

Dwight Ligham, MD

**Governor's Bill No 36**

Gentlemen:

I am strongly opposed to non-physician level providers being able to prescribe and dispense controlled substances independently without physician supervision.

As you know, the problem of prescription pain medication abuse and diversion is rampant in our society. In fact the level of surveillance and supervision required in order to ensure that controlled substances are used appropriately and not diverted is quite high. This level of infrastructure is rarely available in none specialty provider settings and I would suspect even less so in a non-physician provider practice. The standard of care for long-term opiate analgesic patient management demands the highest level of training and infrastructure in order to protect both the individual patient and society as a whole.

In fact it is my belief that certain limits should be set both on the amount and duration of opiate analgesic treatment provided to patients by not specialty pain physicians. This treatment provided by even physician level providers without specific training and certification in pain management should be restricted in terms of both dosage and duration. One might look towards Washington State's law that sets limits in terms of dosage and duration of this therapy in the setting of non-specialty physician providers and directs that patients who need long-term therapy with these medications be sent to physicians with specialty training and certification in pain management.

I think Governor's Bill No 36 sets a dangerous precedent and opens the door to even more prescription drug abuse, and harm to both individuals and society.

Respectfully,

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