

ONE HUNDRED FIFTEENTH CONGRESS
Congress of the United States
House of Representatives

COMMITTEE ON ENERGY AND COMMERCE

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April 5, 2018

Dr. David Kan
President
California Society of Addiction Medicine
575 Market Street; Suite 2125
San Francisco, CA 94105

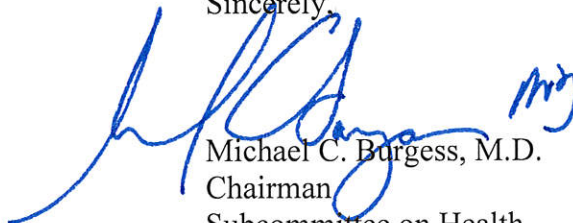
Dear Dr. Kan:

Thank you for appearing before the Subcommittee on Health on February 28, 2018, to testify at the hearing entitled "Combating the Opioid Crisis: Helping Communities Balance Enforcement and Patient Safety."

Pursuant to the Rules of the Committee on Energy and Commerce, the hearing record remains open for ten business days to permit Members to submit additional questions for the record, which are attached. To facilitate the printing of the hearing record, please respond to these questions with a transmittal letter by the close of business on April 19, 2018. Your responses should be mailed to Zack Dareshori, Legislative Clerk, Committee on Energy and Commerce, 2125 Rayburn House Office Building, Washington, DC 20515 and e-mailed in Word format to zack.dareshori@mail.house.gov.

Thank you again for your time and effort preparing and delivering testimony before the Subcommittee.

Sincerely,



Michael C. Burgess, M.D.
Chairman
Subcommittee on Health

cc: The Honorable Gene Green, Ranking Member, Subcommittee on Health

Attachment

Attachment — Additional Questions for the Record

The Honorable Susan W. Brooks

Dr. Kan, in your testimony you point out that there are significant barriers for patients in receiving proper addiction treatment in a timely manner. You specifically mention that 80% of Americans with an opioid addiction do not receive treatment – this is an astonishing statistic. A component of my CME legislation is properly training prescribing physicians to detect patients who show signs of opioid addiction.

1. Would you say it is uncommon for a primary care physician or the physician prescribing opioids to detect and diagnose addiction?
2. Aside from Continuing Medical Education, what can be done to better equip physicians who may not be addiction specialists to detect addiction while evaluating their patients?
3. Are there best practices or education techniques that you know of to help communities and local law enforcement combat addiction by teaching individuals to detect addiction in loved ones?

The Honorable Dianna DeGette

Opioids play an important role in pain management, but when they are prescribed in excess quantities they increase the risk for misuse and abuse. This past decade the United States experienced a parallel increase in opioid prescriptions and the incidence of opioid use disorders among pain patients. Reducing opioid prescriptions should be one part of the federal government's response to the drug epidemic. This goal can be partially achieved by educating providers on safe opioid prescribing practices. Congressman Schneider's bill, the Opioid Preventing Abuse through Continuing Education (PACE) Act, would require physicians to complete a yearly four-hour course on the use of opioid therapy in pain management. Do you believe that the training proposed under the PACE Act is a reasonable requirement for physicians who prescribe opioids?