal would define a "refill" as not including multiple prescriptions written in this manner.

If adopted, the proposed regulation should prevent abuse while at the same time ensuring that patients are not denied access to pain medication based on their inability to bear the cost and inconvenience of monthly doctor visits. A show of broad support for the proposed regulation may help to ensure that DEA does not reconsider its decision.

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