REPORT

HTTPS:/doi.org/10.64611/ISCH6059

THE STRANGE DENIAL OF PAIN COMPLICATIONS

By

Forest Tennant, DrPH, MPH, MD
Scott Guess, PharmD

Published by

Arachnoiditis Hope
Tennant Foundation
336 ½ S. Glendora Ave.
West Covina, CA 91790
Email: tennantfoundation92@gmail.com
Website: www.arachnoiditishope.com

July 2025

There has been no shortage of controversy, scandal, and fraud regarding the opioid crisis and pain crisis of the past decade. One standout of the debate on opioids and pain care has been a lack of an honest, objective discussion of the benefits of pain care. A basic tenet in medical practice and therapeutics is what is called the "risk-benefit" ratio. This is a simple analysis of whether a specific drug or therapeutic measure has more benefit than risk. For example, the risk-benefit of drugs in pregnancy is well-known and established. Strangely, the debate over whether opioids have more benefit than risk in the treatment of pain has never been broached. None of the parties, especially the opioid antagonists will discuss any benefit that opioids may bring. In fact, essentially the only discussion is that opioids are a risk for overdose and addiction, so they have no benefit and shouldn't be used. This risk is overrated and overstated in relation to physician prescribed and monitored opioid therapy. Total opioid overdose deaths in the US are reported at 24 deaths per 100,000 population for 2023. While the overdose death rate for PRESCRIBED opioids is 4 per 100,000 population. Per the June 9, 2025, CDC report (https://www.cdc.gov/overdose-prevention/about/understanding-the-opioid-overdose-epidemic.html). This is a raw number for prescribed opioids. Some data reports opioid deaths among physician monitored chronic pain patients to be as low at 0.1 per 100,000 population. In summary, the overdose risk of evidence with prescription opioid, is miniscule.

In reality, pain, per se, has a number of pathologic complications that are benefitted by opioid therapy. These are on top of the humanitarian benefit of pain relief, absence of suffering, and the ability to mentally and physically function so as to be a productive person. Chronic pain, especially, has profound negative and deleterious effects on the cardiovascular and endocrine (hormonal) systems. Pain puts the cardiovascular system into overdrive which raises blood pressure and pulse rates. Coronary artery spasm may also result from severe chronic pain. I can personally attest to prescribing anti-antihypertensives and nitroglycerin to many pain patients. Hormonal suppression and deficiency of cortisol, testosterone, and estradiol among other hormones are common in undertreated chronic pain patients. Cortisol levels can drop below levels that sustain life. I have administered emergency cortisone to pain patients who were severely ill, debilitated, and near collapse because they had cortisol levels over 1.0. Among Dr. Addison's eleven reported original cases of "Addison's Disease" in 1855, about half had serious intractable pain conditions such as adhesive arachnoiditis.

Chronic pain has been found to alter blood glucose and lipids (cholesterol). Sleep deprivation is a major problem in pain patients. Anorexia with malnutrition is common.

Given the medical complications induced by pain, per se, one would logically think that there would always be a discussion of risk-benefit when discussing opioid therapy. I've never heard or seen such a discussion in medical literature or political circles. As if denial of benefits over risks weren't bad enough; an even stranger development (denial) has occurred. I have searched the major medical textbooks used in medical schools. I couldn't find a single word that chronic

pain is a risk for hypertension and cardiac disease much less hormonal deficiencies.

Isn't it time we quit denying that chronic pain, per se, has medical complications that can be easily treated with opioids and other medicinals. The risk of opioid therapy simply doesn't outweigh the benefits. Let me assure you that the grandmothers of America who have toiled a lifetime on farms and dairies would be delighted to know that their high blood pressure may be related to their painful osteoarthritis.