

**James P. Senter, M.D., P.C.**  
**P. O. Box 810**  
**Clintwood, VA 24228**  
**(540) 926-4615**

August 6, 2001

Kimberly Topper  
Food and Drug Administration, CDER  
Advisors and Consultants Staff, HFD-21  
5600 Fishers Lane  
Rockville, MD 20857

Dear Ms. Topper:

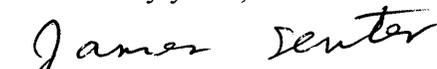
I wish to submit a statement regarding the use of narcotics in the treatment of chronic nonmalignant pain to the Anesthetic and Life Support Drugs Advisory Committee which will be meeting at the University of Maryland on September 13 and 14, 2001.

I am a Family Physician, who has practiced for twenty years in Clintwood, Virginia, which is in southwest Virginia. The primary occupations here are coal mining, logging and various other jobs requiring hard, physical labor. Daily, I see multiple patients with chronic pain, mostly from job-related injuries. The vast majority of my patients have been to Orthopedic Surgeons, Neurosurgeons, Physical Therapists and Pain Centers, and many have had surgery. Far more often than not, none of these approaches have been successful in relieving their pain. Many have been told they will have to "learn to live with their pain," which is not acceptable. With the advent of sustained release narcotics, such as Oxycontin, MS Contin and the Duragesic Patch, I have experienced significant improvement in my success at controlling the pain of these patients. Many of my patients have said these medications have made life bearable for them again.

I fully realize that there are potential problems with the use of these medications, such as drug diversion and addiction, but these problems must be weighed against the benefit derived from these drugs, when used appropriately. In the Commonwealth of Virginia, the Board of Medicine has adopted the Guidelines for the Use of Controlled Substances for the Treatment of Pain that was developed by the Federation of State Medical Boards. These include, random pill counts and urine drug screens. Of course the responsible physician will follow these guidelines.

Therefore, my plea is for the Advisory Committee to do nothing to diminish my ability to properly treat my patients' pain.

Sincerely yours,

  
James Senter, MD