



# AMERICAN SOCIETY OF HEMATOLOGY

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**2022**

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Re: *Proposed 2022 CDC Clinical Practice Guideline for Prescribing Opioids*  
(Docket No. CDC-2022-0024)

Dear Dr. Houry,

The American Society of Hematology (ASH) appreciates the opportunity to provide comments to the Centers for Disease Control and Prevention (CDC) on the Agency's *Proposed 2022 CDC Clinical Practice Guideline for Prescribing Opioids* (Docket No. CDC-2022-0024).

ASH represents more than 18,000 clinicians and scientists worldwide committed to studying and treating blood and blood-related diseases. These disorders encompass malignant hematologic disorders such as leukemia, lymphoma, and multiple myeloma, as well as non-malignant conditions such as sickle cell disease (SCD), thalassemia, bone marrow failure, venous thromboembolism, and hemophilia. Many of ASH's members care for individuals with hematologic conditions that are associated with severe acute and chronic pain complications, such as SCD, blood cancers, and other bleeding disorders. Additionally, ASH members also include researchers who investigate the causes and potential treatments of pain associated with hematologic conditions.

As we have conveyed to CDC in recent years<sup>1</sup>, ASH recognizes the challenges with the opioid epidemic in the United States that requires significant attention. Just as the opioid misuse has reached epidemic proportions so does the suffering caused by blood disorders, like SCD and various cancers of the blood. In fact, recent evidence indicates that patients with cancer are now experiencing increased pain amid more limitations on opioid prescribing<sup>2</sup>. As our nation continues to address this crisis, ASH continues to promote cautious, thoughtful consideration of opioid use in order to avoid unintended consequences for patients with chronic diseases who are treated by hematologists. In 2018, ASH released a [Statement on Opioid Use in Patients with Hematologic Diseases and Disorders](#). The Society supports a public health approach that improves the way opioids are prescribed and reduces misuse and overdose yet safeguards access to these drugs for acute and chronic pain treatment for individuals with certain clinical conditions. It is important to ensure that essential efforts to curb opioid-related harms do not unintentionally result in increasing the suffering experienced by many hematology patients who rightfully receive and benefit from opioid therapy to manage their pain.

ASH commends the CDC for explicitly stating that the Proposed 2022 Guideline **does not** pertain to SCD-related pain management, cancer pain treatment, palliative care, and end-of-life care. The Society is pleased to see that this exclusion is highlighted through the document; and we especially acknowledge the table on page two that thoroughly clarifies what the guideline is, and what it is not. We also appreciate that the guideline update reinforces the fact that opioids have a very appropriate and evidence-based role in the management of chronic pain caused by blood disorders, like SCD, and blood cancers like leukemias, lymphomas, and multiple myeloma. ASH is also pleased to see that the Proposed 2022 Guideline explicitly encourages health care providers to utilize current and forthcoming clinical practice guidelines specifically addressing pain in these special populations to help guide treatment and reimbursement practices, including ASH's *2020 Guidelines for Sickle Cell Disease: Management of Acute and Chronic Pain*.

ASH is also delighted to see that the Proposed 2022 Guideline fits with the gold-standard recommendation that we follow a shared decision-making process in patient care. ASH commends the CDC for noting in the draft that the *clinical practice guideline is intended to be flexible so as to support, not supplant, clinical judgment and individualized, patient-centered decision-making*. This important point is in line with ASH's strong belief that in the treatment decision-making process, patients and providers should be able to develop an individualized approach to pain management, including consideration of opioid and non-opioid therapies, without restriction, delay, or interference.

Again, ASH supports the Proposed 2022 Guideline and encourages the CDC to preserve these important provisions as the Guideline is finalized. Thank you for the opportunity to provide these comments. Please consider ASH a resource; we would be happy to provide additional information or support. If you have any questions, please use ASH Deputy Director of Government Relations and Public Health Stephanie Kaplan ([skaplan@hematology.org](mailto:skaplan@hematology.org) or 202-776-0544) as your point of contact.

Sincerely,



Jane N. Winter, MD  
ASH President

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<sup>1</sup> *Correspondence on Pain Management in Hematologic Conditions*

- [ASH Statement on Opioid Use in Patients with Hematologic Diseases and Disorders](#)
- [Statement on Clarification re: CDC Guideline Not Meant to Limit Access to Appropriate Pain Management for Individuals with Cancer, Sickle Cell Disease](#)
- [June 2020 ASH Letter to CDC re: Management of Acute and Chronic Pain: Request for Comment](#)

<sup>2</sup> [US Trends in Opioid Access Among Patients With Poor Prognosis Cancer Near the End-of-Life](#)

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