

*Rehabilitation Medicine Associates, PLLC*

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Kimberly Topper  
Center for Drug Evaluation and Research  
Food and Drug Administration  
5600 Fishers Lane  
Rockville, Maryland 20857  
Fax No: 301-827-6801

Dear Ms. Topper:

I am a Physical Medicine and Rehabilitation specialist who manages a wide variety of patients with acute and chronic pain problems. I evaluate and treat patients with pain, both in the hospital and outpatient settings. The pain complaints may be due to multiple trauma from a motor vehicle accident to pain from spinal cord injury to pain from chronic low back pain. As a rehabilitation medicine physician, the main focus of my treatment is to restore and maintain function in these patients with a number of different complaints and diagnoses. I find that in my practice, the use of opiate analgesics, especially the sustained-release preparations (i.e., OxyContin) are incredibly helpful in restoring function to these patients with pain complaints. The sustained-release narcotic preparations allow me to manage patients with the least amount of narcotic compared to the shorter-acting preparations.

The regimen for pain management includes not only narcotic pain medicines, but therapy such as occupational and physical therapy and various therapeutic modalities. The management of pain problems should be a multifaceted approach, but certainly one essential component should be narcotic pain medications. The prescription of such medications should be done judiciously in selected patients that are compliant with the overall pain management strategy. In my experience in treating patients with chronic nonmalignant pain with narcotic pain medications, I have not had any incidents of addiction in my patients. Part of this is due to the selection process I use; specifically that the patient has to sign a contract or an agreement in which they will be compliant with all aspects of the pain management strategy. This includes therapies, counseling, exercise, as well as the use of the medication. With these guidelines in place, I feel that narcotic pain medications can be safely prescribed to these patients.

While I understand the concerns regarding abuse potential and diversion of narcotic pain medications, the positive aspects of opiate analgesics include restoration and maintenance of function in patients that might otherwise be quite disabled by their pain problems.

Sincerely,

  
Todd C. Troll, M.D.  
Physical Medicine and Rehabilitation

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