



**“Personal Stories from the Opioid Crisis”  
House Energy & Commerce Health Subcommittee  
Thursday, April 19, 2018, 10:30 am**

**Remarks by Gary Mendell, Founder, Chairman, and CEO of Shatterproof**

Chairman, Burgess, Ranking Member Green, and Members of the Committee, thank you for the invitation to attend today to share my story about how addiction became personal for me and my family.

On October 20, 2011, I lost my son Brian to addiction. Like many other children, Brian tried marijuana as he entered his teen years which led to his battling the disease of addiction for almost 10 years, along with its cycle of shame and isolation. My family and I fought to navigate the complex and confusing web of treatment programs and therapies to try to help Brian. Despite our efforts and Brian trying his hardest, I received the phone call that is every parent’s worst nightmare. Brian had just died. Even more tragic, it wasn’t just addiction that took my son’s life. It was the shame he felt every morning when he opened his eyes that led him to wake up that day, research suicide notes and take his own life.

In the aftermath of Brian’s death, I struggled to make sense of what had happened. It destroyed me even further when I learned that a body of knowledge existed that, if used during treatment, would have significantly improved my son’s chances, and countless others, of being able to successfully manage their chronic disease and live a healthy life. But it hadn’t been implemented in our communities and our healthcare systems. I just couldn’t believe it; my son had gone to eight different treatment programs, and not one of them used the research that had proven to improve the chances of saving a parent’s child. And this research had been funded by billions of dollars of grants by our federal government.

It also struck me that for every major disease in our country, there was one well-funded national non-profit devoted to funding private research, advocating for changes in public policies, working to ensure that research proven to work was implemented, ending stigma, and supporting families as they navigate some of the most trying times that they will ever face. For every major disease, but not for addiction. I soon left my career in business, spent two years developing a business plan, and launched our organization, Shatterproof, four years ago.

The mission of Shatterproof is to treat addiction like the chronic disease that it is, offering evidence-based and tangible resources for prevention, treatment and recovery. Shatterproof aims to foster tolerance and compassion, and to dismantle the discrimination and judgment associated with this non-discriminating and devastating disease.

To that end, I want to commend the Committee for their extensive efforts this year to review a broad swath of legislation to combat the opioid crisis. We know what needs to be done to start reducing the number of overdose deaths in a meaningful way, including:



- Require provider training on both substance use disorder and safe prescribing of opioids as a condition of obtaining and renewing a DEA registration;
- Continue to improve Prescription Drug Monitoring Programs and require states to meet a set of commonsense minimum standards before receiving federal funding;
- Condition federal funding for the prevention and treatment of substance use disorder on programs and activities that are evidence-based, with a reasonable exception for innovative programming;
- Change 42 CFR Part 2 to allow substance use disorder records to be shared for the purposes of treatment, with appropriate patient protections;
- Limit controlled substance prescription for acute pain to three days, or, at a maximum, seven days;
- Incentivize more students to go into substance use disorder professions through student loan forgiveness;
- Make permanent the broader prescribing eligibility for buprenorphine and expand eligibility to additional provider types;
- Improve training and funding for more widespread availability of naloxone;
- Provide incentive payments to encourage adoption of Electronic Health Record technology among behavioral health providers to improve care coordination;
- Enforce mental health parity laws to ensure treatment is available to those who are dealing with addiction; and
- Develop best practices for emergency departments as they discharge patients who have had an overdose.

I would like to respectfully emphasize that this is a health crisis that can be reversed. This can be accomplished in a matter of months by conditioning federal funding to states on their implementation of safer prescribing practices and evidenced-based treatment, and immediately providing additional federal funding for widespread distribution of naloxone.

In the next 24 hours, 400 more families will get the same phone call that I did, telling them that they will never see again their son or daughter, brother or sister, mother or father. When the history of this devastating disease is written, I am convinced that we will look back at this moment as an inflection point – a choice between conquering this disease or letting it consume us. That choice is ours – and it is yours.

The 19<sup>th</sup> Century French author Victor Hugo once said, “Nothing is as powerful as an idea whose time has come.” These ideas about evidence-based treatment, prescribing limits, changing how we view substance use disorder – the time for these bold, impactful ideas has come. I implore you to move forward together with urgency, knowing you have the power and the ideas before you that will make a difference in this crisis. Shatterproof stands ready to help you in any way that we can.

Thank you again for opportunity to participate today.