

Messenger 139 – December 2007

Letter to the editor

A time to speak - comment on the use of addictive pain drugs and the accountability of the doctors who prescribe them.

What happens in life when tragic loss is experienced – loss that is fundamentally out of order – the loss of a child? How is such a loss endured when it is authored by the very system that has been established to promote good health and whenever possible prevent the loss of life? What can we say when such a travesty exists, is quietly tolerated, or perhaps is not even recognized?

For the sake of our precious daughter we are compelled to speak out in hopes that our voice will be heard by those who need to hear it – the stewards of our health care system, who we trust, and who consider the sanctity of human life the most profound purpose of their calling.

Our daughter, Jodie was born the second of three children, two boys and one girl and for years was the only grand-daughter in the family. Her vision and character moved her beyond the daily chores of growing up on the family farm in rural Alberta to studying in university. She was an honors student. The walls of her room were adorned with numerous awards; academic, music and athletic. She had high standards, aspired to lofty ideals; and was fiercely loyal to family and friends.

In 1991, at the age of 16, Jodie was diagnosed with diabetes mellitus. The impact on her life was devastating as both of us, her parents, and Jodie struggled to cope with this insidious disease. Jodie was innocent and trusting, a gentle soul whose tender laugh and smile embodied goodness, love and compassion. The woundedness we felt as victims of this chronic illness was only surpassed by Jodie's quiet sadness.

Nevertheless, after successfully completing her university degree, Jodie became employed in the field of communications and moved to Calgary where she resided in a single dwelling apartment. Though we would have preferred she have a roommate, we respected her choices as she managed her diabetes with full competence.

Recurring headaches which Jodie experienced pursuant to a car accident in 1999 resulted in her being prescribed the painkiller Percocet in April of 2003. A review of her prescriptions indicated that Jodie was receiving approximately 15 pills every two weeks. The prescriptions appeared to cease in August and part of September. During the later part of September and October they were renewed. In November and December, under a different doctor, she was prescribed first 100 tablets, then 200 tablets.

In November 2003 we took Jodie to emergency with what appeared to be the flu. We now realize she was overdosed on Percocet. Confidentiality restrictions prevented us from being alerted to the precarious and potentially life threatening position she was in.

- Would it not have been prudent to consider intervention at this point?
- Who was the most responsible physician at this point?
- Who understood that she was a diabetic, that she did live alone?
- If there was no one prepared to journey with her, day by day, to come off these medications, why wouldn't we have been considered the most responsible care givers for her future, in that she could no longer think clearly for herself as a result of prescriptions introduced to her by our health system?

The outcome was the ultimate tragedy. On the night of January 22, 2004 Jodie had taken the painkiller Percocet in combination with a sleeping pill Zopiclone to help her sleep. During the early morning hours of January 23, 2004, she died of drug toxicity.

People die from disease and disorders. In some way these situations seem to be out of our control. What is within our control is the hand that writes the prescriptions; the understanding, motivation, and ultimate responsibility of that individual who makes the diagnosis and prescribes.

The result of this series of decisions has left our family dismembered. Hearts and minds are no longer hopeful and carefree, but rather carry the cross of sadness and loss, loss of the most valuable treasure of life, the very life of our child. Only those who lose a child can understand this grief. There is no reversal, no healing that returns us to who we once were. Similarly, the lives of our remaining family have been re-plotted; Jodie's brothers, grandma, aunts, uncles, nieces, nephews and dear friends carry the marks of woundedness.

We now have our loss, with which we will journey until our death. For Jodie to lose her life without us acknowledging the failures within our health system is inexcusable and irresponsible.

The guidelines for prescribing addictive and potentially toxic drugs must be extensively monitored.

- Is adequate patient history being documented prior to making such prescriptions?
- Is there accountability on behalf of the prescribing physician?
- Are large dosages a red flag to the system?
- Can there be interventions in suspected addiction scenarios?

This specific painkiller, oxycodone, has an extremely controversial and questionable history.

- Is the drug manufacturer Purdue Pharmaceutical accountable for such misrepresentation and potentially fatal usage of their product?
- Have we replaced the caring comprehensive family physician with a desensitized and overworked pharmaceutical chemist?

I urge you as health care providers, to oppose the widespread use of these painkillers in hopes of preventing the unnecessary loss of lives. The unrestrained availability of these drugs is spawning grave consequences in addictions, health complications, and deaths. Is this good health care or is this misleading a trusting community?

Dr. Derry Decter, a Manitoba physician who is raising awareness of this harmful drug, has said of this narcotic: “it is inexpensive to produce, but cruel in its addictive nature and bizarre in its neurological potency.” Unfortunately, we know firsthand how true these words are. Furthermore, addiction centres in the US are dealing with victims who have become hopelessly addicted to this drug.

Jodie aspired to greatness in mind and deed. Her favorite poster was that of Martin Luther King in which he stated “I have a dream” and so it is that we implore you, the medical community, to aspire to the great and noble character of your vocation which must always be seen, necessarily, as the hand of the healer.

May truth, honesty and wisdom prevail so that, in good conscience, justice is brought to the sanctity of our daughter’s life, and moreover, to the many human lives being affected by policies surrounding the use of such drugs.

Respectfully,

David and Debbie Bruketa