

Brenda S (54 y/o female, Duluth, MN) – I've been a chronic pain patient since 2008, and I have been on Social Security Disability since that time as well. Prior to that I was a National Sales Director for a non-profit organization which was a job I loved. In addition to being disabled myself, my husband has been disabled since 2019 from a genetic disease which has been found in only three families in the world. He's suffered over 30 strokes, and has cognitive dementia as well physical problems. I've had to become his guardian, conservator and caretaker which has certainly been no easy undertaking for me.

Similar to many chronic pain patients, I have multiple disabling conditions, including failed back syndrome, double crush syndrome (severely entrapped nerves down my left leg due to nerve damage), left hamstring sciatic nerve entrapment, and endometriosis attached to my ilioinguinal and iliohypogastric nerves (ouch!). I've had 17 surgeries since 2008 to deal with these conditions as well osteoarthritis damage in my left ankle and left shoulder, and I have another two surgeries scheduled prior to this fall. I need to have more surgery on my left leg to prevent permanent nerve damage, but it needs to be treated by a peripheral nerve surgeon and there are only about 40 in the world. I've had 3 surgeries done by a peripheral nerve surgeon in Washington, D.C., but now that my husband is also disabled and I incur high legal bills to deal with his guardianship/conservatorship, I have no money to pay for the travel and no one to watch my husband while I would have those surgeries.

I have been very fortunate to have an amazing pain management doctor since 2008 which I've learned is a rare blessing in Minnesota as most patients cannot get proper medical care for pain management. To treat chronic pain patients effectively, there is a lot of trial and error and often the best relief and improvement in function and quality of life often come from more than one pain-relieving method. For me, I've tried many different therapies and the ones that are most effective for me are opioid pain medications and an implanted spinal cord stimulator. I suffer from horrible left-leg sciatica and low back pain, and cannot sit for more than 15 minutes. My recliner is my best friend.

In December, 2017 I received a letter from my pharmacy insurance at the time, CVS Caremark, stating that they were overwriting my doctor's prescription for opioid pain medications and force-tapering me against my will effective January, 2018. I have the letter and am happy to share it with your office. Force tapering and abruptly cutting chronic pain patients off opioid pain medications has been proven to be very harmful, and has led in many cases to patient suicides and suicidal ideation. The FDA and subsequently the CDC were forced to issue alerts in the spring of 2019 that this practice could cause great harm, but the wheels had already been set into motion and patients are regularly being cut off opioid pain medications as well as being force-tapered abruptly against their will even today. I had better pain control and function while on my opioid dose prior to 2018.

I'm on Medicare and there are only two Part D pharmacy insurance companies in Minnesota that will cover the opioid pain medications I'm taking. I got a notice a couple years ago from Aetna (my pharmacy insurance since 2019) that one of the opioid medications would be changing from a tier III to a tier IV, and this would have resulted in the medication going from \$40 per month to about \$160 per month. Thankfully I found out that you can request a tier exception, and my pharmacy insurance allowed that. In 2022 this same medication on tier III went from \$40 per month to \$116 per month.

If I were to be cut off opioid pain medications or force tapered any further I wouldn't be able to care for my husband at home anymore, and he would have to be sent to a long-term care facility which would cause him to go downhill mentally and physically. Opioid pain medications allow me to have some sort of life, and I can manage some of the light-duty household chores as well as bill paying. They have also

allowed me to enjoy time with my kids and grandchildren. I only take my medications as prescribed, and I have never abused or sold any of them.

My 14-year old granddaughter attempted to commit suicide last night. It is so very important that I be able to function at a level where I can be present in the lives of my children and grandchildren, and be there to support them in life. They mean the world to me.

Please support and pass SF3566 to help patients like me.

Sincerely,

Brenda S  
Duluth, MN