

## ***OxyContin & the Opioid Epidemic***

According to the Centers for Disease Control and Prevention, an average of 115 Americans died every day as a result of opioid overdoses between 1999 and 2016. In total, that is more than 350,000 people, from both prescription and illicit opioid use. In 2017, President Donald Trump declared the opioid epidemic to be a public health emergency. He directed the Department of Health and Human Services to take steps to address the crisis. One of the most pervasive of opioids in the U.S. is the painkiller OxyContin, a branded version of the drug oxycodone. OxyContin is a form of narcotic used to treat pain, including relief of pain from cancer, trauma, or major surgery. The drug, however, can be highly addictive, and people taking the drug can experience severe symptoms of withdrawal. Long-term use or misuse can lead to addiction, overdose, or death. Given the risks associated with OxyContin, many have questioned how the use of the drug could have become so widespread.

OxyContin is produced by the privately held pharmaceutical company Purdue Pharma. In 1995, the Food and Drug Administration (FDA) approved the use of the drug OxyContin. In 1996, in its first year on the market, OxyContin accounted for \$45 million in sales for Purdue. By 2000, OxyContin generated \$1.1 billion in sales. In 2010, profits from OxyContin rose to \$3.1 billion. Behind the financial success of Purdue is the Sackler family. The company is owned primarily by descendants of Mortimer and Raymond Sackler, who, along with their brother Arthur, purchased Purdue Pharma in 1952. They made their original fortune in medical advertising, but sales of OxyContin have since increased the family's wealth considerably. In 2015, *Forbes* estimated the Sackler family wealth at \$14 billion, shared among 20 family members.

With the debut of OxyContin in 1996, Purdue expanded its sales department. At the time, the company had more than 300 sales representatives. By 2000, that number had increased to more than 600. By 2010, the company had more than 1,000 sales representatives. Sales reps were incentivized with large bonuses, cash prizes, and luxury vacations. In 2001, annual bonuses for sales reps averaged more than \$70,000, with some reps earning nearly \$250,000 in bonuses. In a 1996 memo from a sales manager to her staff titled "It's Bonus Time in the Neighborhood!", the manager told sales reps to encourage stronger doses in conversations with doctors. The manager wrote, "He who sells 40mg," which was the largest dose at the time, "will win the battle." Internal memos referred to sales staff as "crusaders" and "knights" and executives as the "Royal Court of OxyContin."

Purdue and its sales team convinced doctors of the safety of OxyContin. For decades, many doctors had been reluctant to prescribe opioids because they were addictive and not meant to be used for chronic pain. But part of the selling



point for OxyContin was the claim that one dose lasted 12 hours, as opposed to eight hours or fewer, so it could be taken less frequently. Purdue also claimed to have reduced the dangerous side effects and addictive qualities of oxycodone. Purdue claimed OxyContin was safe.

Purdue sales reps aggressively reached out to doctors. The company hosted conferences for medical professionals under the guise that the presentations were educational. Purdue produced promotional videos that described how the fear of opioids has created obstacles for the compassionate care of patients. Doctors who were paid by Purdue appeared in the videos to promote this cause. In one video, a doctor stated, “There’s no question that our best, strongest pain medicines are the opioids.” The company’s annual spending on medical journal advertising increased from \$700,000 in 1996 to \$4.6 million in 2001. In 1997, doctors wrote more than 670,000 OxyContin prescriptions for non-cancer pain. In 2002, the number of prescriptions for OxyContin increased to more than 6.2 million.

In 2007, the company and three executives pleaded guilty to criminal charges that they misled regulators, doctors, and patients about the risks of OxyContin and its addictive qualities. Purdue paid more than \$600 million in fines and other payments. The three executives paid a total of \$34.5 million in fines. In a statement in response to the lawsuit, the company said, “Nearly six years and longer ago, some employees made, or told other employees to make, certain statements about OxyContin to some health care professionals that were inconsistent with the F.D.A.-approved prescribing information for OxyContin and the express warnings it contained about risks associated with the medicine.” The statement continued, “We accept responsibility for those past misstatements and regret that they were made.”

Purdue was also sued by several states in 2007. The company began funding programs to prevent pharmacy robberies and introduced a version of the pill that was more difficult to crush and snort. But the company did not address how addictive the product could be as sales of OxyContin continued to reach new heights.

Facing increased public scrutiny, along with additional lawsuits, Purdue has made compromises in its business tactics. In February 2018, the company announced that it would no longer market OxyContin to doctors and will lay off half of its sales team. In a statement, the company said, “We have restructured and significantly reduced our commercial operation and will no longer be promoting opioids to prescribers.” But many expressed doubts about Purdue’s motivations. Andrew Kolodny, co-director of the Opioid Policy Research Collaborative at Brandeis University, stated, “I don’t think that this is coming out of good intentions. I think that sales for OxyContin have already been declining,” adding, “There is generic competition.”

In March 2018, photographer Nan Goldin led a protest in the Sackler Wing at the Metropolitan Museum of Art in New York. This is one of many spaces at art museums around the world where the Sackler family has donated money. Goldin, whose work has documented drug addiction, said she was addicted to OxyContin from 2014 to 2017. At the protest, she shouted,

“We are artists, activists, addicts. We are fed up.” She led the crowd chanting, “Sacklers lie; people die.”

Others have shared their experiences with OxyContin. In a deposition, a man from Alabama stated, “I was more or less just a zombie.” A woman from Florida said, “I thought I had to be nuts... I am really falling apart from the anxiety.” The city of Everett, Washington is one of many cities suing Purdue. Mayor Ray Stephanson said, “Our community has been significantly damaged, and we need to be made whole.” The lawsuit accuses Purdue of “knowingly, recklessly, and/or negligently supplying OxyContin to obviously suspicious physicians and pharmacies and enabling the illegal diversion of OxyContin into the black market, including to drug rings, pill mills, and other dealers for dispersal of the highly addictive pills in Everett.”

While sales of OxyContin have been down since its height in 2010, the popularity of the drug has created new problems with how to deal with addiction across the country. In addition to the millions of legal prescriptions from doctors, OxyContin trickled down to black markets and led to an increase in the use of heroin and other opioid drugs.

As of May 2018, Purdue faces potential lawsuits filed by 14 states and hundreds of cities. These lawsuits allege the company misrepresented the risk of OxyContin and created an expensive public health crisis that taxpayers have had to handle. Purdue has contended in court filings that federal law prohibits states from holding the company liable because the FDA approved OxyContin as a painkiller with warnings about addiction risks. The company also contends that it is not liable if patients misuse its products.

**Concepts:** Ethics & the Self-Serving Bias

**Ethical Insight:**

The term ethics can refer to rules or guidelines that establish what conduct is right and wrong. The public expects companies to act ethically, but they do not always do so. Unfortunately, some companies get so caught up in making money that they forget ethics altogether.

Unethical action often occurs when company leaders give way to the self-serving bias. The self-serving bias encompasses situations where people, consciously or unconsciously, make decisions that serve their own interests in ways that other people might view as indefensible or unethical. Officers and employees of Purdue Pharma seem to have consciously profited the company and themselves by pushing OxyContin as a pain killer with no significant side effects. The company was very successful financially. But the company’s officers and employees misrepresented the addictive properties of OxyContin. Purdue incentivized its sales force to

convince doctors to maximize sales, unethically encouraged doctors to prescribe the drug, and ignored evidence it had regarding “pill mills.” Indeed, many believe that Purdue’s actions in selling OxyContin played a large role in the opioid crisis sweeping the United States today.

**Discussion Questions:**

1. Do you think Purdue Pharma acted ethically? Why or why not?
2. We often act unethically when we injure other people (or other subjects of moral worth, such as animals or the environment). Explain why some observers believe that Purdue Pharma acted unethically.
3. Pain is often a terrible thing. Producing and selling a drug that relieves pain on its face seems to be a good thing. Where do you think Purdue Pharma went wrong?
4. With the knowledge provided to them, do you think it was ethically justifiable for doctors to prescribe OxyContin to patients? Why or why not? Do you think doctors acted in the best interest of their patients? Explain.
5. In what ways is self-serving bias demonstrated in this case study? Explain.
6. Explain the difference between the conscious and the unconscious impact of the self-serving bias in this case study.
7. How did Purdue encourage a culture of self-serving bias among its sales team?
8. Under the incentives to sell OxyContin, do you think sales representatives were ethically justified in doing their job? Why or why not? What external pressures may have influenced their tactics?
9. If you were hired as a sales representative for a pharmaceutical company, how would you negotiate the company’s pressure to sell products with the ethical responsibility to not cause undue harm? Explain.
10. Can the fact that a particular activity is making you wealthy render it difficult for you to objectively gauge the ethicality of that activity? Explain.
11. How should one guard against the self-serving bias? What steps can be taken?
12. If you were an executive of a major pharmaceutical company, how would you balance the financial success of the company with the obligation to safely serve doctors, hospitals, and patients? Explain.
13. Do you think Purdue is responsible for the opioid epidemic? Why or why not? What other factors may be responsible for the rapid increase in opioid addiction?
14. Do you think Purdue has a moral obligation to aid cities and states as they attempt to curb opioid use and addiction? Why or why not?
15. How should the opioid crisis be addressed without causing further harm to those facing addiction? What role do you think pharmaceutical companies such as Purdue should have, if any, in the recovery process? Explain your reasoning.
16. Part of the Sackler family’s wealth has been generated by the successful sale of OxyContin. Do you think the Sackler family, personally, has a moral obligation to donate money to causes fighting opioid addiction? Why or why not? Should art

museums that have accepted donations from the Sackler family reconsider their contributions? Why or why not?

17. This case study demonstrates the effects of a number of behavioral biases and pressures. Can you identify other behavioral ethics concepts at work in the case study? Explain and discuss their significance.

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