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Dear Dr. Dowell,

We are writing in follow up to our November 8, 2018 meeting of stakeholders to discuss issues related to the harmonization of clinical practice guidelines for pain control as developed by ASCO, NCCN and the Centers for Disease Control and Prevention (CDC). As we discussed, these issues were recently highlighted in a *JAMA Oncology* article ["Bridging the Critical Divide in Pain Management Guidelines from the CDC, NCCN, and ASCO for Cancer Survivors"](#).

The intent of our meeting was to explore areas where multiple guideline recommendations for prescribing opioids were inadvertently causing confusion and variation in both clinical practice and in reimbursement patterns. A variety of harmonization issues were discussed and will be the focus of further investigation among the stakeholders. However, the group agreed that one pressing issue should be addressed immediately: clarifying the intended audience for CDC guidelines to address unintended implementation and reimbursement consequences that have been occurring in practice.

As the *JAMA Oncology* article authors point out, the CDC guideline recommendations on pain management, especially concerning use of opioids, are intended to apply to cancer survivors. However, as we discussed, for select groups of cancer survivors—even when there is no evidence of disease—the relationship of benefits to risk in the use of opioids is unique and distinct from the needs of other patients with chronic pain. These survivors may have persistent pain due either to past cancer or past cancer treatment. For example, patients with lingering neuropathic pain from treatments such as vincristine or bortezomib often need long-term opioid medications to help relieve chronic pain in addition to other medications. Another example is patients with post-thoracotomy or post-mastectomy syndrome where occasionally intractable pain requires opioids when other modalities fail. In addition, as heard at the November 8<sup>th</sup> meeting, other patient populations such as those with sickle cell disease often suffer from recurrent severe painful crisis and chronic daily pain from a variety of causes including avascular necrosis, leg ulcers, and other neuropathic pain.

Also discussed at the meeting was the pressing issue of the misapplication of the guidelines for use with patients during active cancer treatment. Although the CDC Guideline clearly states that the guideline is not intended to apply to this population, many payers are still inaccurately applying the CDC guidelines to patients in active cancer treatment for coverage determinations relating to opioids. While this is not the CDC's intention for the guideline, the resulting actions by payers are extremely likely to cause unnecessary pain and suffering to



patients with cancer. A clarifying communication from the CDC on which patient populations are excluded from the guideline would be extremely helpful to both payers and prescribers.

To ensure clarity and appropriate implementation of the CDC guideline, we are writing to ask that the CDC clarify for the public that for selected patient populations, such as who have been affected by cancer or sickle cell disease, clinical practice guidelines specifically addressing pain control for those target populations be used to guide treatment and reimbursement practices. We suggest CDC communicate the following

“It is acknowledged that there are select populations of patients, including those with sickle cell disease, patients in active cancer treatment, and some survivors of cancer with no evidence of active disease, for whom unique considerations would change the balance of benefits and risks for the use of opioids in pain management. In these select patient populations, clinical practice guidelines addressing use of opioids as part of pain control for those specific conditions should be used to guide treatment and reimbursement decisions.”

Thank you again for your participation at our November 8<sup>th</sup> meeting and for all the work you do to ensure appropriate prescribing of opioids in America. We appreciate your time and consideration and would be happy to answer any questions you may have.

Sincerely,

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