

Portfolio: Testimonial Letters of Support for
Dr. James Kimber Rotchford
Spring 2011

Collected by *Pain Support Group of Washington*

To whom it may concern:

I am a Roman Catholic priest, for the last 5 $\frac{2}{3}$ the pastor of **Dr. Kimber Rotchford** at St. Mary Star of the Sea, Port Townsend, Wa. I write this letter to inform you of my experience of him as a person and as a physician.

He was one of the first members to welcome me to his parish as pastor. Our conversation that afternoon was mostly about the parish, but I did learn then, and subsequently, of his interest in alleviating pain by medical means.

In my second year in the parish, I invited him to give a series of four lectures on drug addiction as part of our faith formation for adults. He spoke of the nature of addiction, its causes, and its treatments. I attended three of the four talks, and at no time did I hear him talk of anything that I could characterize as either a violation of medical ethics or of our stringent Catholic moral code.

In all of my dealings with Kimber, I have been impressed by both his compassion and his integrity. In short, it is inconceivable to me that he could have used drugs or other practices in any way which would contravene the highest legal, medical, or moral standards.

While the investigation into his practice has lumbered to its conclusions, I have heard of at least two people who have died for lack of his care. I hope and pray for a speedy conclusion to this investigation so that he can return to a practice that few doctors want to take up, and is so vitally needed.

If you have further questions, I should be happy to address them.

Sincerely,

(Rev.). John Topel, S. J.
Pastor
(360) 385-5980
jtopel@qwestoffice.net

March 9, 2011

To:
Pain Support Group of Washington
1240 W Sims Way, Suite 20
Port Townsend, WA 98368.

Regarding: J. Kimber Rotchford M.D.

When I moved to Port Townsend in 1992, I went to J. Kimber Rotchford M.D. as my primary doctor for 15 years. He has always been ethical, kind, understanding, and helpful in all aspects of my health. He has gone beyond the call of duty, and has been available for emergency advice at any hour of the day or night. Other acquaintances of mine in the Port Townsend community have had a similar experience.

Dr. Rotchford has helped me with pain management using acupuncture for muscle joint pain, and for recovery from seasonal influenzas and issues related to menopause, anxiety, and aging. He has always been balanced in his perspectives and advice and has been an advocate for my wellbeing.

I unhesitatingly recommend Dr. Rotchford to anyone as a primary physician. If Dr. Rotchford would lose his practice due to his current legal problems, it would be a considerable loss to our community.

Sincerely,



Karen Hackenberg

March 14, 2011

Marrowstone Island

To Whom It May Concern,

I have known Kimber Rotchford for over fifteen years. He was my primary care physician from 1996 - 2006.

Dr. Rotchford was the first doctor who saw beyond my complaints and symptoms to recognize who I was in a larger sense. When he saw me, his concentration, compassion and thoroughness were remarkable. I always had the impression that I was his only patient that day.

In 1996 I was in early recovery from drugs and alcohol. Dr. Rotchford's support is one of the big reasons that I have been continuously and happily sober since then.

As my doctor, he several times attended conferences to research or gain knowledge so he could better treat my particular ailments. I always knew Dr. Rotchford wanted to do the best he could for me. Dr. Rotchford has set the bar as to what I expect from a doctor. That bar is set high because of what he expects from himself.

The concern and compassion he has for his patients is extraordinary and rare in today's world.

Sincerely,

A handwritten signature in cursive script that reads "Dawson Dinsell". The signature is written in dark ink and is positioned to the right of the word "Sincerely,".



1820 Jefferson Street
P.O. Box 1220
Port Townsend, WA 98368

Phil Johnson, District 1 David W. Sullivan, District 2 John Austin, District 3

March 16, 2011

Pain Support Group of Washington
1240 W. Sims Way, Suite 20
Port Townsend, WA 98368

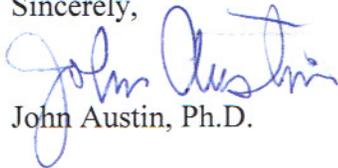
Dear Sirs or Madams:

I wish to comment upon Kimber Rotchford, MD. I have worked with Kimber when he served on our Substance Abuse Advisory Board (SAAB), and I have known him for the past six years. Dr. Rotchford provided much appreciated counsel as a member of the SAAB. His expertise and his genuine concern for his patients valuable. The community has benefitted from his *pro bono* service to indigent patients through the MASH program.

As a retired psychologist, I am fully aware of how complicated and demanding it is to minister to patients who are suffering chronic pain. Too many physicians avoid provision of care to such patients. I believe that Port Townsend has been fortunate to have a doctor with the compassion and courage to provide service to persons who struggle with debilitating pain.

It has been an honor to know and work with Dr. Rotchford.

Sincerely,



John Austin, Ph.D.



Pain Support Group of Washington <psgofwa@gmail.com>

[REDACTED]

Ssisyphus1@aol.com <Ssisyphus1@aol.com>
To: psgofwa@gmail.com

Tue, Mar 15, 2011 at 3:46 PM

[REDACTED]

What I Know About Kim Rotchford

My older sister was murdered back in 1995, a neighbor showed up at her house one night with a gun and a knife, gut shot my brother in law and abducted my sister brutally, beat, choked, stabbed and shot her left her to die of exsanguination near a swamp, while her 10 year old son slept locked in his upstairs bedroom.

I went crazy for a time after that couldn't function, lost my wife, jobs family did nothing but rage, drugged, drunk, homeless for a time. I finally got it together enough to see a grief counselor in Seattle, it took my last 200 bucks just to get in the door, he had a fine office that looked out over the bay. When he came in I told him the story and after I was done he excused himself, left and came back with my 200 dollars and gave it to me saying, "You don't need to be worrying about this right now." And I lost it, broke down and cried and cried.

And so there are people, good people who do care about suffering about the pain of others who are not driven by greed or the appearance of things, people who have an innate passion for helping, for teaching, for healing. Have little interest in money and all its permutations. Who are truly committed to helping people.

I believe Kim Rotchford to be such a person.

I first met Kim 30 years ago. I was married to a teacher named Barbara, we were both of us alcoholic in remission and, she was like Kim, a passionate humanitarian. She often told me "I believe we are here to help people" and so I suppose it was no accident that Kim was her doctor or that he had an office way out in ocean shores.

On the way to ocean shores in a smallish field there are signs, Caring, Sharing, Options, this turned out to be the offices of Dr. James K. Rotchford. I didn't know what to think, what manner of Doctor has an office in a field out near the end of the earth and the curious carved signs it was all so very strange. But then I met Kim and after a time it all made perfect sense. I daresay there are not many doctors who think of healing in such terms, caring, sharing, options, not many not money,

Kim treated my bad back for a time. He had an office in a little plaza in Olympia by then. One of his patients had paid the down payment on the place to get him in there. He could inspire that in people. He never did give me any drugs, he was deep into acupuncture then, sometimes it worked, sometimes it didn't and Kim was very much aware of that sort of thing. He once told me his medical school instructor took him and his classmates to a horse racing track at graduation that there is luck and chance in all things as well as healing, and maybe that's why his view of medicine is so holistic that there are well options, caring, sharing options.

I think Kim and Barbara may have been lovers in another life. They glowed around each other, conversed in French and smiled a lot as if they knew a secret joke.

And after that first relapse when Barb and I were together Kim just showed up at the cabin door one night having made the 3 hour drive one night to announce he had reserved a bed in a treatment center for her. It was like that if Kim was your friend. He showed up at the apartment there on Water Street once with some kind of illuminated screen that he said might help for seasonal affect disorder. I didn't know what it was. Kim is was eccentric, eclectic, but at heart always the healer.

I don't know what Kim did, but I can guess that it was some procedure that didn't fit in some ordered medical system. He did tell me once too I think that he prescribed medical marijuana, maybe that was part of it. But I can't put that together with Port Townsend I can tell you though that Kim Rotchford would never knowingly hurt another human being,

I lived for ba time in port townsend. It was my last year with Barb You could see why Kim and his artist wife would fit there, there were artists everywhere. We traveled in different circles I jammed with kitty at the uptown for free beers he held free clinics nights in the back of some church, we had an apartment above the hardware store on water street you could hear the digeridoos and the string quartets on the street below and god loved that town and I worked on the great american novel with the rest Played pool at the town tavern with the artist Jim Alden, himself

Kim went to AA meetings but as far as I know in the 30 years I've known him, he's never taken a drink, I think he goes to study the addiction model or to sharing, caring, options

In the end after I'd left her i just wasn't strong enough to go on. A family member sent me an email telling me she was gone. The homeless she took in stole from her her friends let her down down so far she just could not make it up again a suicide at 51. Kim and some friends had a small get together somewhere in Port Townsend, and I climbed back into the bottle here on the east coast

Life is hard for the passionate, the truly altruistic we are wary of those that we can't understand and envious too that some meaning some pleasure can come to some even in the simple act of helping. The grim realities of living take their toll, the greed and sloth wear at you, and each time they take you down you get back up with a spirit that is a bit diminished a light a little less bright and you can only wonder how you'll go on.

And so they have come again to take one more of the gifted, and in the end he will be bankrupt, wounded, beaten, and sadly wiser. I wonder who and how he will go on

[Quoted text hidden]



PAUL CARDWELL, MA, CDP
2235 LISTER RD. NE
OLYMPIA, WA 98506

Phone: (360) 456-1709
Cell (360) 489-5115
email: mindlayer@msn.com

March 13th, 2011

Pain Support Group of Washington
1240 W. Sims Way
Suite 20
Port Townsend, WA 98368

To Whom It May Concern:

I am writing in response to and at the request of the Pain Support Group of Washington after they notified me of J. Kimber Rotchford's legal problems. I first met Dr. Rotchford when I arrived in Port Townsend to work for the newly formed Madrona Institute of Washington. I took a residential apartment above his uptown office. My work relationship and personal relationship gave me a unique opportunity to get to know Dr. Rotchford. Through these relationships I can attest to Dr. Rotchford's moral character, kindness and professionalism. Dr. Rotchford always kept his patients' health in the forefront.

Dr. Rotchford's patients were often the disenfranchised of the community; those turned away from other treatment centers because they were being prescribed pain medications. These patients provided urinalysis samples to monitor their rate and frequency of ingestion. When Dr. Rotchford found they were not following their prescription he sought out chemical dependency treatment for them. Often times they were forced to seek treatment out of Jefferson County. I knew him to help patients outside of their addiction by helping them find transportation and places to stay while they attempted recovery or harm reduction. He served the homeless and mentally ill without discrimination.

I have worked in the field of chemical dependency for over twenty years and most recently combined this experience with a mental health practice. Only one other time have I met anyone that served his patients with as much compassion, empathy, understanding and fortitude as I witness with Dr. Rotchford.

The treatment of pain and addiction to pain medications is complex and often controversial. Besides pharmaceuticals, many pain patients are treated with holistic medications, acupuncture and abstinence to name a few fields of theories. Dr Rotchford never stopped looking for the right legal combination to address his patient's symptoms.

Dr. Rotchford worked tirelessly for the community, Port Townsend and Jefferson County, as a physician, church member and volunteer. In my judgment, Dr. Rotchford is a leader and a humanitarian above reproach. He is a valued voice in the research for pain management and looks for collaborative solutions.

I consider Kimber a colleague, mentor and friend and commit to standing with him in this time of need.

Respectfully,

Paul Cardwell, MFT, MHP, CDP

Melanie McGrory, MD, PS
1136 Water Street, Suite 111
Port Townsend, WA 98368
tel (360) 379 – 4767
fax (360) 385-0083
cell (360) 531-1443



3/16/2011

To Whom It May Concern-

As I have known Dr Rotchford in a variety of circumstances since he moved to the area in the early 1990's I feel particularly qualified to write a letter on his behalf. He has been a supportive colleague, and a wonderful referral source. I have often needed to send him among the most complicated of my patients. He has always been willing to go the extra mile for a patient to help them get much needed specialty consultation and care which is almost impossible to come by otherwise.

In the past ten years as two solo practitioners, we met regularly over lunch to discuss medicine, complicated patients, and share ideas. For a couple years when he needed it, I also had the opportunity to work for him at OPAS. It was a privilege to see such a fine clinician at work especially with such complicated patients.

After sustaining a severe whiplash injury in a motor vehicle accident I was so grateful to be able to call on his expertise as a patient. His excellent, comprehensive care helped me return to my own practice much sooner than otherwise expected.

As a person he is one of the kindest, most conscientious, dedicated, fair minded, intelligent, consequential and creative people I know. He is a founding member of the Jefferson County Medical Society, well respected and regarded in his field and has been a pillar in our community for nearly two decades.

Sincerely,

Melanie McGrory, MD.

3/12/2011

Gmail - letter for kim



Pain Support Group of Washington <psgofwa@gmail.com>

letter for kim

Joan Jonland <jonland@cablespeed.com>

Sat, Mar 12, 2011 at 11:39 AM

To: Pain Support Group of Washington <psgofwa@gmail.com>

I'd like to put my two cents in concerning Dr. Kim Rotchford and his family. Kim Rotchford is a wonderful asset to our community. I have known their family for many years. I worked for him as a receptionist about 15 years ago. He was great boss and so helpful to the staff and patients. Always willing to listen. My two daughters, Isabelle and Ingrid Jonland are good friends to Kim and Elisabeth's daughter, Tobin. We have spent time with them socially and I must say they are a wonderful family. A strong faith has helped them. And even in their troubles Kim and Elisabeth are always reaching out to help others. It would be a travesty to loose Dr. Rotchord's specialized practice in the community. He has touched so many lives in a caring and professional way.

Sincerely, Joan Jonland



Pain Support Group of Washington <psgofwa@gmail.com>

Kimber Rotchford, M.D.

Russ Minter <minterr@olympus.net>
To: psgofwa@gmail.com

Thu, Mar 10, 2011 at 2:08 PM

Pain Support Group of Washington

I have known J.Kimber Rotchford, M.D., for six years here in Port Townsend. Kim has a group of men who meet each Saturday morning at the cafeteria of Jefferson Healthcare Hospital. I joined this group in 2004, and remained a member for two years. Subsequently, Kim called me and asked if I would give him a hand in his group work at his clinic, just to "be there." By this, he meant take a small part in his groups once or twice a week, just because he felt strongly that my presence as a priest would be helpful and perhaps relaxing for his group members, some of whom obviously needed reassurance. I did this for a couple of years, up until the time of the investigation by the State of Washington for unnamed possible violations of the law. My role included conversations with the group members, occasional observations, or questions, as they occurred to me. This activity gave me insight into what Kim was undertaking to do with these people, basically younger men and women with chronic pain problems which had resulted in addiction to the medications they had been taking. For this I received no compensation other than reimbursement for driving into town and home again.

I am a retired Episcopal Priest of the Diocese of Texas, presently eighty-four years of age. Kim and I occasionally have breakfast together at eateries in Port Townsend to talk things over. I try to offer helpful feedback to him from the standpoint of a disinterested observer. The material he offered his clients in these groups consisted entirely of medical analysis of the kind of stress and attendant issues he knew they had to face. He got very deep into the medicine of brain function, a subject of which I know little or nothing other than what my personal experience in parishes and hospitals in which I have served as chaplain. We had an excellent relationship at all times, for which I remain grateful. His general approach was entirely realistic and appropriate, taking due account of his intimate knowledge of his subject matter, the human brain. At every session, he asked for questions from the group members, and earnestly responded with insights he expected might help individual sufferers.

This is the extent of my functioning in Kim's clinic. It doesn't seem much, but I am glad I was able to help, even a little. What could possibly be of concern to law enforcement agencies of the state government remains a mystery. I know the depth of this physician's commitment to healing, and his passion to do what his resources enabled him to do. I hope with all my heart and soul that he can quickly resume his work; that work is his life as helper and friend for some of the most needful of the sufferers among us here in Port Townsend and the Olympic Peninsula. It is monstrous that he should be forced to suspend his splendid attempt at healing and restoration for those people, without so much as a stated charge as to why he has had to give it up. If only there were more I could do than merely protest! Perhaps there will be -- I devoutly hope there will.

The Rev. Russell D. Minter
364 Beckett Point Road
Port Townsend, Washington 98368

Michael Felber

670 Adelma Beach Road Port Townsend, WA 98368 360-385-0202

March 3, 2011

To:
Pain Support Group of Washington
1240 W Sims Way, Suite 20
Port Townsend, WA 98368.

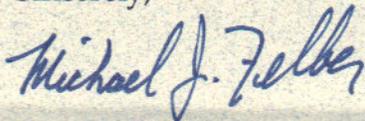
Regarding: J. Kimber Rotchford M.D.

J. Kimber Rotchford M.D. was my primary physician for about 14 years starting in 1992 when we moved to Post Townsend. He is the kindest most understanding and helpful physician I have ever met in 64 years. Everyone who I have ever known, who has seen Dr. Rotchford for medical help, has had a similar experience. He has made himself available for emergency advice at any hour of the day or night.

In 1998, when I developed a lump on my neck, which turned out to be a life threatening case of thyroid cancer, he correctly advised me to get a biopsy, and then helped me negotiate the complex process of diagnoses, surgery and recovery. Without his help, I might not have caught the cancer in time to survive. He helped me to cope with the fear and extreme physical threat of cancer. In about 1994 he helped me stop the use of allergy drugs that I was taking, through the practice of acupuncture.

He has always been pleasant and helpful beyond the call of duty. I would unhesitatingly recommend him as a physician to anyone. It would be a considerable loss to our community, if Dr. Rotchford loses his practice due to his current legal problems.

Sincerely,



Michael J. Felber

Alan G Greenwald M.D.
Jefferson Orthopedic Group
834 Sheridan Ave.
Port Townsend, WA 98368
Tel 360-344-0400
Fax 360-344-0418

2/28/2011

To Whom It May Concern:,

I am writing this letter of behalf of J. Kimber Rotchford. My concern and purpose for writing this letter for Kimber is a result of the criminal investigation of his practice recently. I have known Kimber for over 4 years since moving to this community. He has been a friend, pain specialist consultant, and president of the Jefferson County Medical Society, of which I am the current president.

Kimber is a well regarded Pain Management consultant and has been recognized as a leader in the state, having served as the president of the state society. He treats patients in this community who would otherwise fail to receive treatment due to the complexity of their problems and poor insurance coverage. I am aware of his forward thinking views on pain management, and that he has attempted novel ways of providing care to this very difficult class of patients. While many people and institutions are concerned about drug abuse and Medicare/Medicaid fraud, Kimber is someone with the knowledge and creativity to help solve this type of problem in our society.

Kimber is a well respected physician in this community for other reasons also. He founded and regularly continues to volunteer his time at JC Mash which is the only free clinic in our county. He has been recognized by the town and awarded an honor for these humanitarian efforts.

I am gravely concerned about the investigation, which to my knowledge has not resulted in any findings of wrong doing or penalties by any agency. It is a dangerous precedent for law enforcement to interfere with a medical practice. It has far ranging disruptions to a physician's reputation, income and the care of patients in that practice. Such is the case here. Even if there were no illegal findings, the damage to Dr. Rotchford's practice could be a permanent loss of reputation and of income at best, and inability to practice successfully in this community at worst. The costs of defending against unfounded accusations can be staggering and prohibitive. I am aware of cases of physicians being exonerated of any illegal activity yet paying huge legal fees and never recovering fines levied against them, and the proper government insurance payments due after years of fighting. This is my fear regarding the investigation of Dr. Rotchford.

Also, in this instance there has been a surrendering of patient's medical records which could result in a loss of privacy as well as interfering with the continuity of their care. This could theoretically become a life threatening issue for a critically managed patient.

In summary, Kimber Rotchford is a valuable member of our medical community. He deserves our support and continued respect during this time.

Sincerely,


Alan Greenwald MD.

February 28, 2011

Subject: Dr. Kimber Rotchford

To Whom It May Concern:

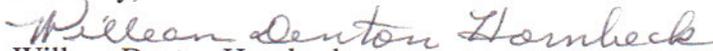
I have known Dr. Rotchford for the past five years and am acquainted with one of his patients whom I have known for at least 10 years. His patient has nothing other than praise for the medical care received. He was successful in resolving her problem where other doctors were unable to do so. She is, as is Dr. Rotchford, one of the leaders in the community.

I am aware of Dr. Rotchford's outstanding work, the honors he has received for his volunteer contributions to the MASH medical clinic which serves the underserved in Jefferson County, the respect paid him by other medical professionals, and his exceptional training and expertise.

I know, also, that Dr. Rotchford is a person of faith, has the highest principles, and I believe that he provides scrupulous medical care within the bounds of the highest medical ethics. I trust that the review of his practice will reflect this. He is a beacon of hope for many patients who without him would find no other available care. His clinic is a model for others and his work should be respected.

Thank you for this opportunity to provide support for a fine man and physician.

Sincerely,



Willean Denton Hornbeck

P. O. Box 1079

Port Hadlock, WA 98339

Phone 360 437-2786 or 206 390-0913

To Whom It May Concern:

This letter is in support of J. Kimber Rotchford, MD. After experiencing inexplicable mental and physical symptoms that left me unable to function, my partner brought me to Dr. Rotchford, who had successfully treated him for an allopathic condition.

When I met Dr. Rotchford, I was struck by his compassion, his intellect, experience and focus on resolving the cause of my symptoms not just masking them. He contemplated different ways to view the problem, drawing on both Western and Eastern medical thought. In the end, I believe that his extraordinary capacity to integrate all these ways of thinking together with common sense produced an approach that successfully treated my condition. I am very thankful.

I think Dr. Rotchford exemplifies true compassion. Compassion, as described by the Dalai Lama, is understanding why someone is suffering and then doing something about it. He has certainly extended his compassion to patients like myself, to the poor and to those whose afflictions go largely untreated for many reasons.

I am thankful that we have so many talented doctors in Port Townsend. However, it is important for us to recognize those who are making such a big difference in our community and in the lives of the many who cannot get medical care from anyone else in the region.

Thank you for giving me this opportunity to write a personal testimony in support of Dr. Rotchford. I am grateful for his services, talent and integrity at a time when so many have disabused our trust in the healthcare industry.

Sincerely,

Joanne Kumekawa
kwajin77@gmail.com
March 9, 2010

3/8/2011

RE: James Kimber Rotchford, MD

To whom it may concern,

I am a medical colleague of Dr. Kimber Rotchford. I am board certified in internal medicine and in addiction medicine. I am Medical Director for two agencies: Kitsap Mental Health Services in Bremerton, and South Sound Clinic of Evergreen Treatment Services in Olympia, a methadone maintenance clinic.

I have had regular communication with Dr. Rotchford over the years as he has established and developed Olympic Pain and Addiction Services. Dr. Rotchford has from time to time told me about his efforts to expand addiction services to people who would usually not be able to afford them, such as medicaid or uninsured patients. He has told me of his communications with DSHS to get approval to do group treatments, an innovation he developed so he could treat people who would otherwise not be able to get treatment.

It is now clear that Dr. Rotchford was pushing the boundaries of what is acceptable practice. I do know that Dr. Rotchford would have immediately changed his practices had he known that what he was doing was unacceptable or "fraudulent". He has evidence that he attempted to get (and thought he had obtained) permission to do what he was doing. Every conversation I ever had with Dr. Rotchford about his work with OPAS was focused on providing treatment for people with chronic pain and addiction.

While I don't agree with Dr. Rotchford on some of his opinions about treatments and approaches, I do attest that there was never any evidence from any conversation or observation I ever made of his practice that would lead me to believe he was intentionally doing anything that was not acceptable practice. To prosecute and discipline him criminally does not seem fair or appropriate. There was no intent to do anything but provide the best care he could to people who otherwise would have no access to care.

Sincerely,

David L. Beck, MD

Medical Director
Kitsap Mental Health Services
5455 Almira Dr NE
Bremerton, WA 98311
360-415-5822
dbeck@kmhs.org

Medical Director
South Sound Clinic of Evergreen Treatment Services
6700 Martin Way East
Suite 117
Olympia, WA
360-413-6910
davidbeck@evergreentreatment.org

To whom it may concern,

I have been a patient of Dr Jim Rotchford for 20 years or more. A friend of mine had referred me to him because she considered him the best acupuncturist she had ever been to. At that time Dr. Rotchford had 2 offices, one in Ocean Shores and another in Olympia. I lived in the Olympia area at the time so it was convenient for me.

Dr. Rotchford became my primary doctor. He helped me through all of the normal medical things like colds, flu, headaches but he always went a step further in his caring ability, taking the time to really listen to me. He always honored my concerns. I have never liked depending on chemicals and drugs to take care of or cover up symptoms. Dr. Rotchford's approach with medicine was very appealing to me because he used medications when needed but liked using Chinese herbs whenever possible and appropriate to give the body the ability to strengthen naturally from within.

I don't remember how long he had the office in Olympia, but at a certain point, he closed that office and had just the one in Ocean Shores. I tried finding another Dr. in Olympia that I could feel confident with but after other doctors had failed to diagnose a thyroid problem that I had I went back to Dr. Rotchford. The drive was long but the care I received was worth it.

When Dr. Rotchford moved his practice to Pt. Townsend I decided it was too far to consider him my primary doctor. Then I went through some of the toughest experiences of my life and felt I needed acupuncture to get me through the stress. Dr. Rotchford didn't just help me through the stress but helped me pin point the reason for the stress so I could make the necessary changes in my life to be happy and without the major depression I had been experiencing. Once again, I felt the drive was well worth the caring and medical expertise I received. I jokingly asked him to please not leave the state.

Currently I live in Everett and going to Pt. Townsend is not a quick trip. Not only is it long but now with gas and the ferry it's expensive. But I still feel that the care I have always received from Dr. Rotchford has been worth it. I know that I can trust his insights and medical expertise. He has never advocated for a drug company. I have had other doctors that have wanted me on pain meds or other medications that could be harmful to me but Dr. Rotchford has always advocated for me; for my body to find a way to get well and then stay well without harmful medications whenever possible.

Dr. Rotchford has helped me through many negative experiences in my life from emotional stress to car wrecks and I have always believed that he was a special gift from God in my life. I would trust Dr. Rotchford over any other doctor I've ever seen in my 53 years on this earth. He has always given me the best care.

Sandra L. Reite

360-250-5420

3/8/2011

Gmail - Dr. R support letter



Pain Support Group of Washington <psgofwa@gmail.com>

Dr. R support letter

Marilyn Muller <marilynm59@gmail.com>

Mon, Mar 7, 2011 at 10:17 AM

To: Pain Support Group of Washington <psgofwa@gmail.com>

3/7/2011

To Whom it May Concern:

It is a sad fact of human nature that people who act outside the norm of self interest are suspect. Dr. J. Kimber Rotchford is under attack and his medical practice greatly curtailed because he has shunned lucrative medical specialties for a controversial one. Dr Rotchford treats the people the world rejects, the addicted. He does it in a non judgmental way, with kindness and professionalism. He treats the poor. He set up Jefferson County Mash, a free clinic, and donates his medical expertise there as its doctor.

He is also a pain specialist. He successfully treated me more than 5 years ago when I was in extreme, disabling pain from a severely deteriorated hip. I could not have surgery for almost a year. The family practitioners I saw (my doctors for least 10 years) prescribed a pain medication that not only was ineffective but made me sicker than I'd been in all my life and one night ended up in the hospital emergency room. They were not just unhelpful they did not believe me and acted as though I were senile. When I finally found Dr. Rotchford, he treated me with respect, prescribed and carefully monitored the different medication use and reaction, and greatly alleviated the pain until I was able to have total hip replacement surgery.

Because the medication Dr. Rotchford prescribed did not totally relieve the pain which often kept me awake at night, I asked if he could increase it. He said no but then asked me to attend group classes he held. He taught us that stress increases pain and gave suggestions for avoiding it. He emphasized putting joy in our lives and easy ways to do that. He showed us simple exercises. I still refer to my notes when my life gets off kilter to remember what he taught us-- good lessons for life's crises as well as for pain.

I again saw Dr. Rotchford when my other hip went bad. I had to endure three years of pain before the orthopedic surgeon would operate (June 2010). The pain this time was not as severe, but bad enough, and Dr. Rotchford prescribed a non narcotic pain drug. After each surgery, the orthopedic surgeon prescribed heavy doses of oxycodone and oxycontin-- believe me they were needed-- and I was able to be off them in a month. I now take nothing, not even an aspirin.

I suspect that part of this recent investigation of Dr. Rotchford is due to a national crack down on illegal selling of narcotics by unethical doctors. I've read that the problem is widespread in Florida. However, Dr. Rotchford is not part of this by any stretch. He should be held up as an example of the finest, most humane practitioner for the addicted and those in pain. He is conscientious, meticulously careful, kind, respectful and dedicated. I do not know what I would have done without him.

Sincerely,

Marilyn Muller
940 Lawrence St. #403
PO Box 1754 (mailing address)
Port Townsend, WA 98368
360-379-9553



Pain Support Group of Washington-Dr. J.K. Rotchford M.D.

DocFain@aol.com <DocFain@aol.com>
To: psgofwa@gmail.com

Sun, Feb 27, 2011 at 10:09 PM

February 27, 2011

To whom it may concern:

I am writing this letter to support the excellent physician who lives here in Port Townsend, WA., Dr J. Kimber Rotchford M.D..

During my first job as an RN ('77) I learned a very important fact which I made sure was emphasized to workers when I helped set up of the curriculum for the first Hospice in Marin County, CA.

That fact is as follows:

The determination and administration of proper dosage of narcotics to the suffering patient is not just a calculation of weight and dosage as determined by pencil and paper. It is a delicate assessment of the patient's 1) psychological make up, 2) the level of pain and 3) the physiological problem that presents for treatment Which is exactly what Dr. Rotchford does.

When ALL these criteria are not carefully observed and handled it often results in excruciating pain and addiction which seem to be a common occurrence among a significant number of physicians. When pain is NOT properly treated it results in drug addiction.

Port Townsend has been my home long enough see his name in print honoring him as a pillar of the Port Townsend and I've met several people who were under Dr. Rotchford's care none of whom had a problem transitioning

from narcotic treatment to being medication free. The medications amounts were perfectly determined and smoothly transitioned to no medications. This is truly an art not just a science.

It is pathetic commentary that the belief system of ignorant people and even lazy medical professionals seems to be the criteria for judging what constitutes appropriate medical treatment of the multiple complexities of pain relief for patients by merely checking "recommended" dosage from a label in a book or on a bottle with out any sensitive consideration for the many circumstances previously mentioned. .

I would hope that Dr. Rotchford's practice is restored so he may carry onv his lifes work and continue relieving our lives of the pain from which so many of us suffer.

Very truly yours,

Audrey L. Fain, Ph.D. (retired)
Registered Nurse CA.-WA.
Public Health Nurse - CA.
Marriage/Family Counselor CA .
5821 Hill St.,
Port Townsend, WA. 98368

cc: Dr. Rotchford
Jessica Rice @
Pain Support Group



Pain Support Group of Washington <psgofwa@gmail.com>

cswantner@juno.com <cswantner@juno.com>
To: psgofwa@gmail.com

Sun, Feb 27, 2011 at 3:10 PM

To whom it may concern,

Subject: Dr. Kimberly Rotchford

From: Scott Swantner
Owner of Nowak Plumbing, Ltd.
738 Oak Street
Port Townsend, Wa 98368

This is a letter to acknowledge my opinion of Dr. Kim Rotchford, whom I

have known for the past 15 years.

I first met Dr. Rotchford approximately 12 years ago when I consulted

with him for a medical reason. I was impressed by his vast knowledge and

commitment to Chinese medicine. He helped me with my condition and

would often take time to speak with me whenever we saw each other, always

encouraging and genuine in his concern.

In my capacity as a licensed plumber and a business owner for 15 years,

I have offered my services both in his office and his home. I know his wife

and children. I have always found Dr. Rotchford to be respectful, courteous,

and honest. I believe him to be a devoted husband and father and a

responsible member of our well-knit community.

Sincerely,

Scott Swantner

John Boles
303 Castellano Way, Unit #1
Port Townsend, WA 98368-5025
360-379-0236
email: bolesjib@cablespeed.com

February 22, 2011

To Whom It May Concern:

Re: J. Kimber Rotchford, M.D. and alleged criminal violations

I am writing in regard to the reported criminal investigation by various authorities into alleged violations by J. Kimber Rotchford, M.D. related to possible misuse of pain medications and Medicare/Medicaid fraud. No doubt prescription drug abuse and fraud are serious problems for our society. However, I doubt that Dr. Rotchford is anything but an asset to the community and a solution, rather than a problem, to appropriate drug dispensing; and, if accounting errors are found they will be at worst mistakes and not fraud.

I work periodically as a volunteer staff person on Tuesday nights at the Legion Hall in the M.A.S.H. [Medical Advocacy and Services Headquarters] clinic, which was founded and is staffed by Dr. Rotchford in cooperation with one other doctor in Port Townsend. This is a free clinic, open to anyone but especially to those who can least afford or obtain medical attention. In fact, Dr. Rotchford's commitment to the M.A.S.H. clinic is so strong that he was there the night of the raid on his office and home and continues to fulfill his scheduled obligations. I know Dr. Rotchford to be a compassionate, conscientious, cautious and capable medical practitioner, and I have overheard him numerous times sympathetically counseling people to reduce alcohol consumption or to work to avoid drug abuse and to seek ongoing help.

Dr. Rotchford offers special and professional services to the community as a leader in his scientific understanding and provision of pain and drug medication, which, unfortunately, seems to be a misunderstood—indeed, often avoided—specialty. Without Dr. Rotchford's vital practice the community lacks the capacity and knowledge to help adequately the victims of pain and/or drug addiction and they will be left to fend for themselves. I know of one person residing in Port Townsend who suffers from chronic, often incapacitating, intractable pain due to a diagnosed, but poorly understood disease, who has only recently been able to find significant professional understanding and treatment in Seattle. I believe the current climate of suspicion and misunderstanding about the use of controlled substances has made local practitioners afraid to appropriately dispense such medications. Probably for some of Dr. Rotchford's patients also the closest professional contact resides as far away as Seattle, Bellevue or Olympia, even if the clients have the social, economic, or physical mobility to go there. The community suffers without this service, much as it would if surgeons were not

available to remove cancers and stitch wounds, or if we had to go to Seattle, Olympia or Bellevue to seek pharmaceutical relief for our ailments.

I'm amazed that the understanding, treatment, and acceptance of chronic pain and/or drug addiction seem so poorly understood in our technologically advanced society. Pain treatment may be still to be a developing field, but Dr. Rotchford is to be commended for his leadership and contributions to evolving the science and further defining the field, rather than vilified as a possible criminal. I advocate an enlightened, administrative, corrective approach by the authorities to resolve accounting errors, if any, or when making enquiries about the management of controlled substances.

Sincerely,

[signed]

John Boles, Ph.D.



Pain Support Group of Washington <psgofwa@gmail.com>

Douwe Rienstra <medical@olympus.net>
To: Pain Support Group of Washington <psgofwa@gmail.com>

Tue, Feb 22, 2011 at 11:41 AM

[Redacted]

[Redacted]

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To Whom it may concern:

Kimber Rotchford, MD, has been a respected member of our medical community for many years. He started and has, largely by his own efforts, kept a clinic open for the indigent and under-served of Port Townsend.

He and I together are members of Executive Committee of the Jefferson County Medical Society, he as Past-President. In our meetings, he evinces a constant concern to extend medical care to those least able to afford it.

Let me assure you that whatever he undertakes as a physician, he does it for the well-being of his patients.

Please accord him the regard and consideration he deserves.

Douwe Rienstra, MD
Secretary, Jefferson County Medical Society

=====

[Redacted]

[Redacted]

[Redacted]

[Redacted]

[Redacted]

Telephone 360 385 5658 open weekdays 8 am Pacific time
Fax 360 385 5142
www.rienstraclinic.com
242 Monroe Street, Port Townsend, WA 98368-5709
USA



J. Kimber Rotchford M.D.

Ovidio Penalver <ompenalver@yahoo.com>
To: psgofwa@gmail.com

Sun, Feb 27, 2011 at 3:01 PM

To Whom It May Concern,

I am writing regarding what has been reported as a criminal investigation into J. Kimber Rotchford M.D.'s medical practice.

I recognize that addictive drugs has been a grave problem in our society particularly among the prescribing providers. I know Dr. Rotchford is not in that group of physicians.

I have known Kim since he was a medical student in the Great Falls Clinic where I was practicing pediatrics in Great Falls, Montana. We have remained in contact ever since that time and have developed a lasting friendship. He has devoted himself to the care of difficult patients, many of them shun by other doctors, many of them addicted to prescription drugs. His mission has been to help them stop their addiction and the pain that many a time caused them to be addicted in the first place. He is recognized as an expert in this field of pain and addiction. He has been an asset to his community where he is highly respected for his work. He has urged other physicians to be very proactive and vigilant when prescribing pain medicines that might be abused or diverted.

Pain treatment is a developing field in medical practice with an evolving science. Dr Rotchford should be highly regarded for his efforts to further define and advance this field.

I was appalled at the manner in which the law enforcement agents approached his residence and place of work., outraged at the manner in which the warrant was delivered. Dr. Rotchford is a very gentle and peaceful man, of great personal and professional integrity, deserving to be approached with the utmost respect. He would certainly cooperate with whatever would have been requested of him.

Kim is certainly a great asset to his community, he is part of the solution to the prescription drug problem and he should be treated as such.

Respectfully,

Ovidio Penalver, M.D.

2/28/2011

Gmail - Re: Dan Youra's Testimonial for...



Pain Support Group of Washington <psgofwa@gmail.com>

Dan Youra <dan@youra.com>

Fri, Feb 25, 2011 at 12:03 PM

To: Pain Support Group of Washington <psgofwa@gmail.com>

█

This is my public testimonial as printed in the comments at: <http://medicaldefense.blogspot.com/2011/01/share-your-comments.html>

Other comments from Leader and PDN at <http://medicaldefense.blogspot.com/p/profile.html>

Dan
dan@youra.com
379-8800

I add my simple "thank you" to the chorus of voices from patients who express their heartfelt gratitude to Dr. Rotchford for his medical wisdom and compassionate care. What more can a person say beyond some of the beautiful sentiments I have read in comments on local blogs?

One of Dr. Rotchford's patients says it all in her acknowledgement that "I do not know what I would have done without him." As a patient myself for more than 10 years, I second the feelings.

A second person writes, "thank you so much for helping the people who cry out for help and no one else will hear them but you." I second this feeling also. As a board member of JC MASH free clinic for 5 years, I have witnessed first hand the selfless giving of medical care by Dr. Rotchford for a population, often unseen, greatly in need, but, fortunately, not forgotten. His dedicated volunteerism dispenses medical expertise for no monetary compensation.

I join with another writer who expresses profound gratitude in a few words, "thank you and bless you, Dr. Rotchford."

Dan Youra

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Letter in support of Dr. Kimber and Elizabeth Rotchford

We have known Kimber and Elizabeth Rotchford since they arrived in town, in 1993. My husband, David, an orthopaedist, first met him through their common affiliation with Jefferson County Medical Association. David knew Dr. Rotchford as a capable and conscientious physician.

In time, we came to know them more personally. When my sister, Jude Davies, was dealing with the painful carcinoid disease that eventually took her life, Dr. Rotchford helped her, with compassion, patience, and skill, find relief from pain during her long siege. He had an interest in and an expertise with pain management and could help Jude in ways other physicians could not.

Kim belies the stereotype of the doctor who's in it for the money. He has a heart for people living in the margins of society. For a long time, he *was* JC Mash, the local non-profit that helps people who can't afford to pay a doctor. He continues to devote hours to organizing the program and treating those who come for help—for zero remuneration. His commitment and involvement with this program epitomizes the way he has lived in our community.

We share with the Rotchfords an involvement with Christian contemplation. Although we attend different churches, we meet sometimes at a mid-week Centering Prayer group, for a Psalm reading, twenty minutes of silence, and brief sharing. We talk about books we've read and ways we can integrate this interior practice into our communal lives. This is the essence of the people we know the Rotchfords to be.

Sincerely,

Ruth & David Whitney
Port Townsend, Washington
February 2011

January 20, 2011

Jenny Durkan
US Attorney for the Western District of Washington
U.S. Attorney's Office
700 Stewart Street, Suite 5220
Seattle, WA 98101-1271

Dear Ms Durkan:

I am a retired physician writing regarding what has been reported to be a joint criminal investigation by your office and the Washington AG's Medicaid Fraud Unit into the medical practice of James K. Rotchford M.D. of Port Townsend, WA.

Medicaid/Medicare fraud, and the abuse or diversion of controlled substances by physicians should be of concern for both the medical community and the public. The same is true with the "street" abuse of prescription drugs. Unfortunately, law enforcement has not received the support it needs to deal with these problems. But Dr. Rotchford is part of the solution, not part of the problem.

If there has ever been a "poster boy" for the cost effective, scientific, and successful treatment of pain and addiction patients, it is Dr. Kim Rotchford.

Dr. Rotchford has been recognized nationally and internationally for his innovative and cost effective treatment plans for these patients, and he has been a real asset for our community. I have known Dr. Rotchford for over 17 years, and he is not one of the "bad guys." On the contrary, he is an admirable example of a competent and caring physician who has provided treatment for groups of patients whom other physicians refuse to treat, particularly those with chronic pain and opiate addiction.

Physicians avoid such patients for a number of reasons including the following:

1. Few physicians have the knowledge and skill to successfully treat them. Their care is both difficult and fraught with uncertainty.
2. The patients with addictions are often "unsavory," have criminal records, are homeless, and have both psychiatric and multi-system health problems.
3. They are often financially strapped, uninsured or covered only by Medicaid, and unable to make co-payments.
4. And perhaps most importantly, given the unsettled state of medical science, the moral taboos associated with prescribing opiate class drugs for these patients, and the worry about precise compliance with record keeping and other rules and restrictions, physicians are just plain scared to treat them.

Realizing the hazards associated with treating such patients, most physicians decide to avoid the problems: *“Why should I take on the many risks of treating this group of patients? I have enough problems, let someone else do it.”*

That answer has not been good enough for Dr. Rotchford. Seeing the suffering and lack of available care, he has been unable to turn his back. Aware of the risks, he nonetheless has stepped up to help as physicians are sworn to do. Moreover, he has been a leader within our community regarding prescription drug abuse, urging other physicians to be proactive in preventing diversion and overdoses. Additionally he founded and volunteers at Jefferson County MASH, a free medical clinic open to all which now operates at two locations in Jefferson County.

If your office determines that Dr. Rotchford is somehow out of compliance, please help him get into compliance so that his valuable work for our community may continue.

I beg you to carefully review this case. Prosecuting Dr. Rotchford will not end well for anyone. We will all lose.

Sincerely,

Samuel W. Shoen M.D.

Note: Because I am unsure which office is responsible for the reported investigation, I am sending a similar letter to the Washington State Attorney General's office.



My Doctor, My Friend..

Stephen Beebe <stephen.beebe@gmail.com>

Fri, Feb 4, 2011 at 6:54 PM

To: psgofwa@gmail.com

To Whom It May Concern:

In Texas 5 years ago, I was hit and trapped in the car, when a 18 wheel Gas transport Truck drove over me in the car. When They X-rayed my Spine. It was diagnosed with Degenerative BONE Disease. (WOW, Thats why I hurt all these years and WHY I hurt so bad. THEY (The doctors) Started giving me 300 Hydrocodone...then stronger Opiates.....Back up to "OXYCODONES. The " unquote" Doctors there gave me 120 15 mg ..

When I eventually came to be referred PAIN MANAGEMENT .DR ROTCHFORD being OUR Only CHOICE. After established and Stabilized With Doctor Rotchfford.

"DIAGNOSED BY A REAL CARING, ""DOCTOR. I am almost 60, IF , I, Had not had DR ROTCHFORD I may have just killed my self.

"Can IT BE More REAL?" I LOVE MY DOCTOR, I NEED THE RELATIONSHIP With My DOCTOR !!!
"This DOCTOR is marvelous with TREATING The Whole Brain, at the PAIN CENTER...YOU WOULD HAVE TO EXPERIENCE THE INRETRACTABLE PAIN I SUFFERED BEFORE DR ROTCHFORD...was unfair, it made me angry...and I'm not a guy anyone wants angry..

Stephen Beebe
73 W.Montgomery
Port Hadlock, Wa.98339



Pain Support Group of Washington <psgofwa@gmail.com>

Letter of support for Dr.J. Kimber Rotchford MD

Polly Thurston <ptravennest@hotmail.com>

Tue, Apr 12, 2011 at 10:57 PM

To: psgofwa@gmail.com

To whom it may concern,

Dr. Rotchford is an asset to our community. His support and innovations have helped many - My example is only one of many. Several years ago when I was a graduate student, I returned to Port Townsend to complete writing my masters thesis. I had no income, no savings and I was in debt with student loans, plus without medical insurance. Dr Rochford had started the MASH clinic to serve people in need - that was me! I was very grateful to have a place to get feedback on medical concerns and for his kindness when he helped me (I saw a couple different Docs). I didn't know him then, but over the years I continue to be grateful for his helping my family. Dr Rotchford serves the Port Townsend community - his kindness and service is important.

Polly

The OPAS Experience

An Outpatient Model for At Risk Chronic Non-Malignant Pain Patients

BY J. KIMBER ROCHFORD, MD, MPH

THIS ARTICLE INTRODUCES a therapeutically and financially viable clinical model for caring for patients with chronic non-malignant pain (CNMP) who are at risk of or have addiction problems. While this article is directed primarily toward those with prescriptive authority, it will be of interest to anyone involved in caring for patients with CNMP.

The Olympic Pain and Addiction Services (OPAS) was founded in 2004 as a private, non-subsidized chronic pain and addiction medicine service to serve a rural area on the Olympic Peninsula in Washington. My background providing primary care in this rural and relatively underserved setting, experience in medical acupuncture dating to the early 1980s, and a keen interest in helping patients with CNMP and addiction, and the realization that many patients at risk or with established chemical dependencies (CD) did not have access to proper medical help for their CNMP led to the formation of OPAS. While Jefferson County, where we are located, has a population of about 20,000, demand for our services remains high.

The Clinical Model

OUR GOAL is to provide comprehensive and integrative services for individuals who suffer from CNMP and/or addiction. Patients are referred to us by their primary care provider (PCP). After an initial consultation, patients are introduced to our policies and are invited back for ongoing specialized care. We recommend that our clinicians be the sole prescriber of chronically prescribed psychoactive medication for these patients. All primary care and acute pain problems are directed back to the PCP for evaluation and treatment.

Either before or after a 40-minute group counseling session, patients are seen individually for 5 to 15 minutes. From a financial standpoint, this allows us to bill for evaluation and management services that involve about 45 minutes face-to-face with the patient and more than half of the time spent in counseling. While a small

percentage of patients have difficulty with a group setting, for the vast majority, the therapeutic benefits are apparent. Indeed, a number of these patients may not always be best served by one-on-one encounters. Our clinicians are likewise satisfied, because they can use some of their teaching skills without the typical constraints of time. The group setting also allows for additional educational aids and a comfortable setting for discussions. We consider eight participants an ideal group size. Theoretically, this limits the time any one patient has to spend in the office to little over an hour.

Patients are generally seen weekly to start. As they progress, they cut back to once a month. While stabilized patients can be referred back to their PCP for ongoing care, we find the majority of patients prefer to continue to see us for their specialized needs, simply because of a fear of being “poorly understood” by their PCP. In addition, some PCPs are uncomfortable prescribing the psychoactive medications these patients require.

A few patients require medications to be dispensed daily and some come in a couple times a week or weekly for their medications. Most patients, however, pick up their medications from their pharmacist.

Universal Precautions

THE PATIENTS TREATED in this setting have complex medical and psychiatric histories. Covering their unique needs in a 5-to-10 minute period would be impossible if standard procedures and “Universal Precautions” were not in place.

“Universal precautions” were first widely used in the treatment of patients at risk of acquiring or having infectious diseases (1,2). The concept explains why healthcare providers who come into contact with bodily fluids now routinely wear gloves and it implies sound judgment. In a situation where significant risks are present for individuals, and there are no simple and immediate ways to determine individual risk, everyone is considered at risk and screened and treated accordingly.

Routine mammograms and airport security checks both are examples of the use of “universal precautions.”

Gourlay et al introduced “universal precautions” by advocating routine urinalyses and other screening tools on patients who are being considered for or are chronically prescribed opiates (3). At OPAS, for patients who are at significant risk of developing or having a CD, “universal precautions” involve the entire treatment plan. While research is lacking to prove the effectiveness of these precautions, our patients benefit from an approach that assumes that they are chemically dependent or at significant risk of developing CD (4).

Dosing and Monitoring of Patients

THE PHARMACOLOGY of opiate preparations, dosing implications, and medication duration all need to be considered. As a result, it is unusual for a patient with chronic pain to be prescribed an opiate other than methadone or buprenorphine.

“As needed” dosing is strongly discouraged, because it plays into the self-medicating behavior of a patient with the active disease of addiction, and may well end up rewarding such behavior.

Our patients benefit from comprehensive monitoring that involves family, an interdisciplinary healthcare team, and regular office visits.

Fortunately, so much of what benefits a patient with CNMP often benefits a patient at risk of CD.

Our patients range from simply having difficulty adhering to medical advice to outright loss of control over the use of their medicines. We intend for all of our patients to eventually have no issues regarding opiates used, dosage, frequency, complications, unmanaged side effects, lost prescriptions, and availability of prescriptions. While for some this will involve abstinence models, for most others some form of ongoing pharmacological management will be indicated. The outright heroin addict does benefit from methadone or buprenorphine for pain if it is properly prescribed with precautionary and adjunctive modalities. Just like a diabetic—whether on insulin or not—an opiate-dependent individual needs education and ongoing complementary care if complications from his or her disease are to be minimized.

For universal precautionary reasons, including the

need to avoid complications from opiate neurosensitization, the vast majority of opiates we prescribe are methadone or buprenorphine. While even in our specialized and experienced setting, we have patients who have fatally overdosed on methadone or a combination of licit and illicit drugs, we consider the benefits of methadone prescribing to outweigh the risks. It is a tragedy that buprenorphine is not more widely covered by third parties, especially because it is clearly a safer medication. It is also worth noting that the dangers and contraindications of acutely and chronically mixing benzodiazepines and other sedatives with opiates need further widespread dissemination.

Distinctions between Pseudo-Addiction and Addiction

OUR FACILITY MAKES NO DISTINCTION between pseudo-addiction and addiction. Our priority is to provide pain management while eliminating problematic medication use. Mutual trust must be established and our policies help this process. Patient statements such as “I lost my drugs,” or “The pharmacist didn’t give me them all to me,” or “I missed my appointment so I borrowed some,” or “There’s no way that could be in my urine,” or “I just hurt so bad I took more than you prescribed,” we translate into “What extra

help is indicated so that issues around the use of these medications goes away?” Based on a host of contextual issues the interventions will vary, but there are some general principles that help.

The distinction between CNMP and CD is relatively moot. While standard medical care is indicated to recognize and treat acute and progressive nociceptive pain, we consider CNMP and CD to be primarily CNS diseases and all interventions aimed at promoting better CNS function are indicated—be they behavioral, psychological, spiritual, energetic, nutritional, or medical. Indeed, CNMP has central neuro-physiological correlates similar to those encountered in CD.

In the context of our specialized services for CNMP, taking pain medications as needed is relatively contraindicated. Since untreated CD is the chief complication of taking controlled substances and could be considered an extension or progression of “chemical coping,” we strive to limit “self-medicating,” especially in

We make no distinction between pseudo-addiction and addiction. The goal is to provide pain management while eliminating problematic medication use.

high-risk patients. We tell them to take simply what is prescribed and let us determine at their next visit the appropriate ongoing dose or to call us if concerns are significant. Preparing patients for pain flare-ups is essential. Breakthrough pain challenges us to use what we have learned about non-pharmacological coping. If patients have concerns about acute nociceptive problems, they need to be evaluated by their PCP prior to any additional usage of prescription medications.

We take “aberrant behavior” to be a pejorative term and not clinically helpful. We see patient behavior to be more or less consistent with the nature of the medicines used in our culture, resulting in proper use that may be problematic. “Normal” people have difficulty adhering to medical regimens (5). It is all the more to be expected that we would observe non-adherence to our prescriptions when dealing with substances that have the potential of “hijacking” an individual’s reward system, causing withdrawal, and are associated with all the cultural taboos and moral issues around taking “addictive” substances. Hence, we need to assume behavior associated with self-medicating and drug-seeking behavior will be regularly encountered in patients for which we are prescribing controlled substances and should be seen as falling well into a “normal” distribution curve.

When to Make a Referral

WHEN DOES THE OBSERVED BEHAVIOR(S) require OPAS-like services for intense CD or further psychiatric treatment? When dealing with potentially life-threatening disease processes, it is best to be conservative. We believe any patient who has significant risk factors or is not doing well with his or her current therapy that includes controlled substances be evaluated by a specialist or, at a minimum, be cared for in a setting where “universal precautions” are used.

What are the significant risk factors?

WHILE THERE IS A PAUCITY OF FORMAL RESEARCH on the subject, we have a relatively short list of risk factors based on what we know about CD and risks of diversion:

- Σ • History of CD in a first-degree relative or current/previous household. Personal history of tobacco dependency, other CDs, or other behaviors associated with the reward system being “hijacked.” Examples of some of these other behaviors include eating disorders, gambling, sexually-related compulsions, self mutilation, exercise addicts, forms

of religious “fervor,” etc.

- Σ • Comorbid psychiatric issues: ADHD, history of psychosis, post traumatic stress disorder or early childhood trauma, anxiety disorder, personality disorders, etc.
- Σ • Age: As in all learned behavior, the older one is when first exposed to a rewarding substance, the less likely addictive patterns will emerge. The exception is when there is already a significant history of addictive patterns present.
- Σ • Significant disability, including state aid.

Conclusion

PROVIDING WIDESPREAD ACCESS to OPAS-like services is a challenge. Implementing “universal precautions” in a typical primary care outpatient setting is not recommended if attempting to integrate the care of high-risk patients into standard patient flow. Furthermore, support and guidance for integrating our services into a primary care setting has been lacking. We hope that our experiences will guide such efforts and allow the emergence of other facilities suited to treat at risk CNMP patients with opiates.

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4. National Institute of Drug Abuse. Principles of Drug Addiction: A research based guide. NIH Publication N. 00-4180, 2000.
5. Shea SC. Improving Medication Adherence: How to Talk to Patients About Their Medications. Philadelphia, Penn.: Lippincott Williams and Wilkins; 2006.



J. KIMBER ROCHFORD, MD, MPH, is a founding member of the American Academy of Medical Acupuncture and has more than 20 years of clinical experience helping patients with chronic pain. His approach is eclectic and he employs standard medical as well as alternative approaches to pain management. In addition to his pain management experience, Dr. Rotchford has been recently certified in Addiction Medicine. He founded the Olympic Pain and Addiction Services (OPAS) in 2004 to meet the specialized needs of patients with pain and addiction.