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Opioid Crisis & Ohio Workers' Compensation

**Greg Patterson,
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Opioid Crisis & Ohio Workers' Compensation

New England Journal of Medicine



WITH NARCOTICS

To the Editor: Recently, we examined our current files to determine the incidence of narcotic addiction in 39,946 hospitalized medical patients¹ who were monitored consecutively. Although there were 11,882 patients who received at least one narcotic preparation, there were only four cases of reasonably well documented addiction in patients who had no history of addiction. The addiction was considered major in only one instance. The drugs implicated were meperidine in two patients,² Percodan in one, and hydromorphone in one. We conclude that despite widespread use of narcotic drugs in hospitals, the development of addiction is rare in medical patients with no history of addiction.

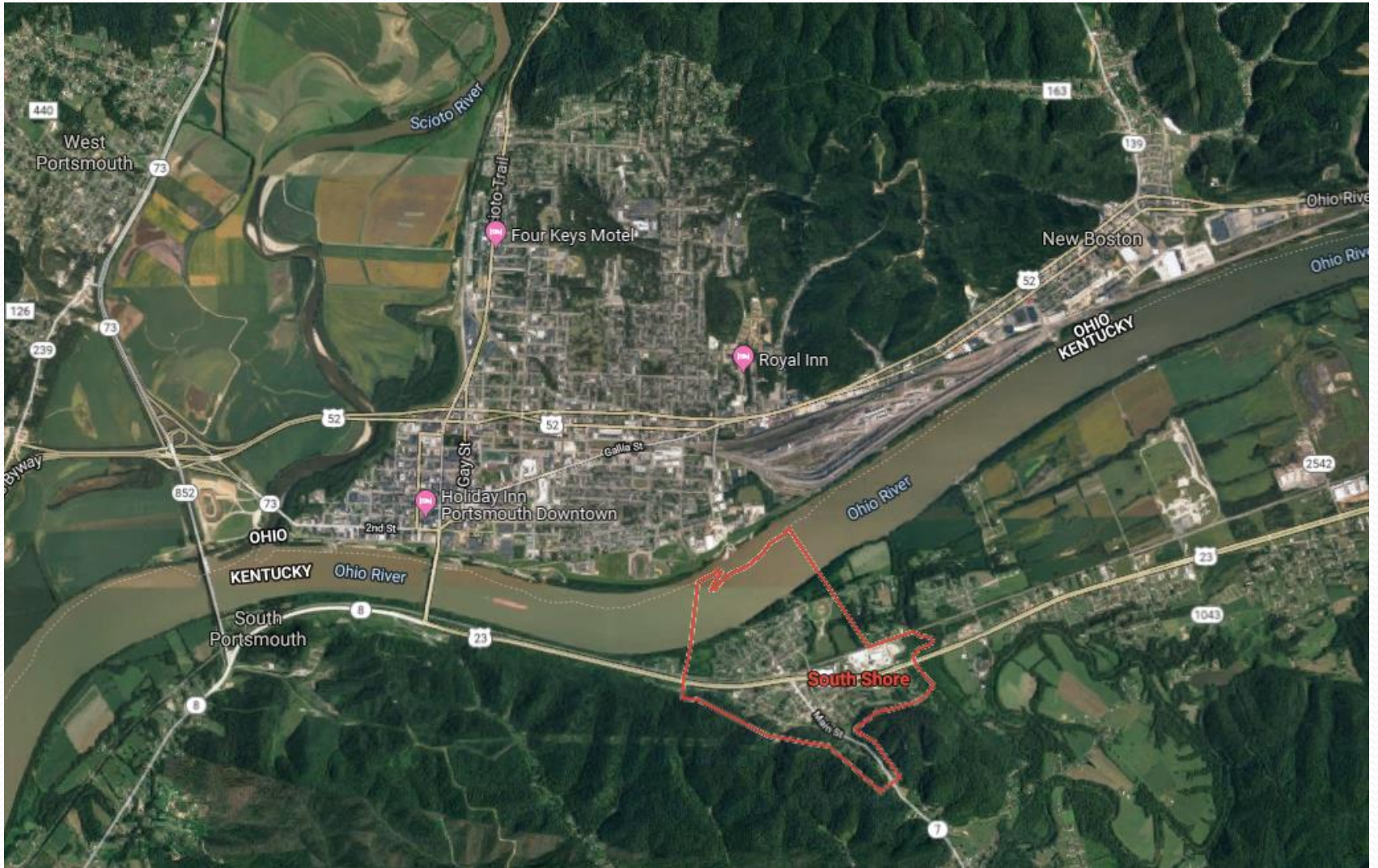
JANE PORTER
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1. Jick H, Miettinen OS, Shapiro S, Lewis GP, Siskind Y, Slone D. Comprehensive drug surveillance. *JAMA*. 1970; 213:1455-60.
2. Miller RR, Jick H. Clinical effects of meperidine in hospitalized medical patients. *J Clin Pharmacol*. 1978; 18:180-8.

The image features the Purdue University logo, which consists of the word "PURDUE" in a bold, italicized, black sans-serif font. The text is centered within a blue oval shape. A horizontal red line passes through the middle of the oval, intersecting the text. The background is white with a light blue wavy border at the top.

PURDUE



House Bill 93

BILL SUMMARY

PAIN MANAGEMENT CLINICS

- Requires the State Board of Pharmacy (the Pharmacy Board) to license pain management clinics.
- Provides for pain management clinics to be licensed as terminal distributors of dangerous drugs with a pain management clinic classification.
- Delays, until 30 days after the bill's effective date, the prohibition on operating a pain management clinic without holding a terminal distributor of dangerous drugs with a pain management clinic classification.
- Requires the State Medical Board (the Medical Board) to adopt rules establishing standards for physician operation of pain management clinics and standards to be followed by physicians who provide care at pain management clinics.
- Authorizes the Pharmacy Board to impose a fine of up to \$5,000, and the Medical Board to impose a fine of up to \$20,000, for failure to follow the rules of operation or standards for pain management clinics.



The House that Pills Built



Dr. David Procter, the Liberace of Appalachia



1940s- 1950s



1970s- 1980s



It was the best of times, it was the worse of times...

Just The Facts, Man

OOCIC Task Force Seizures

Category	2011	2012	2013	2014	2015	2016	2017	2018	2019	Total
Heroin (lbs.)	0.69	4.83	32.96	50.73	130.90	77.71	46.96	173.29	14.37	532.44
Prescription Pills (u.d.)	48,504.00	31,589.00	10,202.00	14,259.00	9,950.00	15,318.00	19,222.00	59,587.00	21.00	208,652.00

BWC Pharmacy Program Initiatives 2010 - 2019

- 2010 Introduction of Morphine Equivalent Doses (MED)
- 2011 BWC Formulary and Acetaminophen Monitoring
- 2012 Initiated Significant Changes to the BWC Formulary
- 2013 Developed Formal Criteria for Selecting Claims for a drug utilization review
- 2014 Access to OARRS for Data to Assess Opioid Prescribing
- 2015 Covers Naloxone Products for Overdose Prevention
- 2016 Moves Opioid Prescribing Guidelines to OAC- 4123-6-21.7
- 2017 Major Revamping of Opioid Coverage
- 2019 Removal of Oxycontin (Proposed)

Ohio Rules of Professional Conduct

RULE 1.6: CONFIDENTIALITY OF INFORMATION (a) A lawyer shall not reveal information relating to the representation of a client, including information protected by the attorney-client privilege under applicable law, unless the client gives informed consent, the disclosure is impliedly authorized in order to carry out the representation, or the disclosure is permitted by division (b) or required by division (d) of this rule. (b) A lawyer may reveal information relating to the representation of a client, including information protected by the attorney-client privilege under applicable law, to the extent the lawyer reasonably believes necessary for any of the following purposes: (1) to prevent reasonably certain death or substantial bodily harm; (2) to prevent the commission of a crime by the client or other person; (3) to mitigate substantial injury to the financial interests or property of another that has resulted from the client's commission of an illegal or fraudulent act, in furtherance of which the client has used the lawyer's services; (4) to secure legal advice about the lawyer's compliance with these rules; (5) to establish a claim or defense on behalf of the lawyer in a controversy between the lawyer and the client, to establish a defense to a criminal charge or civil claim against the lawyer based upon conduct in which the client was involved, or to respond to allegations in any proceeding, including any disciplinary matter, concerning the lawyer's representation of the client; (6) to comply with other law or a court order; (7) to detect and resolve conflicts of interest arising from the lawyer's change of employment or from changes in the composition or ownership of a firm, but only if the revealed information would not compromise the attorney client privilege or otherwise prejudice the client. (c) A lawyer shall make reasonable efforts to prevent the inadvertent or unauthorized disclosure of or unauthorized access to information related to the representation of a client. (d) A lawyer shall reveal information relating to the representation of a client, including information protected by the attorney-client privilege under applicable law, to the extent the lawyer reasonably believes necessary to comply with Rule 3.3 or 4.1.