

## Mill Valley doctor pioneering the use of new painkiller for chronic pain, says it's safer

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Howard Kornfeld M.D. talks to patient Tony Perniconi on Thursday, Jan. 31, 2013, in Mill Valley, Calif. The doctor has pioneered new methods of pain management using a substance called Buprenorphine as a substitute for Vicodin and Oxycontin. (IJ photo/Frankie Frost) Frankie Frost

At a time when the nation is dealing with an epidemic of prescription painkiller abuse, a Mill Valley physician, Dr. Howard Kornfeld, is championing the use of a painkiller little known in the U.S. that features a greater margin of safety for both overdose and addiction.

According to the Centers for Disease Control and Prevention, there is currently a "growing, deadly epidemic of prescription painkiller abuse." The CDC says there has been a 300 percent increase since 1999 in the sale of strong prescription painkillers, such as Vicodin and OxyContin. The CDC estimates these prescription painkillers were involved in 14,800 overdose deaths in 2008, more than cocaine and heroin combined, and more than 475,000 emergency department visits in 2009, a number that nearly doubled in just five years.

Late last month, a Food and Drug Administration advisory panel voted to impose tighter controls on prescriptions for drugs like Vicodin, which contain the opioid pain reliever hydrocodone.

For the past 20 years, Kornfeld has operated a medical clinic in Mill Valley where he treats patients for chronic pain, chemical dependency and prescription medication management issues. In 2011, Kornfeld also helped establish the first pain management clinic at Highland Hospital in Oakland. At both clinics, Kornfeld has pioneered the use of buprenorphine, a semi-synthetic opioid created in England in the early 1970s, for the treatment of chronic pain.

"Myself and a handful of other doctors around the country are trying to get the word out that is a good way to go," Kornfeld said.

Kornfeld said he first became aware of buprenorphine in the 1990s when he was treating heroin addicts and prescription drug addicts.

"We heard that the French had turned their addiction problem around with buprenorphine," he said.

At that time, buprenorphine was licensed for use in the United States only for the treatment of pain and could only be administered by injection; but it was little used.

Kornfeld said, "So since we had patients who had chronic pain, some of whom also had addictions, we decided to pioneer the use of buprenorphine in the U.S. for chronic pain."

Kornfeld also discovered he could legally have several pharmacies convert the buprenorphine into a compounded form that could be dissolved in the mouth.

Unlike heroin and other opiate derivatives, buprenorphine does not make its users euphoric and is unlikely to cause a lethal overdose by depressing respiration.

"If a person is already dependent on an opiate, they don't feel any high from buprenorphine," Kornfeld said. "Whereas with OxyContin, methadone, morphine, and Vicodin there is a tendency for people to double or triple their dose and feel some kind of euphoria and then fall into addiction."



Howard Kornfeld M.D. examines patient Tony Pernicone on Thursday, Jan. 31, 2013, in Mill Valley, Calif. The doctor has pioneered new methods of pain management using a substance called Buprenorphine as a substitute for Vicodin and Oxycontin. (IJ photo/Frankie Frost) Frankie Frost

Kornfeld said if someone takes too much buprenorphine, they will become very sleepy; but the drug won't kill them.

Patients can become addicted to buprenorphine; however, withdrawal from the drug is much milder than with other opiates.

"You're not going to be roaming the streets in six or eight hours looking for another fix," Kornfeld said.

Tony Pernicone, a fine art dealer, auctioneer and appraiser who lives in San Rafael, credits Kornfeld and buprenorphine for enabling him to regain his health after years of struggle.

Pernicone, 61, said since he was a teen-ager he has struggled with kidney stones and the intense pain that accompanies their production. In addition to producing 20 to 30 kidney stones during his lifetime, Pernicone has also overcome colon cancer, diabetes and other medical maladies.

"My medical record is thicker than the Bible," Pernicone said.

By the time Pernicone was diagnosed with colon cancer in 2007, his weight had ballooned to 350 pounds, and after a baseball-sized tumor was removed, doctors advised him against chemotherapy, fearing he lacked the strength to survive it.

Pernicone said that when he first sought Kornfeld's help he was taking the maximum possible dose of OxyContin.

"It was really unbelievable how I was even talking," he said. "Because of the traditional pain meds I wasn't really in a state of mind where I could recover."

Kornfeld used buprenorphine to help Pernicone stop taking other prescription painkillers.

Pernicone said, "There is no euphoria. It just manages to stop the pain receptors. With that I was able to start exercising and get back into shape. I've lost over 150 pounds."

Kornfeld said one of the reasons that buprenorphine isn't better known is that no drug company is marketing it aggressively.

"Pharmaceutical companies view the painkiller market as a huge potential market," Kornfeld said. "They want to invent new drugs that can be patented and buprenorphine at this point, except in certain specific forms, is a generic drug. Huge amounts of money could be saved by moving people from OxyContin to buprenorphine."

Highland Hospital, where Kornfeld treats patients twice a week, is the medical center of last resort for thousands of low-income and medically indigent patients. Kornfeld said he started his clinic there because the goal of the Alameda County Medical Center was to reduce patients' dysfunctional dependence on opiates.

"Dr. Kornfeld has enormous passion for this issue," said Dr. Evan Seevak, Medical Director for Ambulatory Care at Alameda County Medical Center. "By using buprenorphine, we've been able to get people off a lot of the other pain medicines they've been using and get them on just a single medicine at a stable dose."

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