EXHIBIT

A
To: Timothy J. Shea [timothy.shea@morganlewis.com]
From: Must, Alan
Sent: Tue 7/18/2017 11:54:44 AM
Subject: Fwd: Herald Group Proposal

Any thoughts? I want to discuss with Maria

Sent from my iPhone

Begin forwarded message:

From: "Wood, Keith" <Keith.Wood@pharma.com>
Date: July 14, 2017 at 2:30:58 PM MDT
To: "Must, Alan" <Alan.Must@pharma.com>
Subject: FW: Herald Group Proposal

See attached.

Keith Wood
Regional Director, State Government Affairs
Purdue Pharma
2 Indigo Pl.
Enterprise, AL 36330
850-491-4438 Mobile
Keith.Wood@pharma.com

From: Matt Well [mailto:mmwell@theheraldgroup.com]
Sent: Tuesday, June 20, 2017 3:32 PM
To: Martin, Josephine <josephine.martin@pharma.com>; Wood, Keith
   <Keith.Wood@pharma.com>
Cc: Doug McGinn <dmcginn@theheraldgroup.com>
Subject: Herald Group Proposal

Josie and Keith:

Please find attached our proposal for your review. Please confirm that you have received and we welcome your feedback once you have a chance to digest.

Best,

Matt
EXHIBIT

B
The Herald Group (THG) is pleased to present an overview of a strategic public education program around the use of outside counsel in opioid cases by state attorneys general. Our recommendations, based on recent conversations and our extensive experience in the legal reform space, are designed to condition the environment for a more balanced legal climate. We welcome the opportunity to discuss this memo with you and refine our plan to create the biggest impact and meets your stated objectives.

ABOUT THG
THG is uniquely suited to manage this project. Founding partner Matt Well has worked on legal reform issues for 15 of his 22 years in public affairs and strategic communications. Matt has managed dozens of national and multi-state legal reform efforts and high stakes litigation communications projects. He has a sophisticated understanding of the landscape surrounding these issues, including messaging insight gained through participation in numerous opinion research and advertising projects on legal reform. Additionally, Matt has considerable insight into how the trial bar operates and can leverage his relationships with allied organizations at both the national and state levels.

CAMPAIGN GOALS AND OBJECTIVES
Our goal is to make state attorneys general think twice about joining the litigation and establish a credible watch-dog organization to monitor the use of contingency fee counsel should other state attorneys general join the suit. While specific strategies and tactics would be tailored to each individual state attorney general, our initial program recommendations include the following objectives:

- Leverage existing legal reform platforms—especially groups focused on outside use of contingency fee counsel—to promote our message and apply pressure.
- Shine a spotlight on the plaintiff’s attorneys involved in the cases to call into question their credibility and personal profit motive.

STRATEGY
To accomplish these goals and objectives, we recommend a three-track strategy:

- **Track One:** Identify and conduct research on the primary plaintiff’s attorneys involved in the suits, including Mike Moore, and demonstrate their methods and personal monetary motivations.

- **Track Two:** Position legal reform third parties as a watch-dog to keep an eye on the contracts with contingency fee attorneys.

- **Track Three:** Identify and engage legal experts and pitch them to media to demonstrate how this lawsuit is different from the tobacco lawsuits.

We recommend that these tracks be highly coordinated, but appear publicly distinct.
TACTICAL CAMPAIGN
Communications tactics would be driven by strategic objectives and budgetary considerations, but initial recommendations for an integrated communications campaign include:

Third Party Engagement and Management
THG would identify, recruit, and engage relevant third parties at both the state and national level to promote our messages. We recommend that the American Tort Reform Association (ATRA) serve as the quarterback for these efforts. ATRA has a successful track record of seeking reforms for the outside use of contingency fee counsel and has affiliations with state based legal reform groups.

For the last 7 years, THG has managed ATRA’s program to advocate for reforms in the use of contingency fee counsel by the state. This program includes national and state specific public relations components, direct engagement with state attorneys general, and legislative lobbying to pass Transparency in Private Attorney Contracting (TIPAC) bills which sets reasonable fee caps and provide for transparency and accountability.

THG would supplement ATRA’s role by recruiting allied state-based watchdog groups, center-right think tanks, and policy experts, as well as national associations and advocacy groups potentially affected by related issues.

Opposition Research
Opposition research provides valuable information on organizations that we can then use as fodder for our communications efforts. We recommend focusing detailed research and analysis on the plaintiff’s firms to start. This should include, but not be limited to, political allies, contributions, and other lawsuits with which the firms are involved.

Highlighting the motives and tactics of the plaintiff’s bar would help to expose and de-legitimize their efforts. In addition, social media data mining can uncover unsavory connections and relationships to use to further undermine our targets.

We would begin with a deep dive on Mike Moore and his current and past associates, including his close relationship with famed tobacco plaintiff’s attorney, Dickie Scruggs. Scruggs served six years in federal prison for bribing judges, and some reports indicate that Moore was almost indicted as well. Opposition research would help us develop the “Mike Moore Playbook” which would be used to give pause to attorneys general that he may be pitching to join the lawsuit. The playbook would include multiple communications deliverables for traditional and social media.

- **Research Reports** – THG would compile the actionable intelligence gathered during the research process into deliverable reports on each target.

Online Advertising and Social Media
Mike Moore and his ilk are rich, greedy trial lawyers who make hundreds of millions of dollars suing companies. We intend to educate the public about their motivations and tactics and call into question the narrative they have created for themselves. We would use online advertising and social media to target our message to key audiences and amplify the communications campaign through multiple channels, including Facebook, Twitter, and the microsite detailed below. In addition, we would run online advertising in key states and in important media markets under the banner of ATRA or another allied local legal reform group.

To maximize the effect of our campaign, we would target our digital advertising to relevant stakeholders, including state attorneys general offices, journalists, influencers, and elected officials. In addition—depending on the value of information we receive from opposition research—we would create a series of short videos exposing the unsavory connections of the plaintiff’s attorneys to share across these platforms. We would recruit sympathetic bloggers, ATRA’s large number of grassroots supporters, and use online advertising to ensure wide exposure with the goal of creating an echo chamber of negative attention.
- **Learjetlawyers.com** – We recommend building a standalone microsite to expose Mike Moore and other plaintiff’s attorneys, to reveal their selfish tactics and to promote content developed from research. We would drive traffic to the microsite and promote content from the site on digital and social platforms. The name *Learjet Lawyers* associates the plaintiff’s attorneys with wealth and aligns them with Wall Street, not Main Street. This imagery further damages their credibility and bolsters the narrative that they are not fighting for the common person.

- **Localized Communications Platforms** – We would publish additional content through allied local organizations and their social and digital properties. ATRA—a network of state-based liability reform coalitions—alone has more than 23,000 Facebook followers and boasts 135,000 grassroots supporters.

**Media and Blogger Relations**

THG would develop and implement a specific media and blogger plan for each key deliverable to maximize the impact of the communications. Outreach would be done under the umbrella of a third party legal organization or other designated third party groups, and we would seek to gain coverage at both the state and national levels. Our recommendations include:

- **Outreach to Key Journalists and Bloggers** – After identifying key reporters and important outlets, we would identify the right spokespeople and subject-matter experts to advocate our message. We would then brief each spokesperson on the relevant issues and talking points.

- **Placement of Op-Eds and Letters to the Editor** – We would work with third-party influencer groups to write, pitch, and place favorable op-eds and letters to the editor in key media markets to raise awareness of the issue.

**ESTIMATED BUDGET**

While program budgets are highly dependent on specific strategies and tactics employed we have outlined below an estimated budget based on a nine-month campaign including the elements described above for further discussion.

**Program Management**

- Strategic Planning, Messaging and Overall Campaign Management
- Strategic Communications and Media Relations
- Third Party Recruitment and Management
- Content and Collateral Materials Development
- Digital and Social Media Management
- Media Blogger Outreach and Management

$135,000 (9-month campaign)

**Tactical Budget**

- Opposition Research Product
  - $15,000
- Website Development
  - $10,000
- Targeted Online Advertising and Digital Tactics
  - $45,000
- Third Party Honorarium
  - National
  - $35,000
  - State
  - $30,000 ($10,00 per state x 3)

**Total Tactical Budget**

$270,000
EXHIBIT

C
To: Must, Alan[Alan.Must@pharma.com]
From: Matt Weil
Sent: Tue 8/1/2017 10:26:58 AM
Subject: Re: WSJ Editorial: Government Opioid Abuse

How do you think it turned out? Team ATRA worked with this writer over the last couple of weeks on this using research we produced.

> On Aug 1, 2017, at 5:58 AM, "Must, Alan" <Alan.Must@pharma.com> wrote:
> 
> > Government Opioid Abuse
> > State AGs target painkiller makers to pad their budgets.
> > The Editorial Board
> > 
> > August 1, 2017
> > 
> > https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.wsj.com%2Farticles%2Fgovernment-opioid-abuse-1501542119&data=01%7C7C01%7CAlan.Must%40pharma.com%7C145b232e117d41c2e4a908dd48f1c167%7C4674d5b6bf034d67af0b4bfc096f6a0f%7C0&data=ckb6zxy42d9ajm010ylxok/sehreV0nm9gkGQf7yWV%3D&reserved=0<https://na01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.wsj.com%2Farticles%2Fgovernment-opioid-abuse-1501542119&data=01%7C7C01%7CAlan.Must%40pharma.com%7C145b232e117d41c2e4a908dd48f1c167%7C4674d5b6bf034d67af0b4bfc096f6a0f%7C0&data=8wCgV1azQbpwo3BNaeE98R6Z5sUqsDwRsJlsMB0wib83M%3D&reserved=0>
> 
> > Print scan attached.
> >
> > Opioid abuse ranks among the nation’s largest public health challenges with drug overdoses now the leading cause of death among Americans under the age of 50. While the causes are complex and multiple, politicians and their trial lawyer friends aren’t letting the crisis go to waste.
> 
> > More than 20 state and local governments including Ohio, Missouri, Mississippi and nine counties in New York have sued prescription opioid manufacturers for fraud and deceptive marketing, among other supposed offenses. Ohio GOP Attorney General Mike DeWine’s lawsuit against Purdue, Janssen, Teva, Endo and Allergan has set a template for other states that are coordinating litigation.
> 
> > Governments are farming out the legal work to trial attorneys who front the bills in return for a share typically 20% of the reward. States used this contingency-fee model to squeeze $206 billion from tobacco companies in the 1990s, and the ringleader of that effort, former Mississippi Attorney General Mike Moore, is assisting with the opioid raids.
> 
> > The lawsuits rely on the same sources and suffer from the same flaws. Namely, they don’t specify
instances in which doctors relied on alleged misrepresentations to improperly prescribe an opioid medication that led to a particular injury. A federal judge last year dismissed most of Chicago's claims because the city "failed to identify the prescribers who were exposed to defendants' [alleged] misrepresentations as the same prescribers who prescribed defendants' drugs and thereby caused the City to incur costs."

> Plaintiffs contend that pharmaceutical companies fraudulently market opioids for chronic pain and that long-term use encourages dependency. Yet the Food and Drug Administration approves the labeling and warnings for prescription opioids. Lawyers and politicians are trying to substitute their medical judgment for that of regulators and physicians.

> In 2015 a California state judge stayed Orange County's lawsuit after finding it "could lead to inconsistencies with the FDA's findings, inconsistencies among the States, a lack of uniformity, and a potential chilling effect on the prescription of these drugs for those who need them most." Meanwhile, state plaintiffs continue to reimburse opioid prescriptions, which makes them co-conspirators with Big Pharma.

> Ohio claims that prescription opioids are a gateway to street drugs and that their deceptive marketing has "resulted in the explosion in heroin use." Yet 2.3 million patients in Ohio were prescribed painkillers last year more than 10 times the number of opioid addicts. The vast majority of patients who take prescription painkillers don't get hooked on heroin. A New England Journal of Medicine study last year found that fewer than 4% of people who had used prescribed painkillers for nonmedical reasons used heroin sometime in the following five years.

> Painkillers can encourage dependency, and physicians need to carefully monitor patients. But the bigger problem, as the Ohio lawsuit evinces, is fraud in the delivery system. "Despite strict federal regulation of prescription drugs, local law enforcement agencies are faced with increasing diversion from legitimate sources for illicit purposes, doctor shopping, forged prescriptions, falsified pharmacy records, and employees who steal from their place of employment," the lawsuit notes.

> In 2015, 1,663,614 opioid pills—21.3 per capita were dispensed in Ross County, Ohio. A fraction of physicians account for a disproportionate share of opioid prescriptions, and addicts forum shop like trial attorneys. Prescription opioids often get diverted to the black market, and drug dealers on the street often lace painkillers with illicitly manufactured opioids to create more potent, and lethal, drugs.

> Nearly all states operate databases that track physicians, patients and prescriptions, but the rub is using the metadata to track criminal activity and curb abuse. Some states such as Kentucky and Tennessee that have required doctors to consult databases prior to prescribing opioids have seen a decline in doctor shopping.

> Plaintiffs are requesting billions in damages to cover the social and economic costs of opioid addiction, and Senators demanded upward of $45 billion for treatment in return for their votes to repeal Obamacare. Yet the ObamaCare Medicaid expansion may have inadvertently fueled the opioid epidemic by making painkillers more accessible. A recent study estimated that a quarter of Medicaid
beneficiaries were prescribed opioids in 2015.

> Politicians no doubt are hoping to raise money from the trial bar off the opioid lawsuits. Mr. DeWine plans to run for Governor next year, and the Democratic nominee will likely be his predecessor Richard Cordray, who has spent the last five years as a frontman for plaintiff attorneys while leading the Consumer Financial Protection Bureau.

> State and local governments are also scrounging around to backfill their budgets, which have been strained by labor and pension costs. It may be easier to hit up Big Pharma than taxpayers, but mugging businesses won't cure politicians of their spending addictions.

> <WSJ Editorial_6-1-17.pdf>
EXHIBIT D
Sent from my iPhone

Begin forwarded message:

From: "Martin, Josephine" <Josephine.Martin@pharma.com>
Date: August 1, 2017 at 1:34:37 PM EDT
To: "Must, Alan" <Alan.Must@pharma.com>
Subject: Re: WSJ Editorial on Opioid Abuse

The fact is, we worked this really hard. I had the senior comms people at the chamber of commerce and NFIB call the editorial writer. And I suggested she reach out to both ATRA and the BRT. I have her contact information for all of them. And she spoke to everyone and I thought I that helped shape the perspective you see here. Although the WSJ ed board ( or the reporting staff) was predisposed to be annoyed at all of the republicans for working with the trial lawyers.

I think ATRA helped, they are good with messaging and they work it. It also underscored our need to have a strategy that we stick with and aggressively work.

As you know, success has many parents and failure is an orphan. I'm happy to spread the credit around because it really took a big effort and a lot of voices to achieve this.

Sent from my iPhone

On Aug 1, 2017, at 1:10 PM, Must, Alan <Alan.Must@pharma.com> wrote:

Accurate?

Sent from my iPhone

Begin forwarded message:

From: "Wood, Keith" <Keith.Wood@pharma.com>
Date: August 1, 2017 at 11:32:43 AM EDT
To: "Must, Alan" <Alan.Must@pharma.com>
Subject: Fwd: WSJ Editorial on Opioid Abuse
FYI

Sent from my iPhone

Begin forwarded message:

From: Matt Well
<mwell@theheraldgroup.com>
Date: August 1, 2017 at 8:31:23 AM PDT
To: "keith. wood" <keith.wood@pharma.com>
Subject: WSJ Editorial on Opiod Abuse

ICYMI. My team at ATRA worked with this writer over the last couple of weeks using the research we produced on use of outside counsel.

Government Opioid Abuse
State AGs target painkiller makers to pad their budgets.
The Editorial Board

August 1, 2017

https://www.wsj.com/articles/government-opioid-abuse-1501542119<https://na01_safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.wsj.com%2Farticles%2Fgovernment-opioid-abuse-1501542119&data=01%7C01%7CAlan.Musf%40pharma.com%7Caef0d6e12a994dc3a09608d4d8e5f11%7C4674d5b9bf034d67af0bf4bce9f6fa0f%7C0&data=8wCgV1azQbpw03BNcE98R6ZsUqsDwRajaMB6wib83M%3D&reserved=0>

Print scan attached.

Opioid abuse ranks among the nation's I biggest public health challenges with drug overdoses now the
leading cause of death among Americans under the age of 50. While the causes are complex and multiple, politicians and their trial lawyer friends aren't letting the crisis go to waste.

More than 20 state and local governments including Ohio, Missouri, Mississippi and nine counties in New York have sued prescription opioid manufacturers for fraud and deceptive marketing, among other supposed offenses. Ohio GOP Attorney General Mike DeWine's lawsuit against Purdue, Janssen, Teva, Endo and Allergan has set a template for other states that are coordinating litigation.

Governments are farming out the legal work to trial attorneys who front the bills in return for a share typically 20% of the reward. States used this contingency-fee model to squeeze $206 billion from tobacco companies in the 1990s, and the ringleader of that effort, former Mississippi Attorney General Mike Moore, is assisting with the opioid raids.

The lawsuits rely on the same sources and suffer from the same flaws. Namely, they don't specify instances in which doctors relied on alleged misrepresentations to improperly prescribe an opioid medication that led to a particular injury. A federal judge last year dismissed most of Chicago's claims because the city "failed to identify the prescribers who were exposed to defendants' [alleged] misrepresentations as the same prescribers who prescribed defendants' drugs and thereby caused the City to incur costs."

Plaintiffs contend that pharmaceutical companies fraudulently market
opioids for chronic pain and that long-term use encourages dependency. Yet the Food and Drug Administration approves the labeling and warnings for prescription opioids. Lawyers and politicians are trying to substitute their medical judgment for that of regulators and physicians.

In 2015 a California state judge stayed Orange County's lawsuit after finding it "could lead to inconsistencies with the FDA's findings, inconsistencies among the States, a lack of uniformity, and a potential chilling effect on the prescription of these drugs for those who need them most." Meanwhile, state plaintiffs continue to reimburse opioid prescriptions, which makes them co-conspirators with Big Pharma.

Ohio claims that prescription opioids are a gateway to street drugs and that their deceptive marketing has "resulted in the explosion in heroin use." Yet 2.3 million patients in Ohio were prescribed painkillers last year more than 10 times the number of opioid addicts. The vast majority of patients who take prescription painkillers don't get hooked on heroin. A New England Journal of Medicine study last year found that fewer than 4% of people who had used prescribed painkillers for nonmedical reasons used heroin sometime in the following five years.

Painkillers can encourage dependency, and physicians need to carefully monitor patients. But the bigger problem, as the Ohio lawsuit evinces, is fraud in the delivery system. "Despite strict federal regulation of prescription drugs, local law enforcement agencies are faced with increasing diversion from legitimate sources for illicit purposes, doctor shopping, forged
prescriptions, falsified pharmacy records, and employees who steal from their place of employment," the lawsuit notes.

In 2015, 1,663,614 opioid pills—21.3 per capita were dispensed in Ross County, Ohio. A fraction of physicians account for a disproportionate share of opioid prescriptions, and addicts forum shop like trial attorneys. Prescription opioids often get diverted to the black market, and drug dealers on the street often lace painkillers with illicitly manufactured opioids to create more potent, and lethal, drugs.

Nearly all states operate databases that track physicians, patients and prescriptions, but the rub is using the metadata to track criminal activity and curb abuse. Some states such as Kentucky and Tennessee that have required doctors to consult databases prior to prescribing opioids have seen a decline in doctor shopping.

Plaintiffs are requesting billions in damages to cover the social and economic costs of opioid addiction, and Senators demanded upward of $45 billion for treatment in return for their votes to repeal ObamaCare. Yet the ObamaCare Medicaid expansion may have inadvertently fueled the opioid epidemic by making painkillers more accessible. A recent study estimated that a quarter of Medicaid beneficiaries were prescribed opioids in 2015.

Politicians no doubt are hoping to raise money from the trial bar off the opioid lawsuits. Mr. DeWine plans to run for Governor next year, and the Democratic nominee will likely be his predecessor Richard Cordray, who has spent the last five years as a frontman for plaintiff attorneys
while leading the Consumer Financial Protection Bureau.

State and local governments are also scrounging around to backfill their budgets, which have been strained by labor and pension costs. It may be easier to hit up Big Pharma than taxpayers, but mugging businesses won't cure politicians of their spending addictions.
August 3, 2001

Purdue Pharma, L.P.
One Stamford Forum
Stamford, CT 06901-3431
Attn: Howard Udell

Dear Howard:

Our first month of work for Purdue was quite busy with activities including, but not limited to:

- counseling on responses to hostile media inquiries including from 60 Minutes, 48 Hours and the New York Times;
- media outreach counseling (e.g., Tom Shales of the Washington Post)
- media placement efforts (e.g., New York Post, Wall Street Journal, Forbes pursuits, Fox News)
- third-party outreach (e.g., Cato Institute, Dr. Sally Satel, Hudson Institute)
- consumer group outreach;
- development of statement and strategy in response to New York Times article;
- development of "truth packet" for media response;
- development of plan to address impending 60 Minutes report
- interaction with investigative resources (Kroll) working on litigation aspects of the program;
- numerous counseling conference calls.

Also note, we have pre-billed $10,000 in expenses for an effort relating to a consumer outreach effort that has not yet taken place. We can discuss this further if you would like.

All in all, I think we've taken solid "baby steps" in the right direction, but we're planning on a great deal more in the months ahead if the "anti-story" is to take root.

Sincerely,

Eric Dezenhall
President

Enclosure

Robin Hagen
Please review and sign on to AP.

WASHINGTON DC • LOS ANGELES • LONDON

1110 Connecticut Ave. NW • Suite 680 • Washington, DC 20036

7000703212
PDD1706073502
EXHIBIT

F
Check this out

Robin Hogen
Executive Director,
Public Affairs
Purdue Pharma L.P.
One Stamford Forum
Stamford, CT 06901

Tel: (203) 588-8111
Fax: (203) 588-6223
Email: robin.hogen@pharma.com

-----Original Message-----
From: Eric Dezenhall [mailto:dezenhall@ndez.com]
Sent: Wednesday, August 01, 2001 5:17 AM
To: 'robin.hogen@pharma.com'; 'hudell@pharma.com'; 'michael.friedman@pharma.com'
Cc: Andrew Lewis; Sheila Hershow; Mark Pankowski
Subject: New York Post Weighs In

See today's New York Post on OxyContin. The anti-story begins. e
http://www.nypost.com/postopinion/opedcolumnists/38321.htm
EXHIBIT

G
August 1, 2001 -- SUBSTANCE abusers have a problem the rest of us should be penalized for. That seems to be the liberal view, anyway.

The New York Times Magazine just featured a cover story about OxyContin, a prescription wonder drug for chronic pain caused by cancer, other diseases and injuries.

Some rural-area drug abusers discovered they could get high by crushing OxyContin pills (thwarting the time-release mechanism) and snorting the powder. This sparked a wave of abuse.

Unverified media reports of deaths attributed to OxyContin abuse surfaced, spawning a new species of "victim," the "hillbilly heroin" addict.

But the reports are suspect. Typically, the victims also abused other drugs. The Kentucky state medical examiner wrote, "I am unaware of any reliable data . . . that proves OxyContin is causing a lot of deaths . . . We are seeing an increase in the number of deaths from ingesting several different prescription drugs and mixing them with alcohol. OxyContin is sometimes one of those drugs." But why let facts clutter a gripping liberal saga?

The Times' story portrays users and dealers sympathetically. "It's so weird the people that got into this. Some of them were innocent mothers . . . one who was in her 60s. She never did drugs,, She'd sell every last one of her pills, and . . . pay for all her other medication," said a trafficker named "Curt," incidentally, "a man of boundless energy and focus."
"I was a model of virtue. After reports of abuse made doctors anxious about prescribing the drug, supplies dried up and prices rose. Did B. quit? No. He economized. "I switched to heroin. You get really high off...30 bucks a day. That's a big savings," said "B."

Of course, addiction is never the addict's fault. "Andy" told the Times, "If I'd never touched OxyContin, I wouldn't have done heroin."

"OxyContin entered the lives of the casual drug users as a Trojan horse...[they] think of pain pills as just another interesting diversion for a Saturday night," continued the Times.

Who does the Times blame for OxyContin abuse? The manufacturer.

The Times scoffed at a $50 million reformulation effort to make abuse more difficult. It downplayed and ignored outreach efforts to doctors, pharmacies and law enforcement.

The liberals' misplaced blame is contagious.

The Drug Enforcement Administration, normally concerned with illegal drug dealers, threatens to force a 95 percent cutback in OxyContin production. A rural doctor is petitioning the Food and Drug Administration to ban OxyContin. Trial lawyers already are suing.

The Times' "sympathy for the devil" has a price, though. The real victims are pain patients who may lose a useful medication. The FDA is pressuring doctors about OxyContin. Given the agency's ready-fire-aim track record with silicone breast implants, diet drugs and other pharmaceuticals, it's a matter of time before OxyContin disappears, too.

Anc what about pain patients? The Times didn't mention one.

The OxyContin controversy is a liberal's dream come true. Sympathetic - almost heroic - dopeheads avenged by bureaucrats and trial lawyers swarming all over the greedy and malevolent drug company.

It's a nightmare for the rest of us.