

25<sup>th</sup> January 2018

My name is [REDACTED] a 39 year old, happily married woman, mother to two amazing boys.

Through no fault of my own, and after a long and involved medical history and multiple surgeries, I am left with chronic pain. This requires me, for a quality of life, to be able to function somewhat normally to be the mother, wife, employee and member of society; to need long-term opioid pain management.

My case is related to biliary dyskinesia and sphincter of oddi dysfunction which affects my liver and causes incredibly severe pain that began after the birth of my two (very close) pregnancies. I went through several years of hospitalisations and procedures and endoscopic therapies before being recommended for two separate and large open abdominal surgeries. During last one, a rare and complicated speciality surgery by a pancreobiliary specialist surgeon, I developed a deep infection which has left me with significant scarring and adhesions, which is a risk of any surgery. This is what my Dr's now say are causing my pain. Unfortunately, unless I wish to take the significant risk of another major surgery to try to rectify this while having no assurance of the surgery actually helping me, I am left with this pain for the rest of my life. I have followed every specialist recommendation and treatment including undergoing these major invasive surgeries to attempt to rectify the health issue, but in-so-doing have created another issue.

My pain is constant. Daily. Every moment of every day. The medications I am on do not keep me pain free. They keep things to a bearable level to function.

I have, of course, tried the usual non-opioid medications but they have not helped me and caused major side-effects.

I take daily Palexia (tapentadol), oxycontin, and use panadeine forte for break-through pain.

My gp prescribes me these medications, and we obtain the relevant authorisations for these scripts every time with every and all requirements with second opinions we also do. I only purchase the medications through the one pharmacy (unless I am out of the area). I take as low a dose as possible to manage the pain with which I agree, in consult alongside my Dr as a responsible approach to a level of pain management that minimizes my suffering and I am able to work and enjoy a quality of life again.

I am concerned that these measures that are being proposed will make proper pain management even more difficult. As it is, I do have to deal with some Dr's lecture me on being "addicted" which truly does not make life helpful, as it is well documented there are major differences between those who are addicted to a substance and abuse it, to those developing a dependence for a level of management to enjoy a quality of life. These measures will make life more difficult for the genuine, medically documented patients with physical issues that cause chronic pain; while not affecting those who obtain these medications illegally and abuse them. We need only look at what is happening in the United States to see the fall-out of this reaction.

As a patient who uses these medications responsibly and as prescribed, I worry that more regulations will affect my quality of life and proper management of my pain. All medications can be abused and opioids do need to be properly managed, but not at the expense of those who medically require them and I worry that this will target the incorrect group.

I do ask that the Australian Government take into account the voices of the chronic pain patients and review the process to not negatively impact our medical care and leave people with a genuine medical requirement suffering and in pain.

As it is, because of the restriction to all codeine products being on prescription now I have only heard negative things from both Dr's and pharmacists regarding this decision and the realistic fears they have, including a sharp increase of hospital presentations for minor injuries and backing up the Emergency Departments as people cannot see their gp the same day (or up to three days realistically for many clinics), a sharp rise of hospital admissions for bleeding ulcers and liver issues due to people overdosing on paracetamol and ibuprofen trying to manage pain that they could previously cover with the codeine products. This was a bad decision regarding the codeine medications as I believe, again, that those who abuse the medications will simply get it in other means, and genuine patients will be left suffering in pain.

I ask that the Government make the correct decision to not hurt and cause more pain.

Sincerely

A solid black rectangular box used to redact the signature of the patient.