



# Going After Scapegoats Is Easier Than Confronting The Truth

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Yesterday the Department of Justice filed suit against the giant retailer Walmart, accusing it of fueling the opioid crisis by encouraging its pharmacists to fill prescriptions—legally written by health care practitioners licensed by the Drug Enforcement Administration—they should have suspected of being inappropriately prescribed.

The Justice Department seems uninterested in the fact that there is no correlation between the number of opioid prescriptions and the non-medical use of prescription pain reliever or the development of opioid use disorder. And while the number of opioid prescriptions has dropped 57.5 percent since 2010, the overdose rate has continued to climb, soaring to record high levels in the latest report from the Centers for Disease Control and Prevention.

In its complaint, the Justice Department continues to conflate “physical dependency” and “addiction,” seemingly ignorant of the difference between the two. It also apparently ignores the words of Drs. Nora Volkow and Thomas McLellan of the National Institute on Drug Abuse who stated in a 2016 article in the New England Journal of Medicine:

*Unlike tolerance and physical dependence, addiction is not a predictable result of opioid prescribing. Addiction occurs in only a small percentage of persons who are exposed to opioids — even among those with preexisting vulnerabilities. Older medical texts and several versions of the Diagnostic and Statistical Manual of Mental Disorders (DSM) either overemphasized the role of tolerance and physical dependence in the definition of addiction or equated these processes (DSM-III and DSM-IV).*

Research shows the overdose rate has been climbing exponentially since at least the late 1970s, long before the creation of the potent prescription opioid OxyContin in 1996, and continues to climb. The only thing that has changed over the years has been the type of drug that has predominated among the overdose deaths. As Josh Bloom, the director of chemical and pharmaceutical science at the American Council on Science and Health, and I recently pointed out, the top killers are now fentanyl, heroin, cocaine, and methamphetamine. In fact, prescription opioids have consistently been a very small component of the drugs involved in overdose deaths for quite some time. We explain that policymakers’ obsession with reducing opioid prescribing has converted the “opioid crisis” into a “street drug crisis.” It has also inflicted great harm on

acute and chronic pain patients, driving some, in desperation, to the dangerous black market in search of relief.

While policymakers and prosecutors exact tribute from scapegoats that are soft targets, they let the true offender get away: drug prohibition.

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