

PATIENT STORIES, PART II

SINCE NOVEMBER 2022

(Please see prior publication: “ [Patient’s Story of Harm #041](#) “

The CDC’s 2016 *Guideline* has received much criticism. The *Guideline* and its attendant addition of dose restrictions “caused harm in many patients” according to the American Medical Administration (AMA) in its [stern letter of June 22, 2020, to the CDC \(Centers for Disease Control and Prevention\)](#). As a result the CDC issued a [revised Guideline 2022 in November 2022](#). It is twice as long and essentially is still an opioid pain medicine avoidance document sticking to a 50 mme bright line danger zone, already invalidated by the FDA in 2013 ([FDA 2012-P-0818](#))

We have been told the revised [CDC Guideline, 2022](#), removed the harmful problems of the [2016 Guideline](#). It was published without external review as was the original in 2016, Presented here are hundreds of stories collected since the 2022 Guideline rollout. It appears the impact of the new Guideline is minimal if any. We are still seeing less than 20% of patients reporting proper opiate pain medicine administrations.

It was a dangerous fool's errand since none of the millions forced off effective long-term stabilizing opioid pain medications would ever become addicted.

It is up to the reader to decide whether the new version of the CDC *Guideline* has improved the lives of those who require daily opioid pain medicines, according to the same government that encourages taking them away. ([See Prior Publication #006 “Ten Million People”](#))

Patient Stories reporting the impact of the new [CDC Guideline revisions of 2022](#) on their persistent, painful inflammatory disease treatments.

Favorable Reports II

KN Before the guidelines I felt extremely secure with my pain doctor. I NEVER worried about losing my meds! But not anymore. Knowing they can trip your life-saving meds at any given moment is truly the WORST feeling in the world! Never will I feel secure like those 10+ years! Case #1050

S - I'm so scared for no reason. I had a great in-person visit with Palliative Care MD yesterday. He didn't even have me pee in a cup. I'm not adding more opioids, but have some quality of life where I am now. Happily driving home, with music blasting. Then later I thought, "what happens to me if she leaves?" Case #775

T - In lieu of the physical and psychological torture of being under prescribed and forced onto Methadone, I took myself off of my Dilaudid slowly in 2020. I finally sold everything and moved to CA on 7-19-22 and found a wonderful PM MD, trained in the US who gave me back my dignity. Case #904

W - The pain got so bad as an adult that at the age of 47, I was couch-bound and I could not continue my career doing electrical construction. After 13 years of failed treatments, I sought out more aggressive opioid therapy as a last resort.

I saw a different doctor who continued the process of titrating me up to where I was comfortable according to FDA guidelines and finally, I was enjoying the highest quality of life I've ever had as an adult. The doctor titrated me up to 2980 MME in 2010. For 8 years I continued on that same regimen with no escalation in doses.

In short, I was no longer couch-bound in agony. In 2017 the doctor was approached by the DEA for his continued prescribing at high doses, although he saved my life. No charges were filed but he gave up and retired. A new doctor took over his practice and he briefly prescribed the same dose that had been prescribed previously but then medication cuts started and once again I was couch-bound and incapacitated.

At the same time, I also lost my pharmacy which was filling my medications. Once again, I had to find a new pain specialist and pharmacy which I have done. The levels are not the same as previous but I am much more comfortable. Case #765

S - I have full body neuropathy. Opioids work! Without them my skin feels like 2nd degree burns and sandpaper being rubbed on it. I get some meds and am very grateful for them. It does help. Case #744

R - My spinal canal is narrowing. A spinal surgeon I consulted told me the only feasible solution is (surprise) surgery. But I'm in renal failure, so can't tolerate general anesthesia. Fortunately, my primary, who's known me for 30 years, prescribed hydrocodone. Case #935

M - Bright spot was he could give me 2 extended-release pills/day and we discovered that the ER morphine actually worked really well for me, and I was working in a factory at the time. Case #995

M - I am still not at a fully adequate dose, but after a little over 9 months I've gotten up to 3 7.5 mg hydrocodone a day and it at least brings my pain down a couple points and allows me to walk with my cane more instead of crutches. Case #998

Unfavorable reports: 812

All reports are from after the publication of the Jones [2022 CDC Guideline revisions](#), December 2022, intended to relieve the under prescribing generated by the [2016 Guideline](#). They are confidential referred to by case # only.

F - a retired doctor in Hawaii, is one of many chronic pain sufferers. For 20 years he took "high dose" opioids. (400 MME daily) to manage extreme pain. Gawin, an expert on addiction himself, was well aware of the risks but notes that he stayed on the same dose throughout those 20 years. "It helped me profoundly and probably extended my career by 10 to 15 years." About five months ago, his doctor, a pain specialist, informed Gawin and other patients that she would be tapering everyone below 90 MMEs because she was concerned about running afoul of medical authorities. Gawin's symptoms have returned with a vengeance. "As I am talking to you, I am in pain," he said in a phone interview. "I'm having trouble concentrating. I'm depleted. I'm not myself." Case #766

M - At least you're not being slowly tortured to death, writhing in agony, with no quality of life while being denied something that medicine prescribed you for years that took care of the constant severe pain. Case #799

P - I gave up on doctors. All they've done is make my condition worse. I've been treated so badly by doctors that I legitimately have PTSD. When I walk into any doctor's office, I fear that I will be labeled an addict or made to feel like a criminal for being sick. Case #797

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P - I developed chronic fatigue syndrome and fibromyalgia in my late twenties and thirties. My doctor put me on medication which greatly helped with pain and other issues such as panic attacks, muscle stiffness and insomnia. The medical regulations began to change. All my medications came under the heading of meds subject to “misuse and diversion” in the language of the medical bureaucrats. So, in early 2015, I was forcibly tapered off ALL my meds. When I made the grave error of advocating for myself, all of my meds were cut completely and my medical records now indicate “addict/troublemaker/do not prescribe.” Needless to say, I was shocked, angered and traumatized in the extreme. I suffered dreadfully physiologically and emotionally for the first two years. As I pulled myself together and was able to get back to work a little, of course I began to see the effect of the new policies on my clients. I have heartbreaking stories of people forced off their pain meds or psych meds. Two of my clients have died as a result of this evil. I am heartsick. Case #796

C - I’m one of those people that have been forced to see a pain management specialist. It feels like primary doctors can’t offer any help, so it’s easy to send us to a PMS. When sent to a PMS we are treated like cattle. I feel as though I’ve been sent to a robot. I use a scooter as I can’t walk more than 20 feet. Case #795

S - A New York resident who worked on a General Motors assembly line for 25 years before sharp, throbbing back pain from an on-the-job injury forced him to retire. A failed back operation. A device to block his pain gradually became ineffective. The only thing that consistently worked, he says, is pain medication. A judge overseeing his New York State Workers Compensation Board disability case ordered that his opioids be sharply reduced. “They dropped me so far down that I can’t even get off the couch anymore.” Case #798

A - This experiment isn’t a result of my chronic pain. At the time, I had 3 very young kids. One was in regular medical treatment. It was sometime between his 3 open heart surgeries. He was taking several heart medications. I really needed to be my best to care for him. I had an abscessed tooth. I hadn’t slept for a few days. I was in excruciating pain. A doctor looked at me and said “I’m not writing anything for pain. It looks like you’ve had plenty.” I hadn’t had anything for pain. I also didn’t ask him for pain meds. He discussed doing a procedure, but it would be days before he could do it. I ended up going to another dentist and having it pulled. I couldn’t take the pain any longer. Case #792

S - I feel like I’m in an abusive relationship with my doctor. Why? She still holds the key to whether or not I go to sleep at night or get a muscle relaxer. If she decides to toss me, I have nowhere else to go. Case #782

B - Most places wouldn’t take me because I didn’t have cancer. That is not how palliative care is supposed to work. The fact that you do and are being treated this way is insane. Literally this was the only place I could find in a 200-mile radius. Case #781

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B - I had my first appointment with a therapist today since there are “*no other modalities*” to help me. And she had nothing to offer except acceptance and commitment therapy, which she said I already do. Case #794

L - I managed an 8-state territory with 35 employees. I loved my job. She told my boss, who really was a friend, that I was a drug addict. My boss told me I had to get tested and go to treatment to learn other pain management techniques. Case #784

Z - I have been suffering from chronic pain since 2002 from two failed shoulder surgeries. The pain doctor tried a lot of different medications until I got on a good dose of Fentanyl patches and hydromorphone for breakthrough pain. Had an okay quality of life until force tapering came along. Now there is a little quality of life. Just like almost everyone in this situation. Case #783

S - The back surgeon said they can get me standing upright but have to come off all meds first and I’m only on low doses. I just got meds restored last year. Not doing surgery/spinal fusion and have then torture me in recovery period with no meds. Animals! Case #780

A - They are prejudging before they even do an exam or speak to you. They don’t ask questions. Shame on this whole system tormenting Americans. Dark time in our history! Case #779

E - Call it an epidemic (even when it’s not), and like magic it becomes part of the CDC’s jurisdiction. Just ignore the fact that only 11% of drug overdose deaths are from prescription pills (whether they were taken by the person they were prescribed to is unknown). Case #778

W - My friend’s dad had to beg for meds on his deathbed. He had cancer and they treated him like an addict. Case #812

J - I have polyostotic fibrous dysplasia in my legs and skull. I completely lost my life and have been bedridden the last few years because pain management doctors in the entire Southeast United States don’t prescribe pain medicine anymore. I lost everything, my wife left me, and I had to move back in with my family. Case #810

D - My husband couldn’t communicate when his pain was really bad. He didn’t understand the questions the doctor was asking. I had to interpret for him. Case #807

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C - They make it tolerable for me. It could be better but I maintain a very low dose so as to not have them take them away. Case #805

M - My doctor of 20 plus years retired. My new doctor refused to write a script for pain medicine. I was abruptly removed from pain medicine that I had been taking since 2009. I had quality of life with pain medicine. Now I feel that quality is fading fast. Every day was always a challenge since early childhood. Now it's more than I ever anticipated. Just when I was getting comfortable with my new quality of life, it has been yanked away from me by someone who feels I have NO daily, OH GOD PLEASE MAKE IT STOP pain. I've been accused, bullied, called a liar, and seeker and stripped of my life. I do less and less each day outside my home. Some days I can barely walk with my crutches. Most days I use my wheelchair. Case #814

M - Last week my PM doctor informed me that "I am the type of patient the DEA specifies not to prescribe to, due to the fact that I am not able to afford their experimental treatments." He said the DEA figures "if I'm so broke, I can't afford treatments, then I shouldn't be spending ANY OF MY MONEY on medications for pain." I was in tears. Case #813

B - I wish the CDC would just back off. I really don't know how much longer I can deal with this pain and suffering. All I can get is injections or Neurontin and neither work. Case #804

L - I had a therapist tell me that I had the power to talk my body out of pain. I could take deep breaths and release it slowly and while doing this, imagine pushing all the pain out with your breath. Then repeat it over and over again until you're pain free. I was never pain free. Case #811

C - The pain is so bad that it is making me shaky. Can't get help from ER due to pain contract (not that they would help anyway). It's great to be living in a country that finds this acceptable. Case #802

R - What's the use of a long life if we're in too much pain to truly LIVE? People want me to hang on until old age, but I'm currently 40 and feel like death would be a blessing already. For me, a long life means 40 more years of my feet on fire. Case #809

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M - Where can I move to get good pain and anxiety management? I am a 34-year cancer survivor but in crippling pain. I am 43 now. I have epilepsy, damage from radiation therapy to the pelvic region and completely incontinent. I was on Ativan 1 mg 3x a day. Dilaudid and Fentanyl patch and 10 mg Ambien at bed. I was able to walk and eat. I was enjoying life again. Then they took me off and I have been suffering for almost 5 years now. Damn the DEA and CDC. If there are any doctors or states that could help me, I am willing to relocate. Case #824

S - I live in North Carolina. I have CRPS and EDS and no pain management. I've exhausted everything - ketamine infusions at my own expense, spinal cord stimulator trial, surgery, etc. The pain management doctor I used to see was "non-opioid." He left without any continuity of care, as the organization he worked for no longer wanted to have anything to do with pain management. The other pain center in my city won't see me because I'm "too complex." The third I can't see, because I will get labeled as a doctor shopper. NC is a WASTELAND in terms of even basic healthcare. The ER near me? Doesn't prescribe opioids even for broken bones, kidney stones, or sickle cell disease. They do not prescribe, period. Case #806

B - The letter you sent me in 2018 got me my meds back. Two years later I finally took off the 60 lbs. that I put on not being able to hardly move for the two years I was cut off. Case #803

B - Having access to opiates has made me live my best life. I use them to live my life, not escape it. Too low now. Case #836

T - Just recently the doctor said that he was going to have to stop prescribing the opioid pain medication. Jeffrey suffers from scoliosis, stenosis, a herniated disc, and recently had his right leg amputated. Case #785

B - When my doctor takes my opioid pain medication away from me, I will start looking for a burial plot. I have suffered most of my life with severe chronic acute pain and I will not suffer anymore. There has got to be a solution for patients that are suffering and not abusing their opiate pain medication. Case #786

C - "I am a disabled law enforcement officer. I was hurt in a car crash years ago responding to a rape in progress. The only way I've had any quality of life is with pain medication. Life has been really rough since they restricted pain medication. Also think of all the injured veterans. What a way to say thanks for your service." Case #787

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R - "I'm 70 years old and have suffered with neuropathy for almost 15 years. It's very painful, especially in my lower legs. I find it difficult to even walk to the mailbox and back. I, too, am a case of collateral damage when it comes to pain meds. I've loved to fish all my life but had to give it up this year due to the pain. Please, someone with a voice, needs to be heard for people like me. All I want is not to be in pain 24/7 and to have a decent quality of life." Case #788

P - "My pain doctor keeps reducing my pain medicine dose to the point that it's almost ineffective, thanks for our government's unrealistic guidelines. And instead of going after the real culprits of the problem (the dwellers), they're putting the blame on the doctors. Those of us really need help are paying the price for our inept government's prescribing guidelines. THIS HAS GOT TO STOP." Case #789

H - "I have been in pain since last October from neck pain that travels to the back of my ear from whiplash. I have been to all kinds of doctors, had physical therapy, had facet joint shots, cervical steroid shots, etc. with no change in the pain." Case #790

C - "I was put on Gabapentin for the pain with no results. I switched to Tramadol, which works, but now because of the opioid crisis, I am not even given one pill a day." Case #791

C - I can barely focus when I'm hurting badly so how can one control their thoughts when your brain is jumping from one thought to another and is all over the place? Case #835

C - There are doctors that still recommend amputation for a limb diagnosed with CRPS. I always tell the person to run as fast as they can and get a doctor more educated on CRPS. Amputation will just add phantom limb pain. Amputation vs RX opioids. Case #834

A - I have an actual recording of a Mayo Rep asking as their very first question "Do you use any pain medication," to a friend of mine. And they never called my friend back for consideration of admission." Case #833

M - I was abruptly taken off my opiate pain medicine when my PC retired. I was seen by his associate for a few months. He was removed from his practice by the health care group he had worked with for 8 years. The health care group now has a zero "opiod" policy, meaning no physician in their employ is to write scripts for ANY pain medicine. So that has left me in dire physical pain. I am at my wits end. Case #832

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K - "Seattle Children's eliminates opioids from Bellevue surgery center, KIRO 7 News Seattle." Case #831

B - The pain clinic my Rheumatologist attempted to refer me to did not accept me so he did nothing further to help. Four years and multiple terrible doctors that all treat me like a drug seeker only. I have given up on healthcare. I was with my MD for 5 years without any issues. Case #830

G - My mother's advanced cancer – the malaise, discomfort and depression – made her unrecognizable to her spouse, sons and grandson. Then Oxycontin and Vicodin resurrected her. I decided then I would not allow her doctor to revoke them or allow anyone to demonize the drug. Case #829

B - I have been on and off pain medication for over 50 years from gymnastics, car, skiing accidents for 35. 28 surgeries. I got tired of the labeling. Never in my life have I been treated so badly in the medical profession. I am still living with chronic pain with the second failed total knee implant gone bad. Case #828

D - If you call to try to sign up at Mayo Clinic, their registration will ask what medications you are taking, AND IF YOU MENTION ANY OPIOID MEDICATIONS, THEY WILL NOT approve your ADMISSION AND THEY WILL NOT CALL YOU BACK. Case #827

D - To make my husband take a competency test and when he declined, she asked "so are you refusing. Yes, I am." Who gives a test for competency at a meds check visit. Even asked if he drove there. I'm so happy I don't have to put up with her games. Case #826

R - I'm in excruciating pain and I'm getting sent to pain management because the new doctor refuses to continue my prescription and the pain management they are sending me to doesn't prescribe. I even got lectured saying she will take me off and not to worry, but will give me something safer. They said I only have two options for pain management and neither prescribes at all, they only do injections. Case #756

N - Tylenol only for post-op amputation is reprehensible. Ask to speak to a charge nurse or floor/unit manager if she's still having uncontrolled pain. Case #758

R - Ischemic colitis - by far the worst pain of my life. The Dilaudid was like a waterfall washing my pain away. The vomiting stopped since it was pain induced. Chronic pain isn't much better. Case #759

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D - I had an appointment with a new PM and he did write a script, however Walgreens wouldn't fill it and wouldn't give me the original script back – said I needed a pre-authorization. They wouldn't call the doc's office, and told me to do so, so I did. Walgreens told me over and over “there is an opioid crisis.” This is so hateful and bigoted towards pain patients and doctors. Case #728

D - Well it happened. I took my tramadol RX to the pharmacy and they can't fill it because it is on back order and they don't know if or when they will get more. I came home and counted my pills. I put some away for when I just can't do it anymore and what I have left is all there is. Case #729

P - I just came home from the pharmacy, Walgreens. They “ran out” of Norco, and won't have any until the next load comes Friday, maybe. Now what do I do? I will run out of medicine tomorrow. Case #730

G - I have CRPS and fibromyalgia. Recently my doctor's nurse practitioner forced me to taper back on one of my pain medications. I was told the reasons for the taper were the doctor wanted to fly under the radar. Seriously, what kind of professional excuse is this? I'm a legacy pain patient and it has negatively affected my quality of life. Case #731

A - I'm tired, I'm chronically ill. I'm in pain. I'm pissed off that tens of millions of people in pain continue to be abused by medical “professionals” and our government while few acknowledge we exist, let alone advocate for actual changes. Case #733

S - Pretty much everybody on pain meds is getting screwed over. I've been on mine for over 20 years and am treated like a drug addict. There are NO pain doctors around me who even prescribe opiates. My PCP is stuck handling mine so they never get adjusted. Then you have to fight the pharmacies to get your script filled every month. Case #734

S - At 45 MME per day, enough for a beagle, my pain management doctor refuses to further treat my chronic pain of ten years. To quote him, “if I prescribe any more, I'll be out on my ass.” It is a really pitiful situation when I have to be concerned with maintaining my doctor's employment when he is not allowed to treat my pain. Case #735

F - Since being abandoned by healthcare, I have been in torturous pain, unable to be active. I have gained weight and lost muscle mass. The loss in muscle mass has led to inability to keep back straight and in alignment. Constant, severe neuropathic pain increases. Case #736

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K - Some of us are losing the will to live. It's so exhausting to suffer in pain 24/7. Case #737

L - I was a professional visual artist in oils represented in art galleries, and have been a pain patient since 2003. I lost everything after I lost access to pain medications. Trying to get a disability. Case #738

K - This happened two years ago. I have been without pain medication. I live in a state that allows marijuana. So I went that route. I have never "needed" or desired any of those drugs. I just want the hurt to stop. Case #739

G - My pain psychologists (my first one, in hospitalization for 3 months) trained my second one, at the pain clinic but neither can force doctors to restore the medicines that have worked on me since 2001. Based on my degree of deterioration since "weaning," this will be my final Christmas, age 74. Case #740

J - I was forced to taper after 15 years and at every visit they try to force procedures. If I don't do them, they threaten to take me off what little meds I am on now. Case #741

I - My PCP in Miami was pressured into sending me to pain management where he treated me. When I was about to move, his wife came in and said "my husband worked hard to build this practice so only very few opioid meds will be dispensed." Case #746

D - CVS kept withholding my pills. I changed back to Safeway and they filled in on time and treated me nicely and with respect. CVS acted like I was a seeker, even while I was going through chemo. Horrible pharmacy. Case #748

M - I got a troubling text and call at 3:45 a.m. this morning. A CPP I've known for 4 years was desperate because their pain isn't being treated and made the terrible choice of going to the street seeking any drug. All he could find was scratch cocaine. Hours later he didn't remember the call or text. Case #752

B - I was finally out of pain meds and had mental issues from up to 3 months ago. Now I am told no. I have not left my house nor can I live on my own. I suffer DDD, arthritis, after 2 back surgeries, hip replacement, fibromyalgia as well as major depression, PTSD and anxiety. I'm so angry at doctors. Case #751

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M - A Utah veteran was cut off from pain meds. His doctor retired. The nurse told him "I'm not going to continue to prescribe because you'll only want more." Case #825

S - Maybe my family and friends that committed suicide over this mess of FORCED TAPERING won't be forgotten. Case #725

M - I too am bedridden by Killer Kolodny and his inhumane behavior pushing for the removal of anything that is safe and effective for chronic pain. I have been forced off my pain medication, bedridden and in constant pain now for 3 years. When is the pain these medications supposedly caused going to stop? Before starting them, I spent years bedridden and wheelchair bound struggling to parent my children. After I started them, I was able to go to physical therapy, then aqua therapy at the gym, and eventually became able to walk again. After tapering off (forced because of the fear my doctor was in) I became bedridden and now have a wheelchair to go to the bathroom again. I'd rather be a drug addict than lying in bed in pain wishing for cancer so I could get pain medication. Case #742

D - You should be able to take what you and myself and millions need to relieve the horrific intractable pain and allow us to have a quality life. You should be able to enjoy your children being bedridden without losing it, it is existing and breathing, that's all. I will not live like that. Case #743

D - It took years before pain medication was offered. I need to treat both pain, and nausea. I found that pain medication helped my stomach pain. With medication, a small dose of oxycodone 10 mg x4 day at the very minimum allows me to care for my autistic child. I can run with him, cook, clean, and keep up. I can be a mother and wife who cares for her family. With my complicated stomach history and past surgeries, I can't eat a full meal. I can only eat small bits when I take my pain medication (which has also been reduced to 3x a day at 5 mg). Case #745

S - I've been denied treatment for extreme pain and was told I would get no pain medication post op. Then I was told "no" because I take Clonazepam for an anxiety disorder. I was given 100 mg of Gabapentin which isn't helping the pain. Now I'm almost out of Lidocaine patches and so far, the doctor denied a refill. The new doctor hasn't prescribed anything. Case #747

M - I spend my life with meds. I was on the same dose for over 25 years (except while pregnant) and was able to care for family, home, work, and be active in my son's school as a room mom and later the PTO and community activities. I did 5K's of walking with my son to show him the importance of charity events in the community with good health. Besides my life being turned upside down, I couldn't sleep, stand longer than 10

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minutes tops, cook, clean, work, or do anything that remotely resembles being a caregiver for myself. I gained 30 lbs, so my blood pressure increased. I missed out on my granddaughter's 5th birthday along with many other big moments in my children's and grandchildren's life. I am unable to hold my (micro preemie) grandson when he comes home after 222 days in the NICU. Life without meds is not life at all, it is dying a very slow and painful existence draining everyone in my family of their hope for a future with me in it. I'm not even 50 years old and have filled out a DNR and Advance Directive with my family's support. Case #749

P - I am a 50-year-old woman who has been disabled completely since 2006. I have intracranial hypertension and suffer in extreme amounts of pain. My pain medication was cut drastically and I am not allowed more than 90 MME. I was offered medical MMJ treatment but it didn't help the pain like my meds do. It made my brain feel "high" and I would never drive or be able to tend my grandchildren like this. I want my pain to be a bit more controlled. I cannot spend much time playing with my very young grandchildren. I can't take them to the park or bounce them on my knee. I'm in excruciating daily pain. I see a pain management team that is close to 3 hours and that's one way. I go every month and risk my life on one of the nation's top 100 deadliest roads to get my pills filled at their pharmacy one time every month. Case #753

H - I am a 41-year-old female and chronic pain patient. I have been ill with Lyme disease, fibromyalgia, chronic fatigue syndrome, Ehlers Danlos and immunodeficiency for 20 years. I was accepted to palliative care after losing the ability to take care of myself and walk from untreated pain. Now I no longer writhe in pain and wish to die. I deserved to have a quality of life the last two decades of my life and feel it was stolen from me by inhumane opioids restrictions. The stress I have endured at my sickest is so cruel and unnecessary not knowing if pain leaves me wishing I wasn't here or not going to be treated. Pain patients do not deserve to be treated this way. Case #754

H - When good doctors who treat patients with effective opioids are singled out, stripped of assets and systematically destroyed in show trials, it's hard to expect any difference. Case #726

E - I had a doctor tell me that using opioids for 5 years would be fatal. I had just told him that I used them for 12 years without any negative effects. Case #727

E - I ended up in the emergency room with my whole body from waist down swollen 100x normal, during my stimulator "trial." And they still made me do it. For chronic pancreatitis, which no one else I've seen has even heard of being used for. Case #724

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H - Doctor discontinued care without notice. I was medically abandoned while taking high dose opioids and benzos for anxiety and seizures (nearly died). Unable to find a GP for basic care for over 6 years due to the fact that I was on pain medication. Case #722

K - My pain was controlled 18 months ago, my doctor left and now I am stuck at a pain clinic and they dropped me by 75%. I was below 90 MME guidelines and still dropped to 2 pills a day that are recommended, one every 4 to 6 hours. I have Klippel Feil Syndrome, Syringomyelia, Scoliosis, Spina Bifida Occulta, neuropathy, autoimmune disease, migraines, can't sleep, and they keep telling me it's the law. I tell them it's not the laws (I have Florida laws on my phone) and the CDC guidelines are guidelines. Then they change and say this is our policy. They change the rules on me at every visit. Case #721

M - If it was just a feeling, trust me, I can ignore that with the best of them. But it's not. I have deteriorated to a point that there is no return with this disease. I cannot regain what is lost. It's just not possible now. Case #703

T - Some pain management doctors still refuse to prescribe opioids if you pee positive for THC. They forcefully "taper" your medication. You can't get the relief you need. You go get some medical cannabis to help till the tap. And your doctor dumps you. Case #704

T - I've been pretty miserable. Knife-like stabbing pain starts up and it won't go away until I lay down and go to bed. Also, my new refills are tomorrow, so I have to take less to make sure I don't run out. It is frustrating to have to schedule trips and life around my pain management doctor appointment and all my scripts. I don't think people realize this. Case #705

F - What the doctors and nurses said during the Nuremberg trials "I was just following orders." Case #706

I - My grandmother was 84 and had a quarter of her colon removed due to stage 3 cancer and they sent her home with NOTHING. Told her to take the prescription Tylenol she already had at home. Absolutely pathetic! Case #707

H - I ran out of Norco 2-3 per day. It's hard to function. Fibromyalgia, CRPS, and post-septic shock have all made my pain even worse. Case #708

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F - My niece who has terminal brain cancer and whose mom has all the say over her medical care (due to neuro effects of her last brain surgery) won't let doctors prescribe opioids because "I don't want her to get addicted." Case #709

D - My doctor is retiring and is weaning me off after 27 years and it's been hell. I will lose my job and our home because I cannot work without them. Not one of the 10 doctors in the health center will prescribe any opioids. I don't know what to do. They have all broken the #1 rule of Hippocratic oath to do no harm. They are going to do great harm. Case #710

J - Had a few nights of little sleep – caught up with me today and slept until 3:30 p.m. I woke up screaming in pain. Meds are finally kicking in. Case #711

S - I've been seeing the same pain management doctor since 2003. We have a great doctor/patient relationship. He had me on methadone 2x a day along with oxycodone 80 mg./day. I lived my life. I was a productive human being. I never failed a urine test and I never ran out of meds early. Now thanks to chronic pain patients being scapegoats in the USA for the failure of the DEA, FDA, etc. We just want our pain lowered. We don't want to get high. Please let the US become a humane country again. Case #712

C - Many of us will not make it to the next draft of CDC guidelines. We need them to end this farce of a MME. Case #713

D - I have spent the whole weekend in bed due to back pain after 27 years on pain medications. My doctor is retiring and no doctor will prescribe them anymore. It's cruel, inhumane and barbaric. I never thought my life would be over at 57. I can't work, sleep normally or do any of the things I did. I just can't believe doctors will not follow the oath. Case #714

H - I'm afraid I'm not going to survive all the tapering of my meds. I would rather take my life than not be able to live with the unbearable pain. Case #715

K - My response isn't either of the two options. I have needed to increase the dose for many years, however I'm told that simply isn't an option. So I sit at the 90 MME indefinitely. I wouldn't say the pain is adequately controlled. Case #716

L - I am now on less than 10% of a 17-year stable dose. I'm glad I'm on a lower dose, but this leaves no quality of life. Initially I was forced to taper 60% in 30 days. So, I guarantee you there's a ton of patients to let you know what's going on if they're not afraid of losing the little they have. Case #824

P - I'd literally go to the doctors saying that my neck hurts really bad and have lost my upper body strength and that I can't rock climb any more. Can we do an MRI? They say that "I think you just want pills." Case #823

U - I like having my cognitive function as intact as possible. Pain with opioids I can manage. Without opioids, I'm bedridden, sleep deprived, cognitively impaired, isolated, and have struggled with depression. I'm suicidal. Case #822

G - I've been in pain longer than my doctor has had a license. That makes me feel a lot better for parents back home. We still have to fight this mentality. It's very possible that parents are not medicating their children with opiates when they get home if needed. Because of the stigma. Case #820

M - For 10 years I have suffered without the medication that for 12 years prior allowed me quality of life. So many of us are suffering and were told to use NSAIDS. The pain I have and using those meds doesn't even begin to touch. It is malpractice in the opposite direction pain untreated = suicide. Case #821

B - I've often said that I would challenge any MD to live in my body for a month, then try to tell me I don't need opioids, opioid hyperalgesia is the cause of pain, or any of the other BS we get regularly. I would bet money that within a few days they all write themselves scripts. Case #819

C - When I'm really stressed, I don't sleep and stress and sleep deprivation triggers seizures. I also completely lose my appetite - I'm a stress under eater, so I lose a massive amount of weight dangerously quickly, and become dehydrated which also triggers seizures. Case #818

C - I'm medically abandoned, don't know anyone that would deal drugs, and am allergic to fentanyl. Even in a medical and non-medical MJ state, it sets off my dysautonomia. So, I'm screwed. Case #817

P - I will tell you that I'm now glad I almost never leave my home because if fate would ever put me in front of one of about half a dozen people or so that I blame for this, I might permanently injure and disfigure them with such brutality that would defy rational understanding. Case #816

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M - I have had chronic pain most of my life due to having had polio and in the last twenty years osteoarthritis mostly in my spine. Abruptly, my pain medicine stopped a few months ago. I had a quality of life when I had medicine to calm the pain. I am quickly losing that quality of life with each passing day. I spend more and more time motionless on the sofa to try to decrease the pain. It's not working well.

I feel it is immoral to do this to me and millions of us all over the nation. I don't understand why the CDC and DEA want to pick on us. Well, it's taken me 45 minutes to write this. I must close now. It hurts to type. Case #815

E - I've dealt with chronic pain for 28 years. I've had 5 back surgeries and developed CRPS. It took me several years to figure out the right combination of medicines that works best for me. I eat right, sleep right, do a light weight routine 3x a week and walk or swim regularly. What allows me to do most of these things is the right combination of medications to include pain medications. Case #800

B - I have extreme psoriatic arthritis. I'm 39. They took my medicine away, abruptly, after 20 years, when my doctor retired. I've contemplated taking my own life so much since then. I have a 14-year-old son. Case #801

M - This all reminds me of when, before my doctor settled into giving me real pain meds, he wanted me to try Lyrica. When I told him it costs too much, he suggested I go to Canada where it was cheaper. Case #767

M - A 66-year-old orthopedic surgeon in California was desperate to find a doctor for herself. Since her early 30s she suffered from an excruciating condition called Interstitial cystitis (IC). She described it as a "feeling like I had a lit match in my bladder and urethra." Her doctor placed her on methadone and she continued in her medical practice for 34 years. "Methadone saved my life. Not to sound irrational, but I don't think I would have survived without it." Then a crisis. "Unfortunately for me, the feds are clamping down on doctors prescribing opiates. My doctor decided that she did not want to treat me anymore, didn't give me a last prescription, and didn't wait until I found another pain doctor who would help me." Case #768

K - I was encouraged by my Orthopedist to go without narcotics post-surgery. I complained afterwards, and was denied so I took my husband's prescription. A friend had a hysterectomy. She was denied pain meds, so took hers from a previous surgery. None of this is safe. Case #775

K - Since losing my doctor, I've had to rely heavily on NSAIDs and herbs. Life has been very difficult. I had bad psoriatic arthritis. My toes and hands have started to deform. I feel like this pain is zapping the life out of me. Since losing my doctor I honestly haven't tried to find another because there are not many doctors in this area

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anymore. And they cannot prescribe pain medicine. Animals at a dog pound are treated better. I did have up to date blood tests done a few months ago. My blood pressure wasn't good. My inflammatory markers were 92; they should be 13-15. Case #776

K - My 16-year-old son is severely undertreated for pain. Opiates work well, but he needs a lot more than they give him. His hips were replaced when he was 11, and they have been horribly painful since, but the doctor won't do anything. I'm at my wits end on how to help him. He has had no childhood. He hurts too badly to go to school or hang with friends, or anything a normal kid does. They are destroying my son's life by undertreating his pain. Case #793

M - Medical myths revealed I did the test faithfully with reluctance. The new doctor says I failed the last drug test. I told him that was impossible because I was taking my medicine daily as prescribed. My caregiver was with me and told the doctor that she saw me take my medicine. The doctor called him a liar. He told me he wouldn't write any script for pain meds because I had lied to the DEA by failing the test. It showed I had not taken any pain medicine for the last six months. Said I must be selling my pain medicine. I didn't deserve to be bullied and removed from my pain medicine. No doctor will help me where I live. I can't even get in to see a doctor in the small city where I live. It's a mess and I get to suffer because of their authority over me. Case #814

N - 98% of problems are due to the CDC. I truly don't know how much longer I can stay in this fight, this madness, this torment and this torture. Constant and chronic pain isn't something you can deal with for a long period of time. My organs are starting to shut down. I am blacking out constantly. I am having cardiac issues. I am in so much pain that I pray to God to take me. I have begged my adult children to please not be angry with me if I take my life. I want to be here. I want to see my grandkids grow up. I want to engage in life again. Case #774

M - I am a 54-year-old female with chronic pain neuropathy, osteoarthritis and fibromyalgia. I was in an accident in 2006 and had laminectomy and spinal fusion. After surgery my pain steadily increased. Even though I constantly explained to my nurse practitioner that my meds, which I had taken the same dose for years, all they wanted to do was suggest yoga, exercise or multiple nerve block injections. And the last few years openly denied any dosage increase requests. Then in October/November 2016 my nurse practitioner called me in for a random pill count. By the time I reached my car, she called me to tell me I had been "released from their pain program." I was in total shock. (I hadn't called early to get an early refill.) I just spread out my remaining pills until my next refill date. I asked what I should do. They never got me into any rehab programs and I'd taken opiates every single day for 13 years. Their words? "I suggest you wean yourself off." They did call me in a week for some withdrawal medication. To say the next month was hell is an understatement. The withdrawals were worse than anything I've ever experienced. I went to get a medical

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marijuana license which I take daily. It doesn't give any relief and I suffer constantly and it's nauseating. What rights do I have here? Or am I just screwed? If I can be reinstated to opiates, at least I'd have a better quality of life. I'd had suicidal thoughts several times. Case #837

T - I am a 60-year-old disabled woman and have end stage Ankylosing Spondylitis (severe pain in every joint and internal organs). I've had 19 surgeries since 2003. I can no longer drive due to being incapacitated, unable to use arms. I've been on and off opioids for many years due to my disease. My current pain management doctor is an hour away. I pay privately, however; I can't drive to appointments anymore and can't afford \$200 a month. Here is my dilemma. Every single pain management office I've called has denied me. Every single one. I actually had a receptionist start telling me every opioid I've ever been on. I was absolutely stunned and asked where she was getting her information. She said she wasn't a nurse. "I answer the phones and since you're looking for pills, I have access to your files." Finally, the new doctor came into the room and said "oh what are you thinking? I don't even know you. You could be a heroin addict and you want me to prescribe you pills?" He had all my medical records. Every last one. Then he turned me away, refused to refund me and said "don't come back." Those are only two examples of what's happening here in Florida. I have never felt so degraded in my life. I still owned and operated two different companies and had a life. I was able to send both my children to college. I owned my own home and had food on the table. Since 2018, between a horrific spine surgery and no longer being able to work due to pain, my life feels over. Now I lay on my bed 22 hours a day. Case #769

L - I definitely want people to know how bad it is. I'm sick of wasting my life because I'm in pain. I can't sleep and my quality of life is horrible. Case #772

L - I'm a disabled veteran. I have been without pain treatment for 5 years. Now I'm a prisoner of pain. Case #764

C - Well it's happening to me now: Walgreens is now unable to let me pay cash for my pain meds that insurance won't pay for because it's "over the plan limit," i.e., it's over the 90 MME in the endlessly harmful 2016 CDC Guidelines. Who knows if I can get a doctor to do PA, never would before. Case #760

R - Doctor, I had a legitimate reason for opiate pain management (failed 6 level fusion), but almost overnight was flagged and thrown under the bus because of an abuse of power. I'm a former Vet and am aware of needless suicides because of this abuse of power. Is there any hope, in the near future, of bringing back humane pain management? What hope do I and the rest have? (options?) Case #761

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N - I am a 58-year-old female. My opioid medications have been reduced to half the dosage I need and had been managed on for 12 years prior to this guideline. For a short time, I was denied any medication and abruptly stopped without any care. Without my pain medications I am in so much pain daily that I spend most days in bed or laying on the couch. I can't stand to cook meals or walk any distance. The pain causes me to feel so much fatigue and am short tempered with family members. I feel completely helpless. When I have pain medication to help me and I am able to do more daily functions. I always feel pain but it's lowered... dramatically with pain medication. I can do more daily activities without a lot of help. My attitude is better with my family. Case #762

K - I can't even get 50 mg Tramadol to save my job to pay the bills to the doctors. They won't give me pain meds after I've literally tried every alternative available. Case #763

C - After being on the same dose for over 15 years, my doctor left the practice and her last appointment. She told me I no longer need my pain medication, yet is leaving it up to the next person who sees me. I said this is why people commit suicide. You want to just let me suffer? Most of us wouldn't know how or where to obtain street drugs. And from what we've read, it's quite expensive. We live on a small disability check. Case #717

Z - This one was difficult to answer. What my neurologist did was what he called a "Vicodin holiday" in order for me to not build up a tolerance, he found that Tylenol 4 worked almost as good as my Vicodin, so every 3-5 years he would prescribe the Tylenol for 4-6 then put me with no increase in dosages for 7 years until CDC guidelines change. Then cut off cold turkey. Case #718

B - I've never had it before a procedure, but I have gotten it after. It just made me relaxed. Never felt high or "goofy" with it. If anything, I am just thankful to have relief from pain. Case #719

S - I will also note that a 12-hour extended release only gets me 6 full hours of relief, sometimes 8 partial relief, and that's it. After that it is back to zero. Never more than eight, ever. Case #720

A - Years ago I got a letter from my doctor saying I tested positive for pain medications I was not on and had not taken. It was an error for sure and luckily, he didn't "fire" me. I got the letter before a 3-day holiday, was in a total panic, and cried 3 days solid. Case #702

A - In my years of nursing we would even mediate unconscious patients when we saw the heart rate and blood pressure was elevated. A lot of people will die of postoperative, untreated pain. Heart attack, strokes and pneumonia. New system counts bonuses, not bodies. Case #701

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T - I made the decision to stop seeing any doctor after the last one verbally abused me loudly for everyone at the office that day to hear. He had refused to give appropriate care even though I tried all the things he wanted me to. I shouldn't have to pay for abuse. Case #700

D - They did that to my best friend. The last ten days of his life were agony after the doctor cut him off morphine, concerned that his cancer was in remission and this would be a long-term pain patient now. He died ten days later and he was in too much pain to finish any sentence. Case #769

S - With what I have to go through to get my daily 30 mg, I honestly think I would rather just do heroin if I had a good source. Case #770

L - I threw up all night (in the hospital) and into the next morning from untreated pain because they insisted on no more than 1.5 mg Percocet every six hours. Case #771

E - What kind of a society have we become to treat our wounded veterans, disabled citizens, hospice and nursing home residents, and victims of genetic disease severe, auto-accidents worse than enemy combatants who per the UN cannot be tortured. Case #772

S - I recall a discussion my father had back then with his mother's doctor – she was about 80 and had advanced Parkinson's disease and was in considerable pain. My father asked why he couldn't give her something for her pain, and the doctor said "because she might become addicted." And my father said "but she's dying" and the doctor repeated that she might become addicted. Case #773

L - Even though I'm under palliative doctor's care now, he's still limited to around 275 MMED by stupid MassHealth. Right now I'm in so much pain I'm wishing that I hadn't fought and won against Stage IV metastatic breast cancer. Case #774

E - I have been on this chronic intractable pain, illness and medical refugee train for nearly a decade. Last year I began to sense that there was growing pressure on her about prescribing high doses of opioids, so I asked if I should worry about her cutting my meds or passing me off to another doctor. She assured me that she would do no such thing. At my next monthly visit there was a caseworker present for my appointment and was told the dose of my fentanyl patch would be tapered significantly lower. At the next monthly appointment, I was told that I had to choose between anti-anxiety meds and pain meds. Now that my meds are tapered, I have pain flares daily. Now my life has crumbled. Case #899

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U - It's a shame. I was cut by 50% and have found that a basket of other stuff helps bridge the gap. Creams, gels and kratom mostly. I do fear the day that I lose everything. I care for my disabled 20-year-old son. Without RX pain meds, I don't know if I could do it. Case #900

C - I'm on both. Benzo was Rx by my neurologist for insomnia and seizure control. Opioids do adhesive arachnoiditis and other painful spinal conditions. I was forced off the benzo in 2017. After years of suffering seizures and insomnia, my doctor put me back on it. Tonic-Colonic seizures. Case #901

A - I call it #ID - iatrogenic stress disorder. 100% caused by the way we're shamed, abused and abandoned by our CSP's (aka medical PTSD). I had one pharmacist that looked at me like I was something he wanted to scrape off the bottom of his shoe for filling opioid RX. Caused crippling anxiety. Case #902

J - I've had doctors ask me if I was seeing anyone. I've been taking Celexa for years because of clinical depression. I've been through therapy, lol. The pain psych at my PM's office told me I had "very healthy" coping skills when it came to my pain. Case #905

C - I'm not getting any relief whatsoever anymore. I still wake up, after maybe days of not sleeping, and look forward to taking my meds. But I still haven't found a PMP willing to help me beyond "this will help if you believe it will." They won't give me enough to actually help me. Case #906

U - I am in the same boat. My doctor has informed me he will never increase my dosage no matter what. This is because of the CDC Guidelines and his fear of getting on the blacklist. Case #907

A - I had a moment of total disappointment that came out in my words, angrily. Primary care doctors have literally been thrown under the bus, yet they did NOT stand up and FIGHT for themselves, or their patients in the beginning, when all of a sudden LAY people were making decisions for them. Case #908

Y - Patients can no longer trust or believe that they are receiving proper care and have to educate themselves to prevent being harmed by their doctor. If able it may be necessary to pay for their own diagnostic tests which doctors no longer do since they stopped practicing medicine. Case #909

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B - If I were permitted to take Ativan, I would be able to halve the amount of pain medicine I am prescribed. NOPE. But SSRI/SNRI meds? No problem. Too bad if this stuff makes you sicker. Learned the hard way. I feel bad for the good doctors left. Case #910

A - Omg. I wake up almost every morning with my whole arm either pins and needles or just dead (takes about 15 minutes to two hours to come back online). I feel like I'm being stabbed in the neck, shoulder, chest and armpit while being hit in the wrist and funny bone with a hammer. Not fun. Case #911

A - I could use a little prayer today. My legs are in so much pain and the RLS is insane. My entire back feels like I am crushed under something. I'm grateful for low dose meds but it's just not near enough to stop intensity. I'm even crying today. Wish it would stop. Case #912

A - Weddings are hard. Especially if there's a lot of standing and sitting in the church. I hope it doesn't hurt too bad. I'm patient. Case #913

J - I had to stop my NSAID and muscle relaxers because I've been sleeping only 4 hours then waking up and vomiting stomach acid and blood. I've exhausted all options and opiate medications are all I can take atm. PCP won't prescribe so I was seeing what I could do to manage pain. Case #914

P - All this scare mongering with opioids inspired me to go off opioids 3 times to see my quality of life without for one month. To see if the agony reduced. It did not, but intensified. It only increased my level of disability in society. Total isolation and non-functioning. Case #915

J - I'm trying to keep this about how the CDC made my life a living hell. To do away with pain meds I had no issue with, now I'm on 10 mg Flexeril, 4 mg Tizanidine plus my 2 mg Clonazepam at night. That's a lot of sedatives just to avoid prescribing Tramadol. Case #916

N - My PCP gave every patient the same choice of SCS or methadone with a rapid taper. I was caught in that while staying with an older sister after rotator surgery. Every refill was cut by at least 25% and no one would RX me out of state. Case #917

J - This is part of my issue with just pulling pain meds they had nothing to fall back on. Now, instead of trying to find NEW meds, they're repurposing old medications that were taken off due to inhumane side effects. This is not okay. Case #918

J - I'm only getting 4 to 6 hours of sleep a night, brain fog, migraine in a flare up with cervical nerve root bundle C5 to T1 compressed, atrophy, contractures, muscle spasms, nerve pain is evil. It takes me 4 to 6 hours for coffee, brushing my teeth and shower. I cannot shave. Case #919

RECENT RESPONSES

L - For me, opioids have been the only thing effective for my fibromyalgia. I spent years and a lot of money on other RX (PT, acupuncture, cranio-sacral therapy, non-opioid meds, etc.). I can function and do basic tasks with opioids; without, I'm in horrible pain and in bed. Case #920

B - My doctor winced when I said I'm only asking for the lowest dose of the weakest form of opioid. Next came the six-week tramadol nightmare and now I'm afraid to go back. I will. I just have to work up the courage. Case #922

C - I am a physically disabled veteran. My condition has rapidly advanced since being immobilized by untreated pain. It's a vicious cycle. The pain can get so intense that I can't sleep, then it's a real nightmare. I cry trying to get up even to the bathroom. So, the fear is as ever-present as the pain. Case #923

D - I have heard many say that their doctor said "I'm not willing to risk my medical license for you." While I believed them, I was in disbelief that doctors could care so little about their patients' wellbeing. Less than a year ago, my own doctor said it to me. Case #921

D - Please let me know what articles deal with the CDC's change of mind? I would be so grateful. They've tapered me back pretty far, but I'm still okay as far as pain control goes for the most part. I hope you're well. You're a good person. Case #924

J - The doctor at the pain clinic was about to inject my hip joints with steroids to control my pudendal nerve pain. I asked him what chance that had of easing my pain. He was 0%. Yet he would not object to doing that to me. That is just malpractice even if his boss said to do it. Case #925

D - I live in constant pain and in constant fear of losing what relief I do get from my pain medication. This crisis is not my fault and persecuting me and others like me isn't going to put a dent in the problem. What will happen when word gets around to soldiers and first responders that if they get permanently injured their pain will not be adequately treated and they should think twice about putting themselves in harm's way. Case #926

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J - Nothing has changed my doctors from returning my medications and I cannot find any doctor who will continue my care. 27 years is a long time, that's how long my illness has lasted. Doctors are not following their Oaths because states are threatening to revoke licenses. Without these medications I would not have been able to work all this time. I am on the verge of losing everything after the doctors lowered the dose so much that I can no longer perform my job. Case #927

M - I feel I'm being under treatment for my pain and I'm harassed every time I go to the doctor he wants to taper. My doctor openly told me he's anti-opioid and that I need to learn how to suffer. Case #928

D - The VA's definition of chronic pain is pain that remains after an injury has healed. My health issues will NEVER HEAL. So, I am cut off from healthcare and treatment in the hopes I will die. And many other veterans too. 7+ years without treatment. I am dying. Case #929

M - They will hold my husband's Norco until it has been exactly one month from his last refill. Makes it very inconvenient if we are out and about a day or so before or are planning on traveling. Their reasoning is to "prevent him from overdosing." Case #930

D - First they dropped me to 90 MME, per the CDC guidelines, and have randomly continued force taping until I'm taking 1/3 of the meds I need to be fully functional. I'm disabled, but they created this disability. Case #931

N - When asked "how long have you gone with less than the previously effective dose of opiates." Replies were: 12-18 months 11%. 18-24 months 5%. 2-3 years 21%. 3-4 years or more 63%. Case #932

D - Adequate pain control so I can SIT in my wheelchair instead of lying face down while my muscles continue to atrophy so badly, my heart and lungs struggle to function properly. But should I just "accept reality" or do more to help myself? You are delusional. Case #933

B - I've been trapped in a room in a bed for two years now. Rarely open the curtains because I need to sleep whenever I can. I just watch dates and weeks and seasons as the years go by. Not gone but not here. Fighting back though. Case #934

S - I am truly sorry for what you're going through. I can get around but the pain can be so unbearable that I want to leave. I hope and pray for healing because it breaks my heart. Case #936

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D - I tried to see 14 doctors after my doctor was arrested. Was upfront with them about what I was RX at the time. Not a single one would even make an appointment for me. I ended up having to go half across the country to Texas for a doctor another #cpp convinced to take me on. Case #937

H - All I want to be is the original me for some of the time on some of my days. Is that too much to ask? Case #938

R - It is amazing that so many hundreds of thousands of lives hang in the balance. As the constant struggle to live without #CPP meds remain in play, more people are dying from lack of treatment and compassion. As it may be soon stuck in the courts and #CPP still has a target on their back. Case #939

J - I feel like I've been abandoned by healthcare altogether who stopped taking them due to laws. Case #940

B - Have been getting form letter responses pumped out by staff. The people who SHOULD be reading them are obviously not doing it. Sadly, those of us who are barely alive search far and wide for the energy to just survive one more day. Case #941

P - Have been trying to move out of state for 3 years. I can't be without pain meds. Neuropathy is horrible. Trying to find a doctor is impossible. 65 years with possible cancer relapse. Once won't treat my pain, rheumatism doctor does. Case #942

S - I've been referred to a couple of specialists for my CRPS. I lost all pain meds in June, 2020, and the heat in my feet is almost unbearable especially at night; and I'm on maximum Lyrica dose. Case #943

M - A 14-year-old girl from Tucson was denied a refill of a life-saving prescription drug she had been taking for years. She suffers from debilitating rheumatoid arthritis and osteoporosis. Case #944

A - Please share how you managed to find a doctor willing to prescribe pain meds in this anti-PM country. I have been trying to move out of state for 3 years. I can't be without pain meds. Neuropathy is horrible, trying to find a doctor is impossible. Case #945

K - #Chronic Pain. A friend of mine was told this week that he won't prescribe gabapentin, Lyrica or Neurontin. He said they were opiates. What? Case #946

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S - From what I've heard, med schools are pretty much teaching RX opioids are bad = 0 RX opioid policy by new doctors. I was diagnosed with addiction by a newbie doctor (9 months out of school). I was on long-term opiates for years and was religiously monitored every three months. He took my RX away after two calls. Case #947

L - Untreated chronic pain is killing us if anyone cares. Case #948

C - Well my worst fear happened today. My pain management doctor is retiring and other doctors in the practice are unwilling to continue prescribing my former meds. Case #949

E - I criticize US psychiatry and its fantasies of itself because I believe the first ethical duty entailed in working within any powerful institution is to hold it accountable to its claimed oath. Case #950

B - I'm in too much miserable pain to do small tasks around my home. I am not physically able to work for change. Many doctors themselves have not shown the courage to change the system. How are we as "just patients" expected to do so, when input is already discredited? Case #951

E - I could catch a flight to go see her. I had to see my doctor on Wednesday so I booked my flight for Friday to make sure the pharmacy would have my meds. My mother passed away Thursday morning. I never got to see her all because of the BS around "early" refills. Case #952

E - Having zero meds is the worst. Without it I would have been bedridden and unable to get out to find a doctor that would prescribe my meds for me. I did rush the taper, but kept filling RX so I would be able to medicate myself to get to doctor appointments. Terrible choices we are left with are sad. Case #953

P - My last refill came with a RX for Narcan and I had to pay a \$45 copay. I was afraid if I declined to pay it, I would be in trouble with my doctor. Nothing like trying to make a responsible adult feel like an addict. Case #954

J - I have to get these injections in order to get a tiny amount of pain medication. It would be one thing if I was getting my full dose of pain meds, but the injections make me hurt more and the little I do get barely touches my regular pain. Case #955

J - I take my meds as prescribed, never doctor shopped, or fail a drug test. So, I shouldn't have had my meds tapered. I've been on them since 1995 so of course I need a higher dosage than most, but it doesn't seem to matter to the DEA, CDC or PROP. Case #956

J - If I didn't misuse, or become an addict, why shouldn't I be able to have what helped me to function to my highest abilities? I'm not a criminal and shouldn't be treated like one. Case #957

S - Been there done and ended up with nothing. Now I don't complain about the less than 99% of meds I used to be on for 17 years. After going through nearly 1.5 years of nothing, I don't complain about 30 MME. Case #958

J - I'm just so tired. The deprivation of a 5 mg tablet that would let me walk is cruel and emotionally devastating. If I had more strength and energy, I would try to contact authorities like the ADA or senator. I always wake up when they're almost closed. Case #959

A - Sadly my PCP abandoned me as soon as the CDC guidelines started, even though she did not prescribe my opioid and even though she saw me through 5 brain surgeries and we were friends. Case #960

A - Before they reduced my long-standing pain medication, I used to go out two times a week just to get out. Now it's more than two times a month and one is to the doctor. I used to go outside even just to sit out in the sun. This summer I did that once. I would go in the pool with my kids, even night swimming. But I didn't go to the pool this year at all. I knew getting in and out would be too difficult. I've become a hermit. My kids suffer too because I'm here but I'm not. Case #961

A - Oxycodone also gave me a bit of energy, improved my mood (mostly because I felt better), so I was able to do more when I had them. Case #962

A - Last year we went to Gettysburg and I spent half of the trip in the room. The bed wasn't adjustable so I couldn't even get comfortable, so I just laid there bummed out. Case #963

A - I just want to feel well enough to be a mom and advocate more than I am now. Case #964

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P - The original pain clinic did not want to allow me any pain relief, but the nurse sent to give me the boot wanted to help me, so she was telling me where to get help by telling me where to get help by telling me how inferior the other clinic was because they prescribed opioid pain meds. Case #965

A - My last severe flare wiped me out; eyes and face were swollen. Followed by three days of sleep, so weak I couldn't get myself up to go to the bathroom. The muscles around my ribs where so tight even breathing was difficult. I could barely talk to ask for help. My opiate has been cut for no reason. This did not happen when I was on a proper dose. Why in God's name was this done to me without my permission. Case #966

K - The last time I went to the ER I suffered all night (screaming into a pillow to not wake the house) and was septic by the time I finally went. I'll avoid the ER at all costs because I refuse to be treated like a junkie. That was almost 7 years ago and I haven't been back since. Case #967

J - Not sure what I did wrong besides suffering from pain but the urine tests, pill counts, monthly appointments, not being believed, scrutinized all make me feel like one sad person. And they wonder why even with our pain controlled, we don't want to live. Case #968

B - My dog died from cancer. Got nothing for pain and we had to watch him literally suffer slowly to death for his last couple of months. Had multiple violent seizures and puking from the pain on his last day on earth. Disgusted! Nobody and no animal should be forced to suffer to death like that. Case #969

J - Was very helpful for both my pain and severe anxiety. Then forced to choose one or the other. Choose pain meds, pain meds that cut down to almost nothing. Pain and anxiety are back in full force with no relief in sight. Case #970

T - I'd move somewhere where I could grow my own poppies or to Czechia, the Netherlands, Portugal, or Switzerland where drugs are decriminalized. Hell, I'd move almost anywhere where I wouldn't be treated like a criminal because of my pain. But I'm hearing it's hard to find lately. Case #971

B - Last year I had a kidney stone blockage that needed two surgeries. I was given no additional pain meds. It was torture. I kept messaging the doctor through MyChart and calling. I was completely ignored. I almost didn't make it and was refused help by the ER as well. Case #972

P - A neurosurgeon last year told me they could fix my back, another fusion, but I had to come off all meds beforehand. What about my CRPS? Oh, not their problem. Yeah, doctor, I'll be back when you have some ethics. Never. Looking for another now. Case #973

D - The third Texas doctor just refused to prescribe my established (14 year) medicine regimen. All I did was cross state lines. My symptoms did not change. Case #974

E - Respectfully, my PC's practice has a "no opioid RX" policy. I did get her to see the positive when she watched me go from me to wheelchair bound, hunched over hell and back to me. I not only felt like death the year with no RX, but I looked at it. But how do we approach practices with policies? Case #975

E - I should clarify. Previously my quality of life meant lying flat on the floor in agony; not sure how much more. Opioids made a dent. Before finding this MD, I'm working accommodated hours, on advanced uni prog and feeling like life might have some enjoyment to squeeze out of it. Case #976

D - That's just it. I've had this disease for 31 years. I've already jumped through all of the hoops. I shouldn't have to do it every time I change doctors. There's this thing called continuity of care. It used to be the rule, not the exception. Why do I have to prove it every time? Case #977

D - The only thing that helps is prescription medication. I've tried everything over the counter, meditation subconscious, crystals, journaling, and read all pain books. Medicine is tried and true. Only way to really live. Progressive relaxation (sometimes) helps to fall asleep. PT attempts = nothing. Case #978

A - I have a Tachycardia wish that was always managed very well with benzos. Then they just decided to take them away and stopped writing Tachycardia as a diagnosis in my chart. I didn't make it go away. They just choose to ignore it and me. Case #979

I - I had a very early doctor (2003) tell me that pain meds don't work for FMS pain, and called me a liar when I said the one, I was currently taking DID help mine. Pain is pain...period, regardless of the generator. Opioids mute pain receptors in the brain. Case #980

A - I reported an LPN who cut me off pain meds and never even met me and her doctor friend whom she sent me to who wrote damaging things in my chart and refused to see me past the first day. Case #981

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B - I've had chronic kidney stones for 28 years. Due to the damage, it caused, they get stuck and have to be surgically removed. Last year I had 2 of these surgeries, one month apart. The doctor ignored my pleas for help, lied to my face so I'd have the second operation, and let me suffer with no pain meds. Case #982

E - I now have a huge gap between where my quality of life was when I was on higher doses of pain meds versus now. Since I don't see getting significantly more meds anytime soon, I'd love to find something to help close that gap. I still spend too much time in bed. Case #983

J - That's my pain management doctor's excuse to take me off my 33 years of being on pain medication. He said I should really look at coming off my pain medication due to their finding that long term use causes more harm than good. I told him to show me the studies and he left. Case #984

S - While I was on that dose, I earned a double major and triple minor BS, ran a house painting business with 16 employees, went downhill skiing, played racquetball, socialized, volunteered, and pursued my happiness. I can only dream of a life now. Case #985

T - I've had Fibromyalgia for over 25 years. It is a living hell. He eyes rolls; you can just feel when you mention you have it. The pain never stops. Opiates saved me from taking my life in my 20's due to pain. Now the doctor is suddenly retiring. I won't go back to zero quality of life. Case #986

K - A lack of sleep has been a serious problem for me since I was taken off my pain meds. It feels like I am being beaten with a 2x4. Every injury I have had over the years is intensified. Case #987

S - I'm curious. Does exercise or increased activity make the pain and/or fatigue worse? This past January, a pain management professional told me opioids don't work for fibro (regardless of my experience) and that I needed more exercise. They would be forced to wean me unless I could find another doctor. Case #988

M - Science there's no reply yet let's assume it was as much help as yoga, mindfulness, various oils and all the other stuff they are selling. Except opioids. Which works. No side effects. We can function. Instead of lying in bed and being yelled at by family. Bitterness much. Case #989

S - They dropped me altogether because "opioids aren't indicated for fibro" but I was given two months before a forced wean was started so I could attempt to find a new doctor. When I asked what I should do for pain, I was then told to go exercise because studies show exercise works for fibro. Case #990

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S - It came about when pm got new management. In October of 2021, my then NP said things making me nervous. I started weaning myself slowly to build a reserve of meds. I'm so glad I did. I found an old doctor but he couldn't help. He wrote me one pity script in May. Now at a miniscule dose for withdrawals. Case #991

N - I don't know how I made it alone with pelvic fracture CRPS and pudendal with no meds. I lost doctors because they did not want to be associated with my bad diagnoses. I couldn't find anyone to order me a CAT or MRI. Case #992

S - Physically disabled veteran. This puts people in a state where they can't visit family or take a vacation or go away for a month or two. What if everyone they love is a few thousand miles away? If I never see them again why bother. They're much of why I fight for my meds. *(Ed. this is because of barriers to filling prescriptions for more than one month at a time, by insurance and pharmacists)* Case #993

T - I understand the struggle all too well. Unfortunately, my pain is now so severe, and what I do get is barely cutting the edge off. I don't dare miss a dose as within hours I would be hurting myself against all my beliefs. It is crazy making. Case #994

J - Asthmatics aren't shamed for needing their inhalers. Diabetics aren't humiliated and force tapered off insulin. Cardiac patients aren't chagrined for needing Nitro or people who need blood thinners their doctors don't look at them with disgust. Case #996

M - I had Medicaid in Delaware and my doctor had to taper me from 4 IR pills/day to 2. Case #997

P - Everyone who comes to me says "I don't want to die, but I can't live like this." Actions that appear desperate are actually a rational response to an irrational situation. We know - there's a level of pain you will risk your life to lessen. Either the pain ends or you do. Case #999

S - My primary doctor discharged me because I complained about the lack of pain treatment, I've been receiving from my PM. I asked them multiple times to get me a PM physician to control my pain. The NP tells me maybe I should travel to other states; there's zero accountability for mistreatment. Case #1000

R - I have tried to taper. I can't, and I am done trying. My doctor will be retiring soon and I will find another doctor that will work with me. I strongly believe that. I am 65 years old and am exhausted from suffering. Case #1001

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T - My new palliative care nurse that gaslit me last month is counting my pills every month, and writing the day I can pick up on the script so I can't pick up more than 24 hours in advance. She did not even care about the shortness. Case #1002

C - I wish you were my doc. I did everything I could do before brain surgery to let all know what I take daily for pain. (Ironically, the surgery was to take some pain away). Sure enough, I woke up in the IC without enough. Screaming for help. Didn't want to undo the delicate surgery. Case #1003

D - For the first time in 7-9 years, I went to a new psychiatrist appointment. I didn't see a psychiatrist. A nurse practitioner, younger than my daughter, out of vocational training, only wanted to put me in detox after telling her I'd been on meds for over 4 years. Case #1004

N - Went to my pain doctor today and she told me I was addicted to oxycodone. Mind you I smoked 30 years on cigarettes and I quit cold turkey. I have been clean for 6 months. And she says I am addicted and need to go to an addiction clinic. I cried because she was so stupid and accused me of being addicted. She said that I had extra meds left in my bottle that I didn't take. That's what made me an addict. Case #1005

T - When my doctor gave me a limited prescription of Oramorph, I took one dose and was up for 3 days straight because my body literally didn't know what to do with suddenly feeling no pain. It was like something inside went "Holy moly! Do NOT waste this moment." Case #1006

K - When pain is reduced you can get up and get moving. Staying sedentary makes it worse. Inflammation goes down with adequate movement. Yet there's a fine line for me. Overdoing it doesn't help inflammation either. Case #1007

J - Next comes production cuts in RX benzos, because patients have taken the combo safely for decades. But we now have street OD's containing illicit opioids and benzos, so let's have more useless misdirected torture to kill off #PainDisabled patients who take them as RX-d in order to survive. Case #1008

K - When I take opiates all of a sudden, I get up and take a shower and exercise and cook a meal. Without them I lay in bed and order door dash and piss in bottles and don't shower for months. I have polyostotic fibrous dysplasia, a 1 in 75,000 genetic disease. Case #1009

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J - I'm so sorry. My brother will be gone 5 years today because he was forced off his meds. After CDC 2016 guidelines he tried suicide but was saved. In 2017 he decided to go to the streets because he felt alone with no help in sight for his intractable pain. No doctor would take him so he overdosed November 22, 2017. Case #1010

E - The "even one person harmed is too many." Without meds we are all harmed. I know on the itty-bitty amount I got back I'm living in far more pain, with far less mobility than I would have otherwise. I want a higher quality of life back. Case #1011

L - I hide. I don't even want to be around myself when the pain gets so bad. If I don't, I'm afraid the mask will slip. Case #1012

J - They should have developed an alternative to opioids before taking them away entirely. That would have been the smart thing to do. IMO no CPP should feel shame for whatever medication they feel works best for them including opioids. Case #1013

S - If MJ helped my pain, I wouldn't be in pain. Opioids were my saving grace until tipped away (July 2020). We must return to the days of individual health care. Case #1014

J - I totally get no sleep. Can't lie down for more than 2 hours without severe pain (of 8 on pain scale) waking me. Am okay while on my feet. This has been going on for 2 solid years. I just get up and pace the floors. Have one Tylenol #3 and I'm not getting it. Case #1015

B - Living with constant pain is exhausting. It takes all our energy just to survive some days. Pain meds allow us to give energy to something other than barely hanging on. Case #1016

M - Anytime I go to the ER; I'm opioid intolerant and they don't believe me. I get bad migraines and have chronic pain, allergic to antidepressants and anticonvulsants used to treat pain. It's hard getting treatment and they think you're seeking narcotics. Case #1017

J - That's funny. My pain doctor just told me that they have found out that a long-term use of opioid pain medication doesn't work. My reply: wow, really? I've been on them for 35 years with no problems or side effects. Doctor walked out with no reply. Case #1018

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K - I have Multiple Sclerosis, and my chief complaint is pain. Six years ago, I fractured 3 vertebrae; I can't stand or walk. I have been on methadone for 32 years for pain and it gave great pain relief. They want me off of it, only to go backwards. Case #1019

L - Not to mention the constant battles with my pain doctor reducing my meds even though my spine continues to deteriorate and my pain worsens. I'm headed straight back into a wheelchair but quality of life apparently isn't important anymore. Case #1020

A - I have CRPS and I have to take my husband to appointments to get doctors to believe me when it spreads to my face and eye. Pain doctors didn't even let me take off my mask. They said it was trigeminal neuralgia. Didn't listen until I lost the ability to chew multiple times and lost the use of my left eye. Case #1021

J - The doctor nearly patted me on the head telling me he's been an orthopedic surgeon for 40 years and he was certain that my pain was just muscular and that I needed a steroid shot. It was a thoracic outlet. I had no pulse with my arm over my head. It required surgery to fix it. Case #1022

D - An opioid helped with my gastroparesis. Obviously, my POTS (my arrhythmia) worsened so much after 17 years. Case #1023

F - You've got to become a professional patient and you've got to learn how to read doctors and what works best. It's not that simple. It's pretty nuanced. That's a great rule of thumb to start with. If you get nowhere with that approach, do your research. Case #1024

R - People are killing themselves in America because they are being denied treatment for pain. Let that sink in for a moment. Killing themselves because they can't get help when they are sick and in pain. Case #1025

S - I have been tortured by forced tapering, denied the dosage that I need, and pharmacies never having it. I have intractable incurable pain syndrome, severe advanced scoliosis, stenosis arthritis Lyme, fibromyalgia and more. I suffer from excruciating nerve pain 24/7. I have had every procedure, surgery, medication, treatment and nothing else helps except oxycontin. My life has been taken from me, leaving with only unbearable excruciating pain every second. This nightmare must end. Case #1026

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B - I've been experiencing it for two years. I'm so deconditioned that I can only be up a few moments if I had something to manage the pain, my energy comes back but the pain siphons my soul. I hope I can get help soon. It never made me drowsy. My life was so in order. I miss being me. Case #1027

S - I am a physically disabled veteran. Clonazepam was my wonder medication. It helped with sleep and controlled my seizures. After 22 years, I was not allowed to take it in combination with opioids. I suffered horribly until my doctor decided that my seizures were a problem. Becoming catatonic from inflammation scared him into prescribing medication. Case #1028

M - I was approved for a pain pump in June of 2022, but almost six months later I am still waiting as the Psychiatrist switches practices. Am trying to stay positive through excruciating pain. Case #1029

A - When these #PROP folks say #OPM doesn't work, I remind myself that when my peripheral neuropathy is at its worst, it was tiny fairies that flew in and gently sprinkled dust on my leg and magic happened. My pain went away about 80% for 4 hours. Case #1030

T - I know I'm far from the only #CPP is currently in miserable pain, just from sitting at the table on Thanksgiving. Showering about killed me, but my mom is all I have left. I was not leaving her alone on a holiday. I feel like I'm shattering into a billion pieces. Case #1031

S - When I was at that high MMM, I was able to work full time, take care of my house, and raise my daughter. Thankfully I wasn't forcefully tapered until after she was grown up because at 9 years old, she answered my doctor's question with "I just want my old mom back." Case 1032

J - In 2016 I had a physician not tell you that he was tapering during appointments; he had you go back out to the waiting room to wait for prescriptions when you'd find out when you got scripts that you've been tapered. Case #1033

J - 1000% makes it better and more tolerable. No question about it. I went from spending my days in bed to being up and doing things. Case #1034

K - If I die, I would love nothing more than to haunt the hell out of these guys. Right when they're trying to have a great time just the ghost comes into the room and freaks them out. The whole thing has been a joke, but they're digging in hard. Case #1035

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A - I have no words anymore. My life is decimated; there is no hope with a government and its diabolical enemies HELL BENT ON KILLING PEOPLE IN CHRONIC PAIN. I would rather be addicted than have 0 life!!!
Case#1036

B - It's so hard to think of moving when it literally causes pain too. Figuring out the right pacing to not make it worse is really tricky. I almost forgot what suppressing the flare felt like. Everything was off. Case #1037

D - I'm 25 years older than I'm supposed to be. Case #1038

G - Pain has ruined my life. Case #1039

B - It really does feel like a Mack truck hit and run. Either that or falling off a cliff onto boulders below. I think if we were all asked to draw an image to represent our fibro flares combined with other health issues, the images would be dark and graphic. Case #1041

L - I brought the journal to my doctor who read it and agreed to the change from oral to the patch plus a bit of oral for breakthrough. My pain was finally under control. I wasn't absorbing the oral meds due to short bowel and malabsorption. Case #1042

A - It's a miracle how opiates and benzos help keep intractable/CPPs blood pressure in check. I've been in and out of the hospital as of late. While in the hospital, I was on hydrocodone and my blood pressure was close to normal. Yet when I'm released without opiates, my blood pressure skyrockets. Case #1043

X - I became disabled at 22 years old. I am 28 next year. It's not a joke when people say it could happen to you. I was going in for major surgery, and it ended up being botched and disfigured. I will be in intractable pain for the rest of my life. OPIOIDS SAVED ME. Case #1044

K - What's weird for me is no matter how high my dose was, my mental clarity was NEVER clouded/alterd. My pain was reduced to a very low level and my mind was completely normal. Maybe I am the exception?
Case #1045

L - Well, Ballard's ER thought I was a drug seeker when I was in the ER twice in 36 hours struggling to breathe. Because I already walk with a walker. I refused to leave without a CT scan. It was Stage 3 thyroid cancer and the tumors were growing into my trachea. Case #1046

D - Every doctor asks “what is your pain level from 1 to 10?” How do you avoid talking about pain if that is where they start? Pain definitely affects function; it’s hard to walk around the block when it causes blinding pain. Case #1047

E - For over a year before I was diagnosed with Adhesive Arachnoiditis and CRPS. My primary care doctor would only prescribe 800 mg of Ibuprofen. I would take 2 of these, along with over-the-counter Aleve on top of that, just hoping for some pain relief. Getting RX opioids saved my life. Case #1048

I - I’m definitely getting to this point. My therapy session yesterday was over an hour with me asking “what am I supposed to do? How much has to be wrong before I am treated with dignity? Do I have to start breaking stuff? Get loud thrown out?” Case #1049

M - As a patient with SMAS and Sphincter of Oddi dysfunction after a gallbladder removal; basically, my life is over. I’ve gone years without any pain management unless I was admitted and inpatient at a hospital. After that, they release me and the cycle starts all over. Case #1051

B - I still got prescribed but all of the other doctors refused to treat me and was sent home in a taxi 3 times. Called me a drug seeker when I had opiates. Had to have surgery. Case #1052

P - I suffer from never ending pain in a society that does not believe it is real. Case #1053

J - Aching from head to toe. Flares in knees, neck, shoulders, severe back pain. Complete exhaustion after a simple task. Feels like you have been beaten everywhere with a hammer. Sensitivity to touch and temperature. Nausea, headache. Depression, and the list goes on. Case #1054

J - My friend’s husband had open heart surgery; cut open from his collarbone to his stomach; sent home with no pain meds. But yeah, that probably helps stop illicit fentanyl poisonings. Case #1055

M - I’ve just been cut off of my opioids that I take for CRPS and can’t find anyone to prescribe them. Do you know anyone who can prescribe? Case #1056

O - They kept saying at the pharmacy that all you come here for is meds. I thought that’s what people went there for. They are kicking me out of the office because every time, at least once a month, they say my pills are short at least 2 pills. I don’t see how. It is crazy. Case #1057

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J - I just had dental surgery which was much more than just removing wisdom teeth. They prescribed only ibuprofen for pain. Needless to say I didn't sleep for about three nights straight. The opioid hysteria is insane and spreading. Case #1059

P - They've caused so much more damage and misery than ever before. I used to have complete trust and respect for all doctors. After being put through unnecessary trauma after trauma in the past almost 10 years now, it has ruined that trust. I dread the thought of just an appointment. Case #1060

A - As patients in a PM setting, we have no say so in treatment. We can't refuse it, get a second opinion or even ask questions or we can be dismissed or accused of drug seeking. I have seen abuse of patients in the waiting room to send a message. Nobody will listen to us. Case#1062

P - Even worse, physicians, much like abusive police, wield their power over patients and can write defaming comments in patient records. Case #1063

A - Well they gave me 5 mg 3x a day for 3 days for my spine fracture. No wonder I was screaming. Case #1064

V - I'm trying to just do this on Tylenol right now. It's just not enough. The last pain medicine I was given sadly has run out. I tried to ask for pain relief. I was referred to mental health. I haven't gone back yet. The first one asked me if I was slow as a child. Case #1067

S - My PCP was disappointed when she sneakily ran a drug test with my blood work when I was in pain for 16 months. A patient was off high amounts of pain medication until the third ER visit was extreme. A 90-year-old being drug tested. Case #1068

P - I suffer from never ending pain in a society that does not believe it is real. A pain in your butt to remind you of the sadistic treatment of the incurable. Case #1069

K - My story is so similar. I moved away to establish my youngest daughter's hopefully better health. Couldn't get medical care so had to return to home state. Never got treatments and have been unable to travel because of disabilities. Am devastated. I see him as a coward, and when push comes to shove, he will toss anyone he can under the bus to save his own hide. Case #1071

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D - I have done it all. Steroid shots and spinal column stimulator trigger points. Left leg crush injury 35 years ago and several surgeries left with intense nerve pain since 1984. Now I'm 66 and nothing works. Long term chronic pain shortens your life. I get done fighting it. Case #1072

M - When the government's boot is on your neck, it matters not whether it's the right or the left. Case #1073

S - One of the worst problems with this devastating complex biological chronic illness is that it affects every pathway. Doctor PTSD. Bedridden and in pain living a low quality of life, barely existing. This is a crisis. Millions can't get educated medical care. Case #1074

A - If my painful (name pick one) disease was successfully treated before and it allowed me to (list 2-3 things) plus I was not addicted nor was I a doctor shopper, why are we having problems treating me now? Case #1075

H - My shower is in the bathtub. I was too inflamed and in pain to bend knees to step up in order to get in/out of the tub. I couldn't stand for long. It hurt my hands to wash and manipulate things like towels, soap, and shampoo. Lifting arms to wash hair was hard as well. Once I was able to get a hold of a shower stool it was easier, but showers took a long time and I was exhausted by the end. I switched shower times to the evening so that if I was tired, I could go to bed. Case #1076

P - I am 69 years old. I have had fifteen years of non-stop 6-8 pain with no therapeutic relief methods other than the 5 years when I had adequate opioid dosage. I have damaged facial nerves that will never improve. RA is worsening. Case #1077

J - My husband's mom is afraid to get surgery on her hip because they probably won't treat her pain, especially since she's recovering from OUD. She used heroin for 40 years and goes to a methadone clinic now. Case #1078

D - My rheumatologist kept me on Neurontin for 3 months at a time in increased doses each time for a year and a half before it was considered a "failure." Then it was terrible to get off of it. Case #1079

R - How ironic. We have painful illnesses/injuries dx, but if we complain that prescriptions or lack thereof, isn't adequate then we're drug seeking and addicted. We go to addiction centers, but we're not addicts. Can't throw us in the psych ward because they don't treat physical pain. Case #1080

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R - But they can and do frequently throw pain patients in psych wards. When people try to kill themselves due to pain and fail, even if they've changed their minds, they will auto commit for 2 weeks. They will also give psych drugs rather than treat pain. Case #1081

K - With all due respect, I cannot relate. The medication prescribed to me for function has never affected me. I've been a highly functioning member of society because of them. Case #1082

C - After being dropped as a patient, and everything I see others going through, I just have zero trust in the medical community. Being treated like you committed some heinous crime by living in pain is just too much for someone like me to endure. Case #1083

L - The problem is that the hurricane is bad for everyone. Whereas we need opioids just to survive. They are not bad for us, they are necessary. I am not against trying to keep them out of the general population but not by sacrificing our ability to function. Case #1084

U - In 13 days we will move to Arizona and will have a yard at last. No more 5 and 6 dog walks per day. Not sure how I have managed the past 9 months without adequate pain care. Case #1085

R - Today for the first time since 2013, my doctor actually agreed to increase my pain meds and called my pharmacist to make sure they will fill them. I couldn't believe it. I still can't. I now feel so much guilt for my fellow CPP's that are suffering. Case #1086

P - My doctor gave me pain meds the day before I had my hysterectomy. Those were the good old days. Case #1087

M - My previous provider did an involuntary taper and cold turkey halted them completely due to a false positive for an unmetabolized drug. I'm sure it was due to the foods I ate. They kept saying it was to avoid addiction, yet left me in a dangerous situation instead. This has to stop happening to people. Case #1088

E - I think due to this CVS has some new policy, or they are harder to fill now. I don't know what it is but something has changed and now wait times are even longer, even when we jump through all the hoops they have. Case #1090

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C - Doctors are afraid to lose their licenses. So they do a lot of harm by turning a person in tremendous pain away. I know my own PCP won't help in any way. Cut off PM for no reason in 2020. I didn't want shots in my back. I have ODD, Sciatica, Scoliosis, Osteoporosis and Sarcoidosis. Case #1091

J - They spend more time harassing physicians than cartel members. I cannot remember what it was like to not be in pain. Case #1092

S - Thankfully for me, it works a little better than Tylenol alone. Otherwise, I wouldn't be here right now. When I was off RX for a 16-month abandonment, Tylenol didn't help. Motrin didn't help. It was a continual psychological turn-o-way not to happily swan dive off a 100 ft. cliff. Case #1093

K - I'm the same way, while trying to clear my mind to meditate. The pain throbbing in my body gets louder and louder in my head. Why can't they understand there's no way to concentrate when you're hurting that bad. Case #1094

D - I go from irritable to people literally running from me. It's not a good place to be before or after. Apologies can only be accepted by folks a certain number of times. Thanks for your kind words. I appreciate it when said by a person in the same predicament. When my pain skyrockets, I hide from the world because I get cranky and my irritation goes from 0-100 in a split second. Too bad I can't hide from myself. Case #1095

R - Some non-patients who have an opioid addiction (take it to get high, rather than to relieve physical pain). But, isn't the chronic pain a symptom of an underlying disease/medical condition, and not a disease in itself. Case #1096

P - It can be both/either a symptom of something else, or a disease in itself. IP causes heart problems, sleep disorders, pain induced starvation, depression and anxiety. Case #1097

P - Yes, millions are being treated for pain. Ask how many have pain RELIEVED? Anyone at 50-90 mm after years of being at 200 and over is often left in pain. If we mention that we are uncomfortable (bedridden) we're told "see! Opiates aren't working." Maddening. Case #1098

D - One pain patient I know went to South America where he was treated with fun. Case #1099

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U - Yep! I'm already older and physically much older due to the damage and incurable diseases I have (surgeon and doctors have both said twice my chronological age), but the medical neglect only makes me feel even older. Case #1100

S - I know that ERs in my area test every visit. I witnessed a patient that had drugs in their system dismissed without further testing when the lady said she was throwing up blood for a week. Then there I was, a "clean" abandoned CPP and given treatment. Case #1101

M - The doctor didn't take me seriously because I didn't scream in pain when she examined me. I forgot that pointless social rules get taken more seriously than autistic people saying they're in pain. Case #1102

D - I am a pediatrician. Our community health center was giving out Narcan. Case #1103

S - Never had issues until the media bombarded the "Rx Opioids Bad" narrative. By that time, I was forced to less than 80% of a 17+ year stable dose. Now less than 95%. Even the most common-sense people I know were brainwashed into believing the 'Great Opioid Lie.' Case #1104

P - My brother was an alcoholic. He died once he was clean, with a heart attack. Case #1105

U - All I want is to feel like myself again. Even if it's only once in a while for a couple of hours I want to feel like myself. Before this happened, I was active and healthy and athletic right up until the two years of forced bedrest, a "chemical restraint" of forced daily pain. Case #1106

S - I should say that they don't give you enough to take through the week following surgery any more. You're lucky if you get any to take at home. They used to say "you've got to stay on top of the pain." Not anymore. Case #1107

C - When docs found how much relief the Holy Trinity gave, they were happy to add it to their arsenal. To travel, my doc would add a benzo to my reg pain meds. I was able to go to 2 weddings and 2 funerals. Now I can't even go to the grocery store. Maddening! Case #1108

P - I wish this truth would prevail in mainstream media and the alphabets. I had a life and now dwell in my bedroom for 7 years as no more pain med or the other 2 controlled meds I desperately need. Case #1109

J - Personally, not being treated for pain at all I think high levels of pain and body damage can cause panic attacks thinking of things like “omg could I spend another X years with this?” “What does my future look like?” “Am I going to die? “End up homeless?” “What does further damage look like?” Case #1110

M - Doesn't catastrophizing mean focusing on fear of pain or illness? I never focused so much on my illness than I do now because of how they're treating people and fear of the next flare up. Seems like their own actions are causing the very behavior they say is bad. Case #1111

A - Watching from SW Mo. they cut my meds under 90 MME and I don't have much quality of life like I used to. I hope things change soon. Doctors here are being penalized and are leaving. Things need to be changed soon; it's hard to believe this is America anymore; what they're doing is going to CPP. My friend's doctor got shut down. My friend passed away last year; she was in so much pain; she had a massive heart attack and passed. I'm sure there's a lot of casualties like my friends that aren't counted in deaths that CDC has caused. Case #1112

T - My husband has dementia. At times I don't know what to do because if I don't take something for my nerves and something for pain, I would be able to do the things he needs help with. These doctors don't deal with what I deal with on a daily basis. When I was in the hospital, they gave me Xanax and oxycontin and it worked well for me. Case #1113

M - I can understand I've had more than my fill of the unethical ones, which is why I have given up even trying anymore. I have a bad feeling my palliative nurse will make me continue though, under the threat of taking my pain meds. That's all they have anymore. Blackmail. Case #1114

T - I've been taking low doses of morphine for at least 5 years now, and total pain meds for over 20 years; the meds barely touch the pain levels. My THC levels are elevated due to secondhand smoke. But it does to an extent help control the pain. I just don't like the laziness that it gives me as I don't like just wasting away. I just want to be pain free as much as possible and enjoy whatever time I have left on this earth. Case #1115

A - What can we do? They have almost killed me. Now after 5-½ years of under and currently no pain meds. I was strong but all these years of being treated like a criminal I can't ever get my life back now. Case #1116

J - My 16-year-old son told me yesterday that his life would be ruined if I would kill myself due to pain issues. Said he needs a father even if in bed in constant pain. Case #1117

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U - I have to be really careful what I listen to especially when I'm at work and struggling with my pain, because it can bring my mood up to help me push through the day. It can also cause the exact opposite mood because of the memories I have with music – life before pain. Case #1118

R - Am not taking any individual's side. Am simply explaining what the degrees entail. As I was halfway through my Masters in Clinical Psychology when my meds were cut in half. Psychology truly is a legit medical science. Unfortunately, many “professionals” have ruined its rep for many. Case #1120

C - Doctors tell me my pain won't be helped by opioids. When I was taking them for 10 years (as needed) before the opioid crisis. They did help me and I had a better quality of life. Don't I know what worked? Instead prescribe many more pills and MMJ which does not work for me. 0 sense. Case #1121

J - To not treat pain, physical or emotional, is neither ethical or humane. We have lost compassion when we make people suffer unnecessarily. Case #1122

S - It's completely unfathomable!! In 2023, NO PAIN RELIEF FOR THOSE SUFFERING? TORTURE. Being robbed of a life is the worst feeling when you know you can be helped. But the doctors are denying us and killing us not so silently. Case #1123

R - I never asked for anything for the fibro, but when I took opioids for treatment of other things, it definitely helped the deep aching I had. Case #1124

J - A lot of people suddenly dx w/AA after ESI's. I asked the PM just to prove I was willing to try anything suggested since she “didn't believe in pain meds.” She was pushing ESI's until she saw my MRI. Then it was an empathic “no” to me, but still no pain meds or anything, just suffering. Case #1125

C - I've lost pain management doctors twice to the DEA and have been living in a private hell that no one understands except my amazing husband. Thank you for shining a spotlight on a group often ignored. Case #1126

L - Thanks for bringing this up again. I get so tired of fighting against the tide. People need pain management to heal, breathe, move, live. Now people are afraid to take it, doctors are afraid to prescribe it. Judgmental people are working in healthcare. Gah! Case #1127

D - Currently I'm trying to get back a tiny amount of pain relief. I lost 4 years and 9 months of my life in bed without pain treatment. I want to help where or if I can. Case #1128

B - Opiates allow me to live my life NOT escape it. It allows me to cook, do laundry, go to birthday parties, and have meaningful connections with friends. Case #1129

F - I would be bedridden if I didn't have opioids for chronic pain. I hate being treated like a criminal. Case #1130

F - I had to change pain management doctors because I moved. My current doctor cut my pain meds in half and tells me lies – says opioids cause dementia. Case #1130

E - It's heartbreaking. I withdrew from pain management completely due to lack of care. I would much rather be in pain than give my money to people who have no intention of helping me. What ever happened to "do no harm?" Case #1132

W - I am a 72-year-old retired professional woman. I have taken Ativan and Norco for severe debilitating migraines and spine problems for YEARS without any adverse effects. They work very well together to lessen pain. I cannot get my medications because the DEA has cut off access. Case #1133

M - I know of a pharmacist that left the career because they were tired of telling patients that they were out of meds. Adderall has not come in since the Fall. This is going to get worse. Will we be biting on sticks and taking swigs of whiskey for acute injuries? Case #1134

S - I was stable on low dose opioids. My doctor retired and "poof." I am now sedentary, obese, have gotten colitis from ibuprofen, and just found out I'm pre-diabetic. Tell me again how these laws and guidelines are protecting my health. Case #1135

L - To terrorize and humiliate. I have bad PTSD because of how I was treated for years. The constant suspicion and contempt by doctors because I was in pain and needing help. They treated me as if I was immoral because I should've been able to live with the pain with no medication. Case #1136

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C - I have tried everything available in the last 39 years. Had a decent functional life for 20 years with opiates. The last 6 years I've been homebound. Case #1137

J - I don't know all I know is when the doctor lost the freedom to prescribe, I lost my independence from pain not addiction. Believe me if I had a way to be healthy without opiates, I would. But I tried all other treatment options and it didn't work for me except opiates. Case #1138

V - It is absolutely torture and it's already there. Having meds cut by 75% has been hell. Unfortunately, no one believes that this country is capable of this type of thing. Heads in the sand or simply not caring? Case #1139

C - Of course I'm not a doctor so I've attempted to summarize my story in brief. I've had wonderful care until the politics of opioids now threaten me daily with the threat of reversing all the work that's gone into making me a whole person living with multiple health issues as I age. Case #1140

E - I'm going to start my 4th round of PT. PT will never fix the damage, but they've never offered to fix it. They just send me to injections/PT. I have serious problems now that could have been prevented. I have no idea what their plan is. I really don't understand what's going on. Case #1141

E - My sister finally got approved for disability 2 weeks before she died. She was so excited to finally get help. Was finally feeling hopeful for the first time in a long time. Dead. Pain unmedicated. She was in tears, confused and exhausted. Sadists are everywhere these days. Case #1142

S - No pain management. No doctors. Pharmacies have no medications. No idea when they will. Pharmacists are suggesting to patients to ask doctors to prescribe the RX they have on hand instead of their regular medications. Ineffective medications with bad side effects. Case #1143

P - It is sad, if it is done because of chronic pain. That pain can be treated with opiates. I am on half the dose I need. I tried to make do. But I can't do what I need to do. I would choose euthanasia if they took my medications completely away. It would make me sad but I would do it. Case #1144

C - For years I have lived with pain every day. I feel like a criminal asking for pain medicine. It's compounded by my allergy to aspirin. I'm currently allowed 2.5 mg Percocet when it flares up, which is fine, but obviously it's not sufficient to take daily. It really is shameful that the county is fighting so hard to keep me in pain. Case #1145

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D - I live in South Carolina and I have had an IC since I was 18. I suffer on a daily basis. I was on disability with Medicare but all the doctors here treat IC patients like drug addicts. I tried the back to work program with a disability. Case #1146

K - I have a great PM doctor and also a daughter in law who is a pharmacist. I'm one of the lucky ones. I got most of my life back and I'm grateful. We must fight for those in intractable pain caught up and suffering in this mess. Long way of saying THANK YOU. Case #1147

G - I don't want to make this public, but you can certainly use it without my name. I was forced off Norco in 2019 after Ohio changed laws after 10 years of no problems. I had already done tons of therapy, water and land TENS units, injections, ketamine infusions and everything asked except a Spinal Cord implant, which is the reason they gave for kicking me out (noncompliance). Case #1148

G - Right now I am facing what I'm certain is going to be a cancer diagnosis, and I've already decided I don't want treatment if it is, because I'm already in so much pain and exhaustion from CRPS, Rheumatoid Arthritis and Fibromyalgia that I absolutely cannot handle any more. I never leave the house any more, can barely keep up with housework and hygiene, and to even consider more appointments and pain is too much. Case #1149

M - Trouble is, when one dies, another is born. You think this is some kind of generational fad? Opioids have been popular and useful since ancient times. Case #1150.

P - I've got lifelong damage to my spine and shoulder that I'd like him to hold for me, caused by domestic violence and domestic abuse. Anyone can become disabled and have chronic pain for the rest of their lives. People who think this way should be careful. Karma has a way of teaching. Case #1151

W - Pain medication takes the edge off the pain – but never pain free. It merely enables you to brush your teeth and walk to the bathroom and maybe brush your hair. Cutting off medications that save lives is the cruelest inhumane mistreatment of human beings. It is pain worse than death. Case #1152

C - It is people like this that deserve to suffer the way we do. Nobody can possibly understand unless they live it day in and day out. I don't have mental illness or substance abuse. I suffer horrible pain from a multitude of injuries and bad surgery. We are not crazy or addicts. Case #1153

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B - Doctors need to cover each other's backs. Although I'm fighting for physicians, they also have to reconcile the criticism and fight off the DEA siege. I'm not forgetting the bulk of them threw us, intractable/CPPS under the bus. Case #1154

M - I had an appointment with my surgeon last week. When I read his notes, he called me a conspiracy theorist. I told him how the guidelines had hurt so many. He acted like he knew nothing about guidelines. Case #1155

H - Ohio has been bad for patients with severe pain for many years now. I was abruptly cut off 12/21/2012. My pain was controlled, so my primary care doctor said "I don't think you're really in that much pain." It spiraled out of control to the point that I developed a DAVF/M condition. Case #1156

H - Intracranial hypertension plus occipital and trigeminal neuralgia. I was abused, neglected, laughed at, mocked and consistently denied pain relief; even in the emergency room and after surgery by University Hospitals and Cleveland Clinic. And the Ohio Medical Board didn't care! Case #1157

B - DEA kills innocent patients – just trying to have adequate pain relief, not even all relief, just a breath to be able to function and participate in life. Case #1158

S - In December I couldn't get one of my pain meds filled. Plus, Walmart told me I couldn't call to find out if they had received a new supply. It's against company policy to tell you over the phone. I would have to go to the pharmacy every day to find out if it was in stock again. Case #1159

J - I could do a lot more if I had opioids for my pain. A friend used to call Vicodin her "house cleaning drug" and I know what she means. I could stand up long enough to sweep, put things away, etc. without having to take a rest every 5 minutes and a 3-hour nap afterwards. Case #1160

P - I have severe insomnia when my severe chronic pain is un/under treated. Most nights I sleep less than 3 hours. AP offered a trial of tizanidine. It lets me sleep 2-3 hours. Wake up, repeat, twice or three times. My PM doctor continued tizanidine "for spasms" since he doesn't treat insomnia. Case #1161

J - "Homeopathic medicines" are simple water. Learn something. Case #1162

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J - When I take a shower, I have to take a long nap afterwards, making a shower practically a whole-day event. Case #1163

W - Medically assisted suicide is the only answer on how to treat chronic pain of course. That is why all of America is safe from drug overdose. Case #1164

M - We're Kleenex-disposable. When your own doctors have no respect for you, and don't care about your pain or your life or death and don't respond to calls or letters..... The pharmacies sure don't care. How many pharmacy assistants have treated you like you never took a shower. Case #1165

A - Have problems getting up and the pain keeps me awake for several days until exhaustion sets in. I feel overwhelmed by sleeplessness due to pain. Case #1166

S - As a human who experienced horrible side effects from gabapentin, no pain relief and a withdrawal, when stopped after a short time following MD instruction. That made opioid withdrawal seem like a walk in the park; there's no way I would ever give it to my dog. Case #1167

J - I can definitely discern between back pain and kidney stones just by getting in a car and driving down the road. The vibrations of the vehicle cause me to want to get away from myself as quickly as possible. Case #1168

S - The anxiety of my little help being taken away and knowing they aren't going to listen to me or help me anymore is excruciating too. Case #1169

D - The ride, AND preparing for the psychological warfare... the gaslighting, minimizing and dismissals of symptoms weighs heavily. Then there's the ride back after the bitter disappointment. And let's not forget that trip to the pharmacy to let the next battle begin. Case #1170

C - Car ride depends on the day. Current office is great aside from the indignity of peeing in a cup and dragging your meds around to be counted. Funny my PCP doesn't count my other meds, but not taking those correctly can kill you. Previous providers – might as well be a leper. Case #1171

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C - Car rides are brutal and avoid them. Sadly, it means I don't go out much. BUT I am lucky my GP and neurosurgeon are very thorough. Case #1172

K - I used to do the exact same thing. A flat board with a mattress in the back of our suburban. No, not treated respectfully, ever. Case #1173

A - All of my doctors who have reviewed my imaging are always mortified by what they see but continue to do absolutely nothing to help me. I just turned 30; I was robbed of my 20s. I wish just one would truly listen and help. Case #1174

W - A ride to the doctor's office results in days of bad flare-up. A bed in the back of the SUV is necessary. Case #1175

S - I have to take two buses and a high-speed train to see my pain specialist. It's better in the Spring and Summer, but incredibly painful in the Winter. Case #1176

S - I voluntarily went off the drugs because I was sick of doctors and nurse practitioners lying to me, being wholly ignorant about them and making my life hell. My life is now in my bedroom. The price we pay for ignorance and betrayal by doctors (med pros generally). Case #1177

W - My family member can't get his sleep medication for a serious medical problem. It's been over a month. The long arm of the DEA has expanded with the "success" of this misadventure. The suffering has increased for innocent Americans with serious health issues. Unconscionable. Case #1178

R - Most patients with addiction receiving RX meds DO take frequent drug screens. However, unlike chronic pain patients those being treated for addiction typically ARE NOT dismissed due to positive tests. Which is understandable because relapses are common.... especially with the poor-quality treatment here. Case #1179

S - I'm still searching for alternatives. The day I find something that works I'm going to live it up. Case #1180

M - There are no doctors left who will prescribe pain medication and no pharmacies have stock. Backordered. No idea when it will be available along with other meds DEA has targeted. Doctors have been terrorized and it has destroyed our trust. The suffering is unbearable. Case #1181

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P - So sad to imagine you in your bedroom just suffering. Looking for relief. Case #1182

K - They are rationing healthcare and weeding people out. Case #1183

U - This is PROPER PROTOCOL after major heart surgery. Still don't understand. In medical school they must teach "how to be a narcissistic uncaring Doctor after major surgery." To ensure your patient is on the verge of dying from pain. Case #1184

D - I would get what I needed either way. There are plenty of people who live outside the law providing that service. We are right back where we were after the 1914 Harrison Narcotics Tax Act. Case #1185

S - I was on a really high dose so I reduced myself. I cut 15 mg twice a day off my Morphine ER hoping that would calm her down. But she just kept threatening to reduce me more or cut me off. I finally got sick of it in December of 2020. Case #1186

S - This puts me about 2 years into the process. As luck would have it about 2 years after finally finding a doctor. That doctor died. The doctor who took over his practice was continually threatening to reduce me or cut me off. Case #1187

J - People like me can't take NSAIDS. I could end up dead before I make it to the ER. Opioids are about the safest medication I can take and that I've been on for about 23 years with no side effects. You're welcome to your opinion but we shouldn't let it cloud our doctors' facts. Case #1188

D - I get no respect. After 4 years the doctor still can't remember my name nor diagnosis. He RX'D 30 instead of 90 pills (I take 3 a day) and when I asked him to fix it, he grilled me about why I need it, and it's NOT an opiate. Anti-seizure so I don't fall. Case #1189

L - I'm lucky that I have a car, but it's very hard to go to appointments now because of pain med reduction. First appointments every month, now I go every two months. I used to be able to go 3 times a year as long as nothing changed. It's all for money. The doctor reduced my meds to where I can't go anywhere. Case #1191

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R - I drove every month from Vegas to the San Fernando Valley to see my doctor, that's 350 miles one way. Used to spend the night before driving home, but the pain was worse. So, I'd go there and back for a 15-minute appointment the same day. That's 700 miles round trip. Ouch! Case #1192

S - Was treated disrespectfully. No care/treatment for any issues, not just chronic pain. Totally disregarded, dismissed and gaslighted every time. Just ignored. Case #1193

A - When my first symptoms of RA began, I was told a few times it was "all in my head." More recently, my now former PCP yelled and laughed at me for not wearing my hearing aids. I was there as follow up for an ear infection. Case #1194

R - I was pressured into buying Narcan. When I refused, I was shorted 100 pills and threatened and thrown out of the pharmacy after a new head pharmacist took over. I reported him to the Pharmacy Board. It has been a year now and I am still waiting for action. I have been notified it's still in the works. Case #1195

G - I have 90+ symptoms associated with a broad range of dysautonomia. 5 MG of Oxy and most of it goes away. They know this but won't let me have it. It took 10 years to discover this effect. Case #1196

K - Was RX'D this medication by a neurologist and it has been taken away. No treatment now for the painful spasms and no, Baclofen is a POS. Am so tired of life. So sick of this grotesque game. Case #1197

K - Develop HBP and tachycardia after a 50% force taper. Can't normalize either 5.5 years later. I even went to extremely low carb a year ago and many say it reduces hbp. Not for me. I think the damage is permanent. Case #1198

K - In Florida, I have been force tapered to 30-40 MME's. 30 MME since the 2022 CDC guidelines. 40 MME was my "breakthrough" pain dose. I'm suffering. Being tortured! Case #1199

T - My problem is, I am unaware if I have ever been given fentanyl via IV. I assume so during surgeries, but I honestly never thought to ask after, as I usually awoke with hyperemesis, and in extreme pain with doctors telling me "It can't be that bad" and giving me... Case #1200

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L - I had it, ALLODYNIA, before. The princess and the pea syndrome. I can't handle most things on my skin. My hair on my shoulders drives me nuts, but pulling it up is an aura migraine. Sitting on something not soft enough causes back spasms that hurt so bad that I puke. Case #1201

P - Because IF we now tell the truth and tell them that 90 MME isn't working, they'll say "I didn't think opiates would work." A gaslit statement from hell "well if 90 isn't working, let's taper you off. Here's next month's RX; take one less a day. Then boom! You're on your own." Case #1202

R - I just ran out of all my pain meds. First, the PRN was not filled for an entire month. Then long-term RX is now not being bridged by palliative care when they specifically stated they did pain management. Went to a new PCP. They would not bridge my RX! Now I'm scrambling for help STAT. Case #1203

T - They tell you this is a thing. They tell you opioids don't work for chronic pain. But it's a lie used to abdicate responsibility out of fear they will get in trouble for over prescribing. It has nothing to do with what is actually best for patients. Case #1204

F - If you're ever late or God forbid, miss your meds, you learn pretty sharpish which camp you're in. What made my pain worse is no change to my meds. My body is now used to a prescription from about 5 years ago. Case #1205

S - I was rapidly force tapered in 2018 60% overnight after 17 years on stable dose. Long story short, abandoned for 16 months. I almost gave up my life until I was able to find a PM to RX<90% of that. One month after lumbar fusion, I was force tapered 50% for <95% of 17-year stable dose. Case #1206

D - What a weird life. If not living with excruciating pain and being able to have some sort of quality of life is "weird," well then, I guess I'm a weirdo. Case #1207

P - I have fibro between my shoulder blades and shoulders is where it's at, and it's worse. The best solution is an opioid and Lyrica. If I'm lucky I can get into a friend's hot tub after taking meds. That's the best medicine but I'm usually still in knotted pain. Case #1208

C - Was told by my doctors at Johns Hopkins Hospital that I'd likely always be on opioids because my condition is incurable. With no cure on the horizon, but since guidelines came out, I went through withdrawal 3 times – one week of mild flu-like symptoms. Piece of cake except for the return of pain. Case #1209

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M - Personal experience says it all right there. If any one of these zealots had to live in OUR bodies, they'd be screaming for the Vicodin, Percocet, etc. They simply have zero clue. Case #1210

M - I'm beginning to feel like good people have no chance in a world run by monsters and corrupt, malicious, sadistic little boys masquerading as men. Case #1211

These first-hand statements cannot be swept under the carpet. It is obvious the CDC has, indeed, caused much harm as the AMA pointed out. No change has occurred since the doubling in length of the 2016 CDC *Guideline* and replacing the unauthorized bright line of 90 mme with the lower limit of 50 mme, causing even more harm (50 mme is a dose for a cat).

The National Pain Council editors found very few positive statements. This is also reflected in our polls, which show virtually no progress on the 80% of doctors no longer prescribing opiate pain medications who bow to the CDC/DEA/PROP* cabal intimidation by invalid science and police raids.

*Physicians for Responsible Opioid Prescribing

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