

# **HEMATOLOGY - ONCOLOGY OF KNOXVILLE**

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Kimberly Topper  
Center for Drug Evaluation and Research (HFD-21)  
Food and Drug Administration  
5600 Fisher's Lane  
Rockville, MD 20857

Dear Ms. Topper:

I am aware that the FDA is holding hearings concerning the use of opiate analgesics in various patient populations. I am a community oncologist practicing in Knoxville 30 years. I am in solo practice and cannot attend the presentations.

As more and more physician education occurs which emphasizes the importance of regular administration of opiates, particularly long acting opiates, for whatever painful condition has been identified, there will be more and more use of these drugs. This also leads to "street abuse" and the more commonly prescribed drugs are probably more readily available.

In my opinion the management of chronic pain should be decided by the physician that is most knowledgeable about that patient's condition and hopefully has good understanding of the indications for various pain medications. Using long acting opioid medications for chronic painful conditions that are "benign" or in pediatric populations in my opinion is no different than using it for medication for conditions that are "terminal".

Obviously, there is a wide variation in the amount of training and expertise that can be brought to bear on chronic painful conditions. Certainly there are more people with chronic pain due to non-malignant cause than from cancer and the cancer patients usually resolve their pain issues by either getting better or dying!

I think it is quite important that no firm restrictions be issued that would prevent the use of long acting opioids simply because of the perceived non-serious nature of the condition.

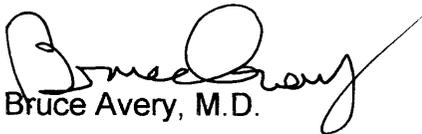
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I see patient's in my practice who have disabling painful conditions that need to be treated with long acting opioids and allow them to function and return to work even though the cancer is no longer active.

I would encourage physicians to consult pain centers when chronic painful conditions are present. I don't know if that can be a requirement.

I hope that my comments are useful to you. I will be happy to discuss this issue by phone and would be quite interested in any publication that results.

Very sincerely,



Bruce Avery, M.D.

cc: Dr. Robert F. Reder (fax) 203-588-8850

P.S. It might be interesting for your to document some anecdotal examples of how long acting opiates are being misused and what disease patterns are being seen. I think physicians who prescribe these drugs would be interested in knowing any way that they could act to prevent such abuse, or to suspect it.

6/14/01 I AM aware conference was post poned  
my comments are pertinent regardless -  
Thanks

