



STIRBA

PETER STIRBA

A PROFESSIONAL LAW CORPORATION

peter@stirba.com

April 10, 2018

Via E-Mail Delivery
tanderson@sltrib.com

Taylor W. Anderson
Salt Lake Tribune
90 South 400 West, Suite 700
Salt Lake City, UT 84101

RE: *Dr. Lynn Webster*

Dear Mr. Anderson:

The following is my response to you on behalf of Dr. Webster:

It is most unfortunate that Salt Lake County has chosen to sue one of the most prominent pain doctors in the Country who consistently and repeatedly has lectured and written about the risks and challenges in prescribing opioids. The County has decided to completely ignore his outstanding contributions to controlling what has indeed become a crisis of the abuse, misuse and overuse of opioids. For example Dr. Webster is responsible for the following:

- ❖ Starting the Zero Unintentional Deaths campaign in 2006 and founding LifeSource, a nonprofit organization devoted to preventing deaths related to methadone and other prescription opioids
- ❖ Lecturing healthcare providers in Utah and nationally about the dire need to prevent increasing deaths related to methadone and other opioids
- ❖ Spear-heading an expert consensus pane and peer-reviewed journal supplement to address the root causes of opioid-related deaths
- ❖ Warning early of the risks involved in prescribing benzodiazepines and opioids together, well before the FDA-issued a similar warning.
- ❖ Warning of the effects of opioids on hormonal and immune systems, and calling for more research on these and other long-term adverse effects
- ❖ Developing and publishing eight prescribing principles for safer opioid prescribing (In Utah, a multi-pronged, state-funded program that included provider education with elements from the eight principles was followed by a 28% reduction in the number of unintentional, opioid-related drug overdose deaths from 2007 to 2010, as reported by the Utah Department of Health.)

- ❖ Developing and publishing the Opioid Risk Tool (ORT), a widely used assessment for a patient's risk of opioid abuse, encompassing questions on the patient's personal and family history of substance abuse, age, history of preadolescent sexual abuse, and for the presence of depression, attention deficit disorder, obsessive-compulsive disorder, bipolar disorder, and schizophrenia
- ❖ Researching and publishing on the risks involved with sleep-disordered breathing when taking prescribed opioids
- ❖ Publishing several manuscripts describing research that indicates a genetic influence on how individual patients process pain and opioids with implications for the degree of pain relief and/or potential for toxicity of doses for different patients
- ❖ Having his work on developing guidelines for reporting drugs in death investigations cited by the Safe States Industry Surveillance Workgroup in its own publication on standardizing poisoning codes
- ❖ Calling frequently for more funding to find safer and more effective alternatives to opioids to treat acute and chronic pain and for agencies such as the National Institutes of Health, as well as foundations, universities and concerned individuals, to help fund and pursue such discoveries so that research is not dependent wholly on industry
- ❖ Spearheading a position paper on minimum insurance benefits for people with pain, which specifically called for evidence-based alternatives to opioids to be covered by private and public insurance payers
- ❖ Speaking out in support of the Reducing Unused Medications Act of 2016 that proposed allowing pharmacists to issue partial prescriptions for Schedule II controlled substances to reduce the quantity of unused prescription drugs

The Complaint contains only allegations, unproven, against Dr. Webster. The body of the allegations are inaccurate, misleading and irresponsibly paint a picture which ignores the realities of Dr. Webster's compassionate commitment to alleviating suffering in his chronic pain patients. It is estimated that there are approximately one-hundred million chronic pain patients in our Country, and it is very telling that their suffering and their medical condition is entirely absent in the narrative of the Complaint.

Dr. Webster will vigorously defend what has been alleged against him. He will continue his commitment to the appropriate use of prescription opioids, will continue his commitment to educating other physicians on how best to avoid the very real and serious risks of prescribing opioids, and his commitment to alleviating the suffering of millions in this Country who are now under attack because they have a medical condition that requires pain medication.

The United States Food and Drug Administration, in a letter in September 2013, stated, “when prescribed and used properly, opioids can effectively manage and alleviate suffering – clearly a public health priority. Chronic pain is a serious and growing public health problem: it “affects millions of Americans; contributes greatly to national rates of morbidity, mortality and disability, and is rising in prevalence. There is also evidence that pain is inadequately treated in many patients.” Unfortunately, litigation such as this ignores the policy position of the FDA which is scientifically supported and totally contrary to the narrative alleged by Salt Lake County.

Best regards,

STIRBA, P.C.

/s/ Peter Stirba

PETER STIRBA

PS/rt