

## Response to “Drugmaker Push Booster ‘Murky’ Ailment”

[http://www.aolhealth.com/condition-center/chronic-pain/news/article/\\_a/bbdp/drugmakers-push-boosts-murky-ailment/333625?icid=200100397x12179995](http://www.aolhealth.com/condition-center/chronic-pain/news/article/_a/bbdp/drugmakers-push-boosts-murky-ailment/333625?icid=200100397x12179995)

Dr. Stephen Gelfand, a South Carolina rheumatologist who works with a large population of chronic pain patients, is working to educate general practitioners of the efficacy and safety of non-drug therapies, alternate medications and multidisciplinary care.

This well-researched article describes the major problem of pharmaceutical misinformation to sell their products at the expense of the public health, which also directly applies to the opioid industry. These companies have all misrepresented the conditions which they are marketing their drugs for, in their very clear intent of getting the public [and doctors] to believe that their drug is *the answer* to complex disorders such as fibromyalgia and other types of chronic pain. **These disorders often require a much more comprehensive approach, including active patient participation in self-management therapies [e.g. education, stress management, other behavioral/psychological therapies, and comprehensive exercise programs], without which these drugs usually do not work.** For example, fibromyalgia, a very common type of chronic pain, is a syndrome, not a disease, which originates from imbalances in central nervous system function related to a maladaptive coping response to chronic stress in genetically predisposed individuals, with varying degrees of anxiety and depression. This syndrome will rarely improve on drugs alone without the active practice of self-management, and with a thorough understanding of what chronic stress can do to the nervous system [similar to post-traumatic stress disorder]. But the drug company ads don't tell you this because they want people to believe that all they have to do is **take their drug for that 'magic cure' and that there is 'a pill for every ill'**.

Likewise, the opioid industry has engaged in one of the most egregious marketing campaigns in history, to get the medical community, public, government, and media to believe that opioids are *the answer* for most types of chronic pain, rather than convey the real truth that **chronic pain is a symptom of many complex disorders** [like fibromyalgia syndrome], most of which do not require opioids which must be used very *selectively* and for very *specific* clinical indications. But the widespread sale of OxyContin and other opioids, just like the expanded distribution of Lyrica and Cymbalta for fibromyalgia, could only occur in the context of a distorted perception that all that was needed for pain is to take 'this pill'. Now that the pain [e.g. opioid] movement has come face to face with the devastation it has promoted and created, they have started to backtrack with 'guidelines' of how to detect abusers, but has avoided the necessary step of making a concerted effort to *prevent* these horrific problems from happening in the first place- by *limiting the indications* for the use of opioids for chronic noncancer pain disorders [such as fibromyalgia syndrome]. But this is not surprising from a 'specialty' which grew and expanded from the opioid sector of the pharmaceutical industry, rather than one which should have tried to understand all of the complex dimensions and multiple effective non-opioid therapies for chronic pain.

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