

# Characteristics of Lawsuits against Physicians Charged with Opioid-Related Crimes in the United States, 1995-2019

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## Short Report

**Keywords:** Drug overdose, Drug trafficking, Opioid Epidemic, Medical fraud, Prescription opioids

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# Abstract

**Background:** Pharmaceutical companies and drug distributors are intensely scrutinized in numerous lawsuits for their role in instigating the opioid epidemic. Many individual physicians have also been held accountable for activities related to prescribing opioid medications. The purpose of this study was to examine the epidemiologic patterns of lawsuits against physicians charged with opioid-related crimes in the United States.

**Methods :** We searched the Nexis Uni ® database for newspaper reports on physicians who had been arrested, indicted or criminally charged for illegally prescribing opioids between January 1995 and December 2019. Data collected from the newspaper reports include defendant's age, sex, clinical specialty, type of crime and legal consequences.

**Results :** The annual number of lawsuits against physicians charged with opioid-related crimes reported by US newspapers increased from 0 in 1995 to 43 in 2019. Of the 384 physician defendants in these lawsuits, 90.4% were male, 28.0% were 65 years and older (mean=59.5 ± 15.8 years), and 23.4% were charged in Florida. Of the 373 physician defendants with known clinical specialty, 243 (65.1%) practiced in internal medicine, family medicine, or pain management. Of the 248 lawsuits with known outcomes, 244 (98.4%) of the defendants were convicted of criminal charges and 4 were acquitted. Drug trafficking was the most commonly convicted crime (accounting for 54.2% of all convicted crimes), followed by fraud (19.1%), money laundering (11.0%) and manslaughter (5.6%). Of the convicted physicians with known sentences, 89.5% were sentenced to jail with an average jail time of 127.3 ± 120.3 months.

**Conclusions :** An increasing number of physicians from a wide variety of clinical specialties is prosecuted for opioid-related crimes with high conviction rates and severe penalties. The most common crime charged is drug trafficking, followed by fraud, money laundering, and manslaughter. **Keywords:** Drug overdose, Drug trafficking, Opioid Epidemic, Medical fraud, Prescription opioids

## Background

Misuse and overdose of opioids is a public health crisis in the United States and many other countries. The opioid epidemic was triggered in the 1990s by physician overprescribing of opioid analgesics (Brady et al, 2014; Chihuri and Li, 2019; Hedegaard et al, 2020; Li and Chihuri, 2020). While a significant segment of those prescriptions is well-intentioned, clinical treatment for a variety of pain syndromes, there are some licensed medical professionals who prescribe and dispense opioid prescriptions with no legitimate medical purpose. These physicians flood their communities with illegal drugs and thereby add to the supply of addictive opiates available for misuse. Such physicians have played an important part in perpetuating the opioid epidemic in the United States (Kennedy-Hendricks et al, 2016). From 1999 to 2018, nearly 450,000 people in the United States died from overdoses involving prescription opioids (CDC, 2020).

Limiting illegal opioid prescriptions could help reduce the overall quantity of opiates being distributed to the communities and thereby reduce the availability and consumption of these addictive drugs. In recent years, pharmaceutical companies and drug distributors have been intensely scrutinized in numerous lawsuits for their role in instigating the opioid epidemic. Many individual physicians have also been held accountable for activities related to prescribing opioid medications. The purpose of this study was to examine the epidemiologic patterns of lawsuits against physicians charged with opioid-related crimes in the United States.

## Methods

Nexis Uni® is an electronic database that houses an archive of public record documents, such as full-text newspapers, business and legal publications, and journals. An initial search was conducted on the database with search terms "overprescribing opioids", "overprescribe opioids", "overprescribed opioids", and "pill mill." The search was refined with terms ("doctor" or "dr." or "MD") AND ("sentenced" or "charged" or "convicted" or "sentence" or "charge") AND ("years" or "fined" or "months" or "prison") AND ("pill mill") AND ("opioid" or "narcotic" or "drugs") and limited to publications released after January 1st, 1995. The database was queried with these terms so as to identify newspaper articles that reported incidents of physicians overprescribing opioids since 1995. The search yielded over 2,000 results of full-text newspapers and court reports, which were manually examined to extract a list of physicians, who, according to the newspaper reports, had been arrested, criminally charged, indicted, or named in a lawsuit for illegally prescribing opioids. Duplicate physicians were manually excluded by reviewing names.

Next, individual searches for each physician were executed on Nexis Uni®; the database was queried using only the physician name, in order to produce narrower, more focused results. From these searches, the following information was ascertained: name, state in which the incident occurred, type of medical facility in which the physician worked (hospital, private practice, etc.), medical specialty, age at the time of incident, sex, type of criminal charge, and outcome of the legal proceeding. Multiple newspaper reports were examined for each physician. Further, these articles uncovered other physicians who fit the search criteria but had not come up in the initial search; these physicians were added to the list. Searches on Google News were carried out for physicians with incomplete information. Data collected from newspaper reports for each physician involved in these incidents were analyzed using descriptive statistics such as frequencies, percentages, means, and standard deviations.

## Results

During January 1995 through December 2019, the Nexis Uni® database recorded a total of 384 physicians who had been in lawsuits related to illegal opioid prescriptions in the United States. There were no such lawsuits reported before 1998, and of the 384 lawsuits, 331 (86.1%) occurred between January, 2010 and December, 2019 (Fig. 1), and nearly a quarter (23.4%) occurred in Florida, followed by Pennsylvania (11.7%), Georgia (6.5%), Ohio (5.7%), West Virginia (5.5%), New York (5.2%) and Tennessee (5.0%).

The vast majority (90.3%) of physicians involved in the lawsuits were male. Ages of the physicians ranged from 33 to 87 (mean = 59.5 ± 15.8 years). Information on clinical specialty was available for 373 physicians. These physicians practiced in a variety of clinical specialties, with approximately a quarter (25.2%) in family medicine, 24.4% in internal medicine, and 17.4% in pain management (Fig. 2).

Nearly all the physicians involved in these lawsuits ran private practices (98.0%) and were not affiliated with hospitals. Of the 384 physicians involved, 372 (96.9%) were criminally charged, including 4 who died in custody. Information about conviction was available for 248 physicians; of them, 244 (98.4%) were convicted and 4 (1.6%) were cleared of all charges. Drug trafficking accounted for 54.2% of the crimes convicted, followed by fraud (19.1%), money laundering (11.0%), manslaughter (5.6%), and other or unknown (10.1%). For the 244 convicted physicians, sentences ranged from monetary fines to life in jail, with jail terms averaging 127.3 (± 120.3) months and probation terms averaging 65.5 (± 61.0) months.

## Discussion

Results of this study indicate that lawsuits against physicians for opioid-related crimes in the United States have increased substantially since 1995, with the overwhelming majority of the lawsuits occurring between 2010 and 2019. This temporal pattern is generally consistent with the time trend of the opioid epidemic in the United States (Skolnick, 2018). The geographic pattern of the lawsuits against physicians, however, is more reflective of enforcement intensity on the state level. For instance, Florida passed laws in 2010 and 2011 that considerably reduced physicians' ability to distribute opioids at the site of care and subsequently Florida law enforcement implemented initiatives to arrest and prosecute physicians who did not abide by these laws, resulting in an immediate hike in lawsuits (Kennedy-Hendricks et al, 2015; Hedegaard et al, 2020).

Our study also found that the vast majority of physicians involved in these lawsuits were male and worked in private practice. While men are known to be more prone than women to commit crimes, private practice presents a work environment that is less strictly regulated and supervised than hospitals. It is also noteworthy that the lawsuits involved disproportionately older physicians, probably because they were less trained in pain management and less aware of the misuse, addiction and overdose risks of opioid analgesics than younger physicians. The broad variety of clinical specialties involved in these lawsuits indicates the widespread illegal opioid prescribing behaviors in the medical community. It seems that no clinical specialty is immune to opioid prescribing related crimes. The severe legal consequences of these lawsuits, including the exceptionally high conviction rate and lengthy jail and probation terms for those convicted, should serve as a deterrence to all practitioners and underscore the importance of continuing education and vigilance about adherence to clinical guidelines for prescribing opioids.

This study is limited by the availability of information in the newspaper reports. Although newspapers have long been used for sentinel surveillance on infrequent, newsworthy events, such as drowning involving children with autism (Guan and Li, 2017) and alcohol-impaired airline pilots (Kraus and Li, 2006), they tend to capture the more severe incidents (Rainey and Runyan, 1992). Therefore, our findings

are likely biased toward lawsuits involving serious crimes. Furthermore, epidemiologic patterns of the lawsuits against physicians charged with opioid-related crimes reported in this study are more reflective of law enforcement patterns than patterns of the opioid epidemic.

## **Conclusions**

Our study sheds light on the issue of legal liability and accountability of physicians amid the opioid epidemic. The results indicate that an increasing number of physicians from a wide variety of clinical specialties has been prosecuted for opioid-related crimes with exceptionally high conviction rates and severe penalties. Crime charged in these lawsuits include drug trafficking, followed by fraud, money laundering, and manslaughter. Our findings should serve as a warning to all practitioners and underscore the importance of continuing education and vigilance about adherence to clinical guidelines for prescribing opioids.

## **Declarations**

### **Role of funder/sponsor**

The Centers for Disease Control and Prevention had no role in the preparation, review and approval of the manuscript, and the decision to submit the manuscript. Its contents are solely the responsibility of the authors and do not represent the official view of the Centers for Disease

Control and Prevention.

### **Authors' contributions**

Both authors contributed sufficiently to this manuscript; JB performed literature search and review, abstracted data, performed statistical analyses, and drafted the manuscript. GL conceptualized the study, secured the funding, supervised the data collection and analysis, and critically revised the manuscript. Both authors read and approved the final manuscript.

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### **Availability of data and materials**

Data analyzed in the current study were abstracted from newspaper articles and are available from the corresponding author upon request.

## **Ethics approval and consent to participate**

Not applicable.

## **Consent for publication**

Not applicable.

## **Competing interests**

GL is Editor-in-Chief of Injury Epidemiology. He was not involved in the peer-review or handling of the manuscript. The authors have no other competing interests to disclose.

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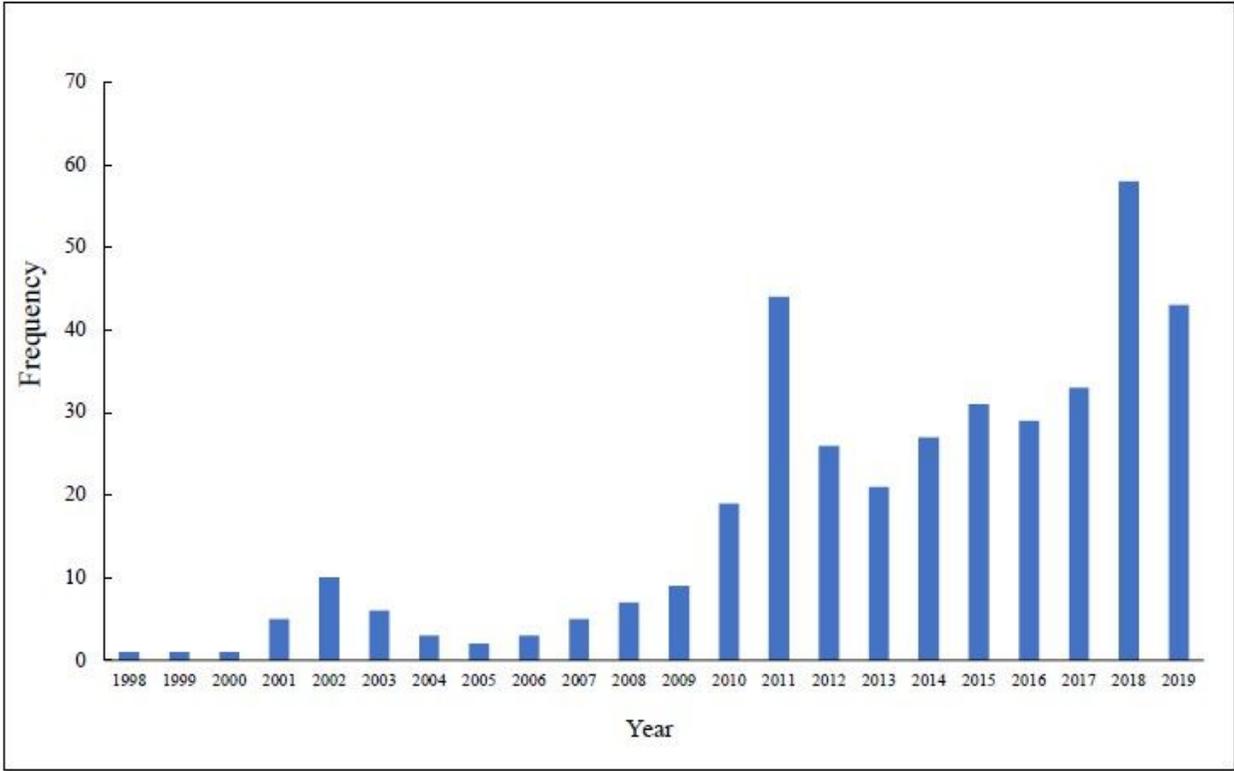
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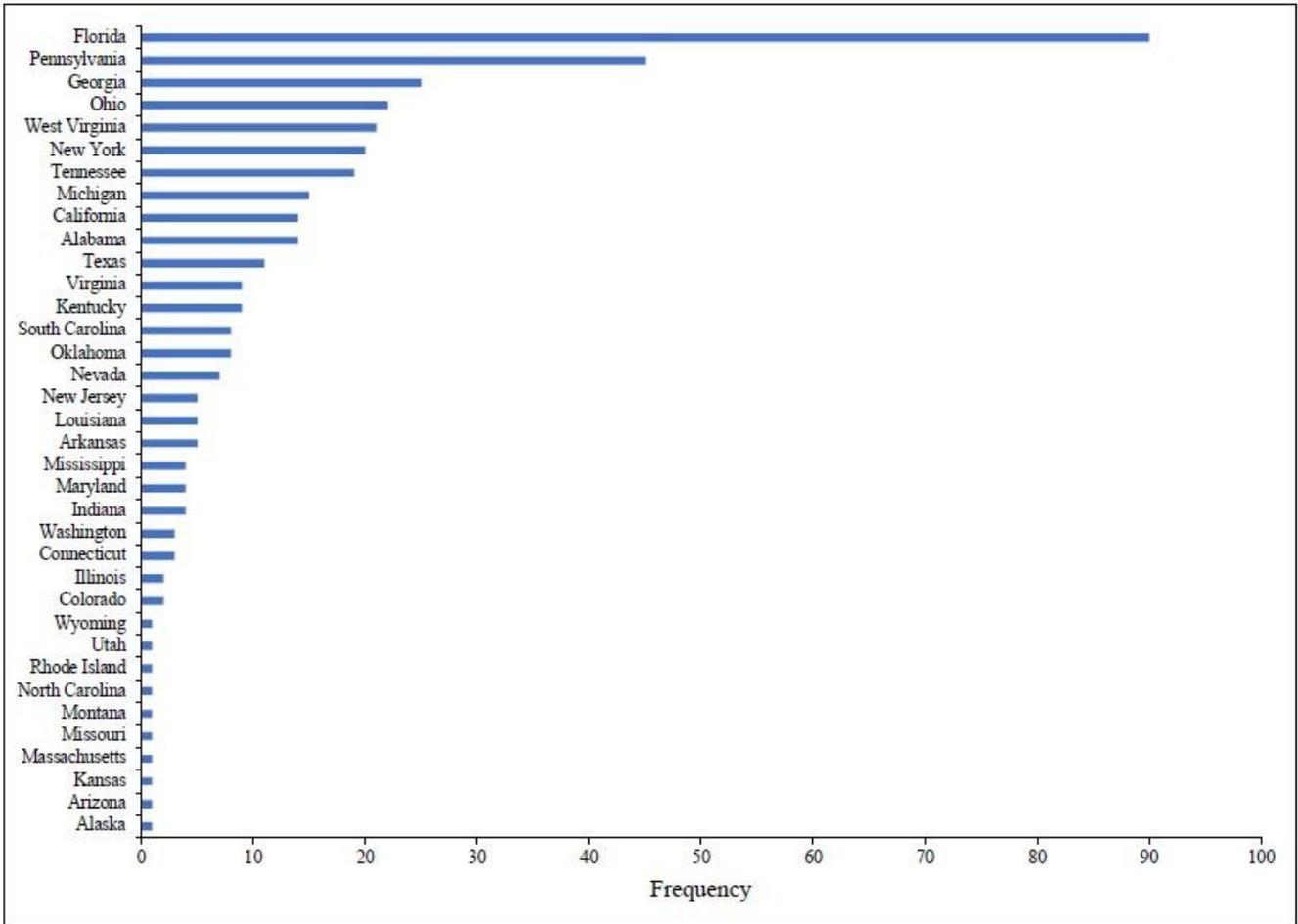
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## Figures



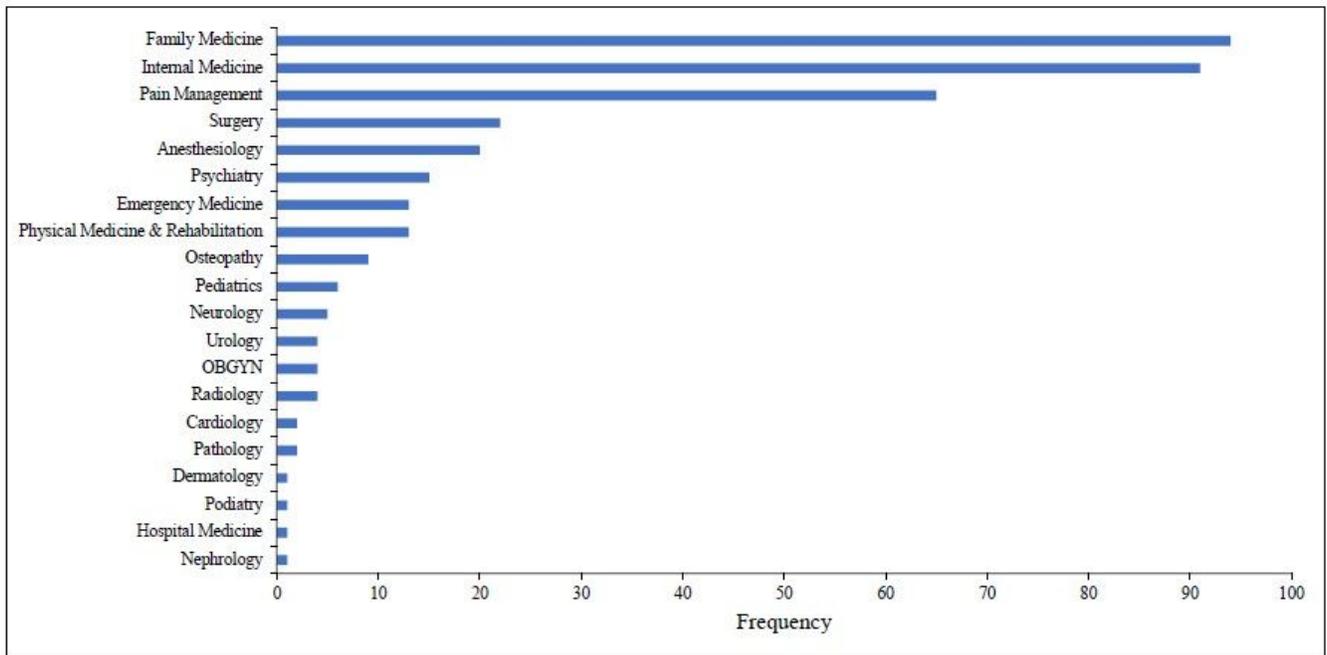
**Figure 1**

Annual Frequency of Lawsuits against Physicians for Opioid-Related Crimes Reported in Newspapers, United States, 1995- 2019.



**Figure 2**

Frequency of Lawsuits against Physicians for Opioid-Related Crimes Reported in Newspapers by State, United States, 1995- 2019.



**Figure 3**

Frequency of Lawsuits against Physicians for Opioid-Related Crimes Reported in Newspapers by Clinical Specialty, United States, 1995-2020.