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**Few Physicians Actually Tried or Sanctioned
for Improperly Prescribing Pain Medications**

Study suggests physician concerns over widely publicized prosecutions are disproportionate to actual numbers of legal and regulatory actions

Some doctors under treat pain partially out of an unrealistic fear of legal repercussions, causing many chronic-pain patients to continue to suffer even though effective pain medications may be available to help them.

A new study in the September 9 issue of *Pain Medicine* shows that between 1998 and 2006, only a tiny number of U.S. doctors actually appear to have been prosecuted or administratively sanctioned for improperly prescribing powerful pain medications. Over this eight year span, best-available data and records indicate that only about one in 1,000 practicing physicians was tried or sanctioned for offenses of this type.

Study findings include the following:

- 725 physicians were identified as having been prosecuted or sanctioned for such violations during the nine-year time frame, or only about **0.1%** of nearly 700,000 practicing patient care physicians in the US.
- Most of the patient care doctors identified in such cases were primary care physicians rather than specialists in other fields, including pain medicine. Among the 725 physicians involved in these cases, only 25 were pain medicine specialists or self-identified as such. In contrast, General Practice/Family Medicine physicians accounted for 285.
- In 2005 and 2006, the Drug Enforcement Administration reports having investigated an average of only 4-5 doctors per state each year for possible criminal offenses connected with improper prescription or handling of pain medications.
- Compared with physicians in the national workforce, significantly more of the study physicians were male, aged 55 or over, and lacked board certifications.

An online abstract of this study can be found at
<http://www3.interscience.wiley.com/journal/119879621/issue>.

The authors of the study say a balanced approach is required, one that will allow doctors to responsibly prescribe powerful pain medications, while allowing enforcement agencies to continue preventing the diversion and misuse of regulated pain-controlling drugs.

“This study is the first single, comprehensive attempt to gather information on the numbers and types of physicians who actually have been tried and convicted for offenses involving improper prescribing or handling of controlled-substance pain medications,” said Myra Christopher, president and CEO of the Center for Practical Bioethics.

The study analyzes the numbers and types of cases and physicians involved, criminal and administrative charges brought, and case outcomes and sanctions. It also examines the characteristics of the small number of physicians who have been involved in such cases, including medical specialty, age and medical school.

The study was authored by nine individuals associated with the [Balanced Pain Policy Initiative](#), an undertaking of the [Center for Practical Bioethics](#), the [National Association of Attorneys General](#), and the [Federation of State Medical Boards](#).

Christopher said results of this research suggest that physician fear of regulatory scrutiny cannot be explained by the actual rates of prosecution or administrative review. Reasons for this fear are more complex than an objective assessment of risk would suggest, she said.

“However, it is essential to address the problem, because this fear on the part of physicians can change prescribing behaviors and undermine the treatment of pain,” said Christopher.

“Physicians and law enforcement must resolve competing perceptions surrounding the need to treat patients for pain and the need to prevent drug-related malfeasance by physicians and drug abuse,” said Christopher. “All sides must work to achieve a balance between aggressive pain treatment and legal/regulatory policies that support the greater needs of society.”

Links:

- [Authors, Affiliations and Abstract](#)
- [Key Findings](#)
- [Key Implications](#)
- [Balanced Pain Policy Initiative Objectives and Working Group](#)

Founded in 1984, the Center for Practical Bioethics is an independent organization nationally recognized for its work in practical bioethics. More than a think tank, the Center puts theory into action to help people and organizations find real-world solutions to complex issues in health and healthcare.

The Federation of State Medical Boards is a national not-for-profit organization representing the 70 medical boards of the United States and its territories, including 14 state boards of osteopathic medicine. Its mission is continual improvement in the quality, safety and integrity of health care through the development and promotion of high standards for physician licensure and practice.

The National Association of Attorneys General (NAAG) was founded in 1907 to help Attorneys General fulfill the responsibilities of their office and to assist in the delivery of high quality legal services to the states and territorial jurisdictions. NAAG fosters an environment of "cooperative leadership," helping Attorneys General respond effectively individually and collectively - to emerging state and federal issues.

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