

West Virginia: OxyContin maker dashes efforts to address opioid epidemic

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Recently unsealed court records shed light on the measures taken by Purdue Pharma to defeat efforts by state officials in West Virginia to limit the sale of the company's highly addictive painkiller, OxyContin.

Following the launch of OxyContin in 1996, Purdue Pharma encouraged doctors to prescribe the drug for all types of pain while downplaying the risks of addiction. The company gave its sales reps incentives to increase sales of the drug, passed out coupons and free samples to doctors offices and, in one case, won over a doctor by spelling out the drug's name using doughnuts and snack cakes.

By 2001, OxyContin was pulling in \$1 billion in annual revenue. Nine years later this figure had tripled. The Sackler family, which owns Purdue Pharma, is now worth \$14 billion according to *Forbes* magazine.

Patients began filing lawsuits against the company starting in the early 2000s, but Purdue has been largely successful in either getting the lawsuits dismissed or keeping the court records sealed from public view. In 2007, Purdue was ordered to pay \$635 million in fines for downplaying OxyContin's risk of addiction.

The unsealed court documents were made available by a West Virginia judge at the request of STAT News, a digital news division of the *Boston Globe* focusing on health and medicine. The documents come from a West Virginia court case that was settled in 2004. Future Attorney General Eric Holder helped Purdue reach the settlement with the state, which allowed the company to admit no wrong doing in exchange for \$10 million to support drug abuse prevention programs.

In 2001, West Virginia officials overseeing the Public Employees Insurance Agency (PEIA) noticed an uptick in the number of overdoses in McDowell County, which had a rate of 38 deaths per 100,000 compared to six deaths per 100,000 in the state as a whole.

"We saw it coming," Tom Susman, who led the state's PEIA in the early 2000's, told STAT.

"All of a sudden, we saw this one drug starting to show large percentage growth, so we took a look at the drug, we

looked at the clinical need or use of the drug and it really scared the hell out of us," Susman said during his appearance last week on West Virginia's MetroNews "Talkline."

Susman says that the concerns raised at the agency were ignored. "We felt like we were talking to a wall when we brought the matter up to legislators and other government leaders at the time," he said.

To stem rise in opioid overdoses, West Virginia officials sought to require doctors to get prior authorization from insurance companies for OxyContin prescriptions.

Although not a panacea by any means, requiring prior authorization can limit the types of conditions covered—such as limiting OxyContin use to terminally ill cancer patients—and the duration of the prescription. When the state of Massachusetts put into place prior authorization requirements on OxyContin, for example, opioid prescriptions were reduced by 15 percent.

"We felt we need to put some type of management on the prescription because we saw death claim certificates come in with the cause of death of oxycodone," said Felice Joseph, the pharmacy director for the state employment health plan, in a 2004 deposition.

While the move might prevent deaths caused by overdoses, prior authorization would threaten Purdue's bottom line. The company fought the change tooth and nail.

As the unsealed court records document, Purdue successfully prevented any prior authorization requirements by paying, in the form of rebates, the pharmacy benefits manager (PBM) employed by the state, Merck Medco.

"We could negotiate a certain rebate percentage for keeping it on a certain tier related to copay or whether it has prior authorization," said Bernadette Katsur, a former Purdue official charged with negotiating contracts with PBMs, in an interview with STAT. She left the company in 2005. "We like to keep prior authorization off of any drug."

Providing rebates to PBMs is a common practice in the drug industry. Pharmacy benefits managers establish drug formularies that place drugs on different tiers, some of

which are more restrictive and require higher copays. Issuing rebates to PBMs is one way in which drugmakers ensure a favorable placement in the drug formularies.

“Contrary to the picture of helpfulness and cooperation Purdue attempts to paint,” state officials argued in motion that was unsealed, “Purdue’s employees were actively and secretly trying to prevent West Virginia from imposing any control on the sale of OxyContin.”

An unsealed 2001 company memo emphasized the need to “[s]top any preauthorization efforts for OxyContin,” while another recommended that employees meet with state officials to “interrupt” these efforts.

Purdue was largely successful. The prior authorization requirement did not come into effect until the state replaced Merck Medco as its PBM.

As prescription painkillers poured into the state, opioid drug overdoses in West Virginia tripled between 2001 and 2012 to 21 deaths per 100,000. Today, the state has the highest rate of per capita drug overdoses in the country, more than twice the national average.

Many individuals addicted to prescription painkillers move on to heroin, which is often cheaper and easier to access. This past August, in the span of just four hours, 26 people overdosed on heroin in Huntington, West Virginia. Last year, there were 520 heroin overdoses in the city, 13 times the national average.

The opioid epidemic in West Virginia “lays at the hands of Purdue Pharma,” Susman said on “Talkline.” “It lays at the hands of the fact that we don’t have any early warning system to look at these kinds of situations when it comes to narcotics. I truly believe that we haven’t learned from this situation.”

“Looking back, it’s one of the most depressing things to come out of my government service that we saw what was happening and no one wanted to listen,” said Susman.

Last week, the state attorneys general of Kentucky, Ohio and West Virginia spoke at a conference in Huntington on the opioid epidemic. They offered worthless platitudes and suggested that improving drug education could address the problem—completely ignoring the immense social crisis facing millions of workers that has contributed to the dramatic increases in deaths from overdoses, alcoholism and suicide.

“This is such a complex problem, and we know that the work that’s being done in Kentucky, West Virginia and Ohio to fight this terrible plague in our society leaves many behind,” West Virginia Attorney General Patrick Morrisey said at the conference, according to the *Huntington Herald-Dispatch*.

Morrisey’s participation at the conference only underscores its farcical nature. From 2007 to 2011, Morrisey

lobbied for drug trade groups that represented Cardinal Health, a health care services company that shipped more than 240 million prescription opioid pills to West Virginia between 2007 and 2012, according to data cited in a lawsuit filed in 2012 by Morrisey’s predecessor, Darrell McGraw.

“Cardinal distributed much of the fuel for the prescription drug problem in this state,” the lawsuit alleges.

The company agreed to pay \$34 million in 2008 to settle allegations by the Drug Enforcement Agency that Cardinal had failed to notify authorities about suspicious orders of hydrocodone.

Morrisey took over McGraw’s lawsuit, and only turned the case over to his deputies after the *Charleston Gazette-Mail* reported on his ties to the drug wholesaler. Cardinal contributed \$2,500 to Morrisey’s inauguration party in 2013.

Morrisey’s wife, Denise Henry Morrisey, is a former longtime lobbyist for Cardinal Health in Washington, D.C. The company paid her \$1.4 million since her husband became attorney general.

According to the *Gazette-Mail*, Morrisey’s reelection campaign for attorney general this year has received contributions from a number of opioid manufacturers, including Purdue Pharma and Mallinckrodt.

The Republican Attorneys General Association, which has spent more money than any other organization to reelect Morrisey, has received a total of \$50,000 since 2014 from McKesson Corp. and Cardinal Health, both defendants in the 2012 lawsuit. Lawyers from firms representing Purdue Pharma have contributed \$23,550 to the association during this year’s primary election cycle. Since 2014, Purdue Pharma has contributed \$290,000 to the association, according to IRS records.

“We contribute to those who share our commitment in combating prescription drug abuse,” Bob Josephson, communications director for Purdue Pharma, told the *Gazette Mail*.



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