



With STOP Act in motion, prescription opioids harder to get

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It's now much more difficult to get prescription opioids in North Carolina.

The STOP Act, which kicked in Jan. 1, limits the number of pills doctors can give patients. Lawmakers, who cited a hike in opioid-related deaths, passed the bill last year.

Under the law, House Bill 243, doctors may give patients five days of opioids to treat pain associated with injuries. They also may issue one week of prescription painkillers following a surgery. In both cases, doctors are free to issue refills.

“Smarter, safer prescribing is one tool among many that we're deploying to combat the opioid crisis,” said Gov. Roy Cooper. “Setting initial limits on these powerful drugs can help reduce the number of people who become addicted to opioids and it can ultimately save lives.”

North Carolina is home to four of the 25 worst U.S. cities for opioid abuse. Wilmington is first, followed by Hickory, fifth; Jacksonville, 12th; and Fayetteville, 18th. Opioids have killed more than 12,000 North Carolinians since 1999. Thirteen hundred people died in 2017 alone.

Such loss is tragic, and certainly a problem, but clamping down on prescriptions isn't the answer, said Jeffrey Singer, an Arizona surgeon and senior fellow at the Cato Institute.

Overprescribing isn't driving addiction rates or the death toll, Singer told Carolina Journal.

Addiction is statistically uncommon among patients who take prescriptions to manage pain. Between 8 percent and 12 percent of patients develop opioid addictions, a study from the National Institutes of Health shows.

Cutting access to prescriptions pushes desperate pain patients to the black market. Black tar heroin is cheaper than painkillers such as OxyContin and Percocet. It's also easy to buy on the street, Singer said.

Many state governments cracked down on prescription opioids in 2010, and prescription abuse began to decline in 2012. Still, opioid-related deaths are higher than ever.

More than half of overdose deaths are generally caused by heroin, fentanyl, or a combination of the two, Singer said.

Docking access to prescriptions makes sense in theory but not in reality, said Dr. Joseph Pino, director of the UNC School of Medicine in Wilmington.

Criminal justice reforms — including treatment programs for addicts — are a stronger solution, said Tarrah Callahan, executive director of Conservatives for Criminal Justice Reform.

A new study group, the Task Force for Sentencing Reforms for Opioid Drug Convictions, will investigate the best methods to fight addictions, Callahan said.

The 22-member committee will also consider sentencing options that allow judges to look at all pertinent facts, including criminal records.