The Drugging of Americans Is Deliberate

by Debra Hanania-Freeman

Jan. 25—Americans are dying off in record numbers, especially those in what should be the most productive years of their lives. The leading immediate causes are drug overdoses, effects of alcoholism, and more direct forms of suicide. Especially drug overdoses. But how many recognize that this is deliberate?

Meanwhile, the authorities who should have been paying attention, have been very slow to recognize the problem. But since Jan. 19, when the Centers for Disease Control and Prevention (CDC) released its report, "Drug Poisoning Mortality: United States, 2002-2014," official attention has finally, belatedly, focused on the nationwide drug epidemic. In fact, the alarm had been sounded three days earlier on Jan. 16, when the *New York Times* published an article titled, "Drug Overdoses Propel Rise in Mortality Rates of Young Whites."

The *Times* article reported that after having analyzed some 60 million death certificates collected by

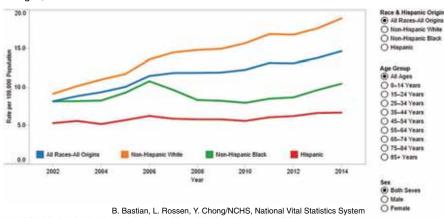
the CDC between 1990 and 2014. it found that overall death rates for Black Americans and most Hispanics first flatlined, then began to fall. The numbers contrasted sharply with a shocking increase in mortality among whites. Propelling that rise? Drug overdoses were found to be driving up the death rate for young white adults, ages 25-34, making them the first generation since the Vietnam War to experience higher death rates in early adulthood than the generation that preceded it, even exceeding the levels experienced during the AIDS epidemic more than twenty years ago.

The recent reports also showed that the rise in white mortality extended far beyond the 45-54 year old age group that was reported by Princeton economists Anne Case and Alexander Stewart in November 2015. The Princeton report showed a sharp increase in the death rate for middle-aged white Americans since 1998, an increase the researchers tied to drugs, alcohol, and suicide.

Although these reports startled policy makers and Washington politicians, state and local authorities have been on an emergency alert for many months, as the body counts pile up and the death rate among young adults and middle-aged Americans—from all walks of life, all socio-economic groupings, and all job categories—skyrockets out of control. A survey of local media in every part of the country reveals a growing sense of panic over the heroin epidemic that has infected every community at an accelerating rate since Obama took over the U.S. Presidency.

Figure 1 Age-adjusted Death Rate for Drug Poisoning by Race and Hispanic Origin, 2000-2014

All Ages, Both Sexes United States



Heroin epidemic in the United States: In 2014, there were 47,055 deaths from drug overdoses. These data from the Centers for Disease Control tell part of the story.

Run from the Oval Office

New York State has released data showing the sky-rocketing of heroin deaths, from 923 statewide in 2003 to over 2,300 in 2014. Staten Island has the highest rate of heroin deaths of all of the five boroughs of New York City.

Ohio State Attorney General Mike DeWine convened an emergency statewide meeting last week, at which he warned that the state is now seeing three or four overdose deaths from heroin every week.

In New Hampshire, where the first presidential primary election will take place soon, voters say that the number one issue on their minds is the drug epidemic, trumping even unemployment and the overall economic collapse.

Both Wisconsin and Maine had already declared states of emergency due to drug overdoses in 2015.

However, none of these reports states the obvious. This opium war against the American people is being run directly out of the Oval Office, where President Obama has given the British Empire's Dope, Inc. a carte blanche to carry out a multi-faceted menticide and genocide against the American people. Obama's policy of nonprosecution of too-big-to-fail banks that launder the drug money for the Mexican, Colombian, and Afghan cartels is an obvious, impeachable crime, for it constitutes nothing less than complicity in mass murder (47,000 Americans died of drug overdoses in 2014 alone) on the part of the President of the United States. During the two terms of Obama's presidency, he has presided over a program of drug legalization, authored by one of his earliest political patrons, George Soros, a notorious British agent whose hedge funds operate offshore in the Dutch Antilles, beyond the reach of American law.

Over the last weeks, American statesman and economist Lyndon LaRouche has emphasized that what is occurring is the product of a cultural assault over more than a century against the population, dating back to the era of Lord Bertrand Russell, H.G. Wells, and the Huxley brothers, attacking the cognitive powers of the population—most recently through drugs, mass media brainwashing, and enhanced techniques like the killer point-and-shoot video games to which so many American youth are addicted. The result is a population that has been beaten down and demoralized to the point that younger Americans in particular have virtually no productive skills.

In a Jan. 25 editorial, the same *New York Times* that "sounded the alarm" on the current drug epidemic,

offers its solution. Not surprisingly, it is *not* going after the banks that launder billions of dollars in illicit drug money. Instead, the editorial puts forward the same argument that the Soros drug legalization crowd has put forward for decades: that what is required is "a rational approach" to control the epidemic, providing treatment for addicts who want it and access to free, clean needles for those who don't.

What they do not—and for obvious reasons will not—address, is specifically how the drug epidemic aspect of this cultural war has been orchestrated. It is worth looking at.

When discussing the influx of drugs like cocaine and heroin into the United States, the names that come to mind are usually those associated with Colombian and Mexican drug cartels. Last week, the *Huffington Post* reported that Mexican drug cartels are flooding with heroin those areas of the United States where the documented rates of prescribing OxyContin and other doctor-prescribed opiates are the greatest. For decades, these cartels concentrated on trafficking the far more profitable cocaine. The American appetite for heroin was far more limited. So, what changed?

Meet the Sacklers and Purdue Pharma

As Jason Smith recently explained in "The Real Edition," in 1995, the year after receiving FDA approval, OxyContin accounted for \$45 million in sales. By 2000, sales had increased to \$1.4 billion. Not many companies can boast a product whose sales increased by 2,000% in five years! By 2010 OxyContin had taken control of 30% of the United States painkiller market, accounting for \$3.1 billion in sales. The company that achieved these results is Purdue Pharma, the company which holds the patent on OxyContin and is owned and operated by the Sackler family. Indeed, it has made the Sacklers the sixteenth wealthiest family on a planet of 7.1 billion people.

The patriarch of the Sackler family, Arthur M. Sackler, was born in 1913. He graduated from the New York School of Medicine, simultaneously mastering psychiatric research and pharmaceutical marketing. By the 1940s, Sackler was using his background in psychiatric research to tinker with the minds of doctors, devoting his time and energy to finding new ways to get drugs into the hands of patients. He was one of the first to realize the marketing potential of medical journals, widely read by physicians, to influence prescribing patterns. Sackler also began experimenting with advertising on

television and radio. This idea of the manufacturer persuading doctors to prescribe its drug was revolutionary at the time. Meanwhile, Sackler's two brothers, Raymond and Mortimer, purchased the small, fledgling Purdue Pharmaceutical Company.

At the time, Purdue made most of its profits by selling laxatives. Then along came Valium. Thanks to Arthur's efforts, Valium became the first drug to hit \$100 million in profit. Finding new, off-label uses for the drug, Sackler was able to persuade doctors to prescribe Valium and Librium for purposes not approved in the original Food and Drug Administration (FDA) application. The profits were, indeed, very decent, but Purdue still wasn't an industry leader.

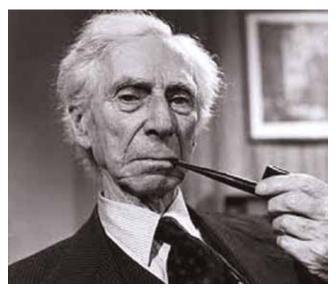
Arthur died in 1987, but he had taught his brothers well. They used their medical training to tweak oxycodone, a drug synthesized in Germany in 1917, to create a tablet with higher potency but designed for extended release. Using what they had learned from Arthur, the brothers set out to change the painkiller game. Eight years after Arthur's death, they submitted their application to the FDA for a new drug called OxyContin.

In the early 90s, however, there wasn't a lot of money to be made producing opioid painkillers since they were primarily used to treat cancer patients and those just out of surgery. Yes, opioids made a profit for the pharmaceutical industry, but in limited quantities due to a limited demand.

Manufacturing Demand for OxyContin

But brother Arthur's lesson was: "manufacture a demand." Establish not only a new system that gives doctors more freedom to prescribe narcotics for non-postoperative and non-malignant pain, but also an environment that actually demands it. Instead of fighting a losing battle against the existing medical framework, create an entirely new one—one that promotes opioid and opiate painkillers for everyday aches and pains—and work from within it.

First, one must understand the role of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO), the most powerful accreditation institution in the world. Headquartered in a Chicago suburb, the Joint Commission is a nonprofit organization charged with setting the standards of care for hospitals in this country and accrediting more than 20,000 facilities in all but four states. It is tasked with inspecting hospitals—ensuring adequate care is being given and standards are being met. It also issues directives for care.



Lord Bertrand Russell, third earl Russell (1872-1970), the British Empire's reptile behind the drug plague.

In 2001, while the pharmaceutical lobby, led by the Sacklers, spent just under \$100 million in lobbying efforts, the Joint Commission issued a new directive to its more than 20,000 hospitals across the country:

It is time to start treating pain.

And who did the Joint Commission bring in to teach hospital staffs how to treat pain? Purdue Pharma!

According to a U.S. General Accounting Office Response to Congressional Request in December 2003, the Joint Commission allowed Purdue Pharma to fund the "pain management educational courses" that taught the new standard of care for treating pain in JCAHO hospitals and facilities. And despite having been cited twice by the FDA for OxyContin advertisements in medical journals that violated the federal Food, Drug, and Cosmetic Act, Purdue was allowed to distribute materials to educate doctors on pain management.

With pain management now mandated by the Joint Commission, Purdue began funding groups such as the American Chronic Pain Association and the American Pain Society. These groups began demanding that doctors start taking pain management seriously, bringing their message everywhere from state legislatures to medical conferences.

Organizations funded by the pharmaceutical industry were created that rated doctors based on their willingness to treat pain and encouraged many family practitioners to begin prescribing outside of their normal scope of practice. The local family doctor suddenly felt pressure to prescribe powerful narcotics he or she might

not have fully understood, or else risk a scathing review from a group like the American Pain Society that could irreparably harm his or her practice.

Rigging the System

To ensure legal protection for prescribers, pharmaceutical companies began lobbying state legislators who, with no medical background, began passing laws protecting doctors from malpractice claims for overprescribing.

According to an investigation by John Fauber of *The Milwaukee Journal Sentinel*, published in 2012, the Federation of State Medical Boards (FSMB) accepted a \$100,000 donation from Purdue for "printing and distribution" of pamphlets explaining safe use and prescribing of opioid medications.

At the same time that it accepted \$100,000 from Purdue, the FSMB began calling for doctors to be punished for not adequately treating pain!

Purdue then proceeded to launch the most sophisticated and intricate pharmaceutical marketing campaign in history. Family practitioners were squeezed from every direction. The American Pain Society published rankings of doctors based on their willingness to prescribe narcotics, and the FSMB called for doctors to be punished for not adequately treating pain. Purdue had successfully turned the local doctor's office into a distribution hub for OxyContin.

Purdue claimed that OxyContin had less than a one percent chance of leading to addiction and didn't produce a high. OxyContin users, they assured doctors, were in no danger of building up a tolerance to the drug, a sure sign of physical addiction. All lies. And Purdue knew they were lies.

According to the GAO report to Congress, by 2003, primary care physicians—who had no business treating chronic pain—were writing more than half of all Oxy-Contin prescriptions. Pills were pouring into the streets. At the time, the Drug Enforcement Administration worried publicly that OxyContin was being prescribed overwhelmingly by doctors who were inadequately trained in pain management, but there was little the system could do. The system that should have stopped the problem had been compromised.

States across the nation, but particularly in the Kentucky-West Virginia-Appalachia region, were reporting wide-spread abuse of the drug. Addicts were crushing the tablets in order to snort, smoke, and inject it. Pharmacy robberies became common, with assailants by-

passing the cash register and going straight for the bottles of OxyContin. Studies show that it was around 2001 when heroin in the United States began its upward trajectory, as addicts who abused OxyContin—many of whom got hooked unintentionally—found heroin to be much cheaper for the same high. Heroin or Oxy. Coke or Pepsi. Different packaging, same taste. Both will quench your thirst.

In 1997 there were 670,000 prescriptions for Oxy-Contin written in the United States. By 2001 and 2002, that number increased to 14 million, bringing Purdue a profit of \$3 billion. OxyContin became the most widely prescribed narcotic painkiller in the United States. The Sackler family business and its sophisticated marketing plan, torn directly from the pages of the Arthur Sackler manual on how to influence physicians, was a success.

In 2007, the families of children who died from Oxy-Contin overdoses brought a federal suit against Purdue in the state of Virginia. At first, Purdue argued that they couldn't help it if people illegally abused OxyContin. But eventually, in the face of overwhelming evidence, they admitted that they had lied. They pleaded guilty to misleading patients, regulators, and doctors about Oxy-Contin's risk of addiction and its potential to be abused. Michael Friedman, Purdue's president, Paul Goldenheim, Purdue's medical director, and Howard Udell, Purdue's top lawyer, all pled guilty to criminal charges.

Over the objection of the parents of the dead children, Federal Judge James P. Jones, following the same pattern applied to "too big to fail" financial institutions that misled and robbed millions of Americans, accepted a plea bargain. Purdue was ordered to pay a fine of \$600 million for deliberately misleading doctors between 1996 and 2001. None of the convicted executives was sentenced to a single day of incarceration.

The Sackler family, riding on a decade-and-a-half of OxyContin profits, now oversees a company that brings in \$3.1 billion annually with a 30% market share. The family has a net worth of \$14 billion. It makes the Forbes "Richest Families in America" list and we celebrate them. We name hospitals and medical schools after them.

The Sacklers and the Drug Cartels

But the Sacklers unleashed an opiate epidemic on the U.S. population and they did it on purpose. A 2012 New England Journal of Medicine (NEJM) study shows just how much the businesses of the Sacklers and the drug cartels such as El Chapo's Sinaloa Cartel depend upon one another. In the NEJM study, 76% of those seeking help for heroin addiction had begun by abusing pharmaceutical narcotics, primarily OxyContin. OxyContin, the report demonstrated, provided a gateway to heroin that had never existed before—a gateway that more Americans are passing through than ever before.

Purdue set them up for the Sinaloa Cartel to move in, and the American public never stood a chance. Yet Americans celebrate the one and vilify the other. The Sacklers and the George Soroses are called philanthropists. Barack Obama is still President. Isn't it time we ask ourselves why? A drug kingpin is a drug kingpin, isn't he?

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Centro Federal de Readaptación Social, México A 2012 study in the New England Journal of Medicine demonstrated that OxyContin use leads to heroin use. Here, the drug kingpins: Arthur M. Sackler (left), who masterminded the marketing of OxyContin on which his family holds the patent. Joaquín "El Chapo" Guzmán (above), the Mexican drug lord who led the Sinaloa Cartel.

While the solution is not rounding up all Americans caught in the nightmare of drug addiction and despair, and throwing them in prison, neither is the answer to be found in management, treatment, and clean needles.

Any serious discussion about remedies has to begin with the fact that there has been a more than 100-year conscious cultural assault against the United States. The drug epidemic today represents the most advanced stage of that assault.

In 1995 both Mortimer and Raymond Sackler were named Knights of the British Empire by Queen Elizabeth II. Today, Arthur's daughter, Elizabeth Sackler, the current president of the Arthur Sackler Foundation, works directly with George Soros at the pro-drug legalization Drug Policy Alliance, and Mortimer's daughter, Ilene Sackler Lefcourt, is active with The Hastings Center for Bioethics, a leading organization pushing for the legalization of suicide and the "right to die."

When Obama was elected President of the United States, in 2008, with George Soros' money a prominent feature of that election, the message that radiated out to all the drug-producing countries of the world, amounted

to an open invitation to start flooding the United States with even larger amounts of illegal drugs, because the effort to stop it would be minimal and eventually inconsequential. It's not just that people—out of despair, out of desperation—have turned to illegal drugs; those drugs were consciously foisted on them and are now available in vast quantities and at greatly reduced prices in every county in the United States. The 47,000 people who died of drug overdoses in the United States in 2014 alone, is just a statistical marker for what is actually going on.

Demanding Obama's removal from office for his complicity in this latest phase of this war against the American people is an obvious step. Restoring Glass-Steagall would eradicate the ability of financial institutions to profit from these murders. Once those steps are taken, our nation can begin to restore the Hamiltonian principles on which it was founded, allowing our people, especially our young people, to live lives based on the productive development not only of our economy, but of the very things that make us human—our minds and our culture.

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