

July 5, 2013

Ms. Michele M. Leonhart Administrator, Drug Enforcement Administration U.S. Department of Justice 700 Army Navy Drive Arlington, VA 22202

Dear Ms. Leonhart:

On behalf of 110,600 family physicians and medical students represented by the American Academy of Family Physicians (AAFP), I am writing in support of amending the cap in primary care on the treatment of addiction care with Suboxone® (buprenorphine hydrochloride and naloxone hydrochloride) to raise the limit to 200 patients from the current cap of 100 patients after five years of treating addiction. This request stems from a recent resolution adopted by the AAFP Congress of Delegates.

Suboxone® is approved for the maintenance phase of treatment of opiate dependence. It is less tightly controlled than methadone because it has a lower potential for abuse and is less dangerous in an overdose. Physicians permitted to prescribe Suboxone® to treat opioid addiction were once limited to 30 patients at any time. The limit was raised in 2006 to 100 patients per qualified physician. However, the limit on an individual physician continues to be an impediment to expanding opioid addiction treatment while the 100-patient limit persists. This limit prevents a physician willing to offer this effective treatment to more patients who suffer from opioid addiction.

The AAFP opposes this current limit and any action that limits patients' access to physicianprescribed pharmaceuticals. There are too few physicians licensed to prescribe Suboxone® in spite of the serious problem of opioid addiction. Qualified physicians who are willing to prescribe Suboxone® should be allowed to treat as many as 200 patients.

We appreciate your consideration and invite you to contact Teresa Baker, Senior Government Relations Representative, at 202-232-9033 or tbaker@aafp.org with any comments or questions.

Sincerely,

Glen R. Stream, MD, MBI, FAAFP

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