

POLICY FORUM

How We Got Here

Introduction

When I trained to become a pediatrician, I was told that the distress I saw in my patients could be caused by any number of things. It could be fear, anxiety, or pain. I wasn't trained to be callous, but the focus was sometimes on assessment more than treatment. The smiley face pain scale was only marginally useful in moving from assessment to plan. Still later came the Joint Commission decision to call pain the "5th vital sign."

There's no straight line of causation or blame that runs from "cold" clinical assessment to urgent "treat it!" to our current opioid crisis. A whole new line of drugs with very specific dosing guidelines based on milligrams per kilogram of body weight helped with the science, and countless tearful and soul-crushing experiences with parents and children opened hearts and minds and, we know now, opened the door to opening a spigot, too. Some doctors over-prescribed, demand rose, and supply responded in both legal and then illegal markets.

Recently, nearly 40 years after graduating from medical school, I dutifully attended my required CME on controlled substance prescribing. I expected a trip to the woodshed, but I was in for a surprise. The first slide appeared in the darkened room, reading, "Pain is a disease." Then the second: "Treat it."

My continuing education continues. NCMJ

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