



NATIONAL ASSOCIATION OF
CHAIN DRUG STORES

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NACDS Opinion Piece Urges Drug-Abuse Prevention Bill Sensitive to Chronic Pain Patients' Needs

The Hill publishes column on bill that would serve as a "safety" mechanism for the use of opioids in treating temporary, or acute, pain

Arlington, Va.— *The Hill* published an [opinion piece](#) by National Association of Chain Drug Stores (NACDS) President & CEO Steven C. Anderson, IOM, CAE, that urges enactment of legislation to help reduce opioid addiction and abuse, while maintaining medication access for those in need of the medications for chronic pain, cancer, other diseases, and end-of-life care.

The opinion piece, published on Sunday, April 14, urges support for the *John S. McCain Opioid Addiction and Prevention Act* (S. 724/H.R. 1614), introduced by U.S. Sen. Kirsten Gillibrand (D-NY), U.S. Sen. Cory Gardner (R-CO), U.S. Rep. John Katko (R-NY) and U.S. Rep. Thomas R. Suozzi (D-NY). The bill would limit to a seven-day supply a first prescription of opioids for temporary, or acute, pain – such as that associated with a broken bone.

The legislation is consistent with the Centers for Disease Control and Prevention's (CDC) guidelines for prescribing opioids, which [state](#) that, for acute pain, "three days or less will often be sufficient; more than seven days will rarely be needed." The legislation would not prevent a prescriber from issuing another prescription after the first one to address a patient's needs.

Anderson wrote: "The national discussion of opioid-related issues can resemble a pendulum. It swings to a focus on the sincere needs of patients suffering with excruciating chronic pain. It then swings to address the desperate pleas of communities and families who have tragically lost loved ones to drug abuse and addiction.

"The victims deserve more than a pendulum-approach to policymaking and publicity. They deserve a comprehensive approach to a complex dilemma, that – at the same time – addresses everyone's needs."

From that perspective, Anderson described the role of S. 724/H.R. 1614 as part of a far-reaching approach to the issue: "[the bill] essentially would establish a 'safety' mechanism for the use of opioids in the management of acute pain."

While the opinion piece notes that the legislation should not be considered a panacea, but rather part of a comprehensive effort, it also notes the complexities of the current state of drug abuse. Anderson described the substantial impact of illegally made and trafficked fentanyl and heroin.

NACDS emphasizes that the seven-day limit for initial acute-pain opioid prescriptions is consistent with pharmacists' recommendations from the front-lines of care, their collaboration with law enforcement, and the needs of chronic pain sufferers. Six-in-10 Americans support this measure, with only two-in-10 indicating opposition, according to a January 2019 Morning Consult [poll](#) commissioned by NACDS.

NACDS noted that the opinion research reflects consistent support for this strategic approach across political ideologies, and that support is particularly strong among seniors. Further, seven-in-10 voters support “advancing policies that leverage pharmacies’ role as working partners for stronger and safer communities – such as working to address the opioid-abuse epidemic.”

The bill is consistent with one of NACDS’ priority public policy [recommendations](#) to help further address the opioid abuse epidemic. NACDS’ recommendations relate to initial-prescription limits for acute pain; prescription drug monitoring plans (PDMP); drug disposal; and mandatory electronic prescribing.

The legislation would build on the *SUPPORT for Patients and Communities Act* (H.R. 6), enacted in 2018, which is consistent with all of NACDS’ recommendations and which was particularly helpful in requiring electronic prescribing for Schedule II through V controlled substances prescriptions covered under Medicare Part D to help prevent fraud, abuse and waste – with limited exceptions to ensure patient access.

The legislation also is consistent with the White House’s 2019 National Drug Control Strategy, which NACDS [welcomed](#) in February.

In addition to advancing its public policy recommendations, NACDS and pharmacies maintain longstanding and ongoing initiatives to prevent opioid abuse, including compliance programs; drug disposal; patient education; security initiatives; fostering naloxone access; stopping illegal online drug-sellers and rogue clinics; and more.

NACDS’ [Chain Pharmacy Community Engagement Report](#) indicates that opioid abuse prevention stands as one of the top priorities for NACDS members among their community engagement initiatives.

Editor’s Note: State-specific and Congressional-District-specific opinion research data are available on an [NACDS dashboard](#).

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NACDS represents traditional drug stores, supermarkets and mass merchants with pharmacies. Chains operate over 40,000 pharmacies, and NACDS' over 80 chain member companies include regional chains, with a minimum of four stores, and national companies. Chains employ nearly 3 million individuals, including 157,000 pharmacists. They fill over 3 billion prescriptions yearly, and help patients use medicines correctly and safely, while offering innovative services that improve patient health and healthcare affordability. NACDS members also include more than 900 supplier partners and over 70 international members representing 21 countries. Please visit NACDS.org.

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