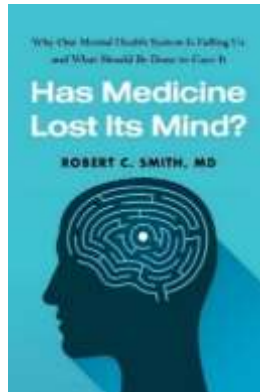


HAS MEDICINE LOST ITS MIND?



Newsletter 21: Do Patients Have a Right to Complete Pain Relief? November 2025

Dear (name),

A recent book offers a much needed new view of chronic pain.¹ It posits that the prescription opioid crisis, which killed over 200,000 Americans, had deep roots. The crisis resulted from medicine's belief that it could eradicate pain and that it alone was responsible for this. There's a fascinating history behind the change in our cultural values and ideas that led to the crisis.

Until around 1500 AD, citizens believed that God willed pain as punishment for their sins—and that they must atone for these sins to achieve salvation. Over the next several hundred years, during the Scientific Revolution, this idea gradually gave way to the Deist idea that God no longer acted in the world after designing it, that man must use his God-given potential to prosper. People could now thrive on Earth rather than achieving happiness only in the hereafter. Pain was no longer necessary suffering, rather, something that interfered with life on Earth, the idea eventually becoming that human fulfillment required reduction in pain and suffering. Pain had become escapable, something to be cured. Society and the medicine saw health as a prerequisite for happiness. And, rather than the Church, medicine emerged over time as the arbiter and caretaker of physical pain. Influenced by Descartes, medicine treated pain as a mechanical, medical affliction, framing it as passive and innocent suffering.

Fast forwarding to the last century, multiple societal events led Americans to expect complete eradication of pain. The United Nations published its Declaration of Human Rights and established the right to pain relief at the end of life, as did a US Supreme Court decision. Various pain societies emerged and averred “access to pain management is a fundamental human right.” Three advances followed that led to the ideal of complete pain relief: 1) anesthetics demonstrated that we could completely relieve physical pain to perform surgery; 2) palliative care evolved and advocated that the dying should receive complete pain relief; 3) the Sackler brothers developed OxyContin, a more powerful narcotic than morphine that was promoted as promising complete relief of pain. Thus, if we could completely relieve pain in terminal patients and during surgery, why not do the same for chronic pain patients with powerful new drugs. Several pain organizations, U.S. government regulators, and Congress then promoted pain as safely relieved

by opioids and advised its use, for example, 2001 to 2010 as the “Decade of Pain Control and Research” and “Pain as a Fifth Vital Sign?”

Massive numbers of patients now sought complete pain relief, and management devolved almost entirely to completely untrained medical doctors.² The opioid crisis followed not only because clinicians and their drugs were ineffective but also because of the reductionistic idea that pain was a disease that could be controlled by medications. Put another way, as I outline in *Has Medicine Lost Its Mind?*, the care of patients requires attention to their psychological and social features as well as their physical diseases.²

If you believe medicine must reclaim its soul, please help us spark this conversation. Forward this email to a friend, colleague, or journalist who cares about health care’s future, or share *Has Medicine Lost Its Mind?* link on your social media with a note about why it matters to you. And tag me, too @robertsmithmd. You can find everything at <https://www.robertsmithmd.com>.

Susan and two year old Petunia join me in sending our best for a Happy Thanksgiving.

Take care,
Bob



REFERENCES

1. Sullivan M, Ballantyne JC. The Right to Pain Relief and Other Deep Roots of the Opioid Epidemic: Oxford University Press, 2023.
2. Smith R. *Has Medicine Lost Its Mind?--Why Our Mental Health System Is Failing Us and What Should be Done to Cure It*. Essex, CT: Prometheus Books (an imprint of The Globe Pequot Publishing Group, Inc.), 2025.