



Opinion: Target Addiction, Not Drugs

An opinion piece in *Nature* calls out federal efforts to tackle the U.S. opioid crisis.

September 18, 2019 By [Casey Halter](#)

In 2017, nearly 70,000 Americans died of a drug overdose in the United States. More than two thirds of those deaths were caused by opioids. A recent opinion piece in *Nature* argues that federal efforts to combat the opioid epidemic in the United States could be contributing to the addiction crisis and urges politicians and providers to think of ways to tackle addiction—and the circumstances that lead to it—specifically, rather than particular drugs.

In the piece, Judith Feinberg, MD, a professor of behavioral medicine, psychiatry and infectious diseases at West Virginia University, points out that since 2000, Congress has passed several bills to combat the opioid crisis in the United States, beginning with legislation that allowed more physicians to prescribe buprenorphine, an opioid derivative used to treat opioid misuse. Other initiatives have honed in on expanding treatment options for chronic pain, slowing the shipment of opioids from abroad and allocating billions of dollars for federal research to control opioid misuse.

But Feinberg argues that part of the problem with these efforts is that they specifically target opioids. She writes: “By the time federal programs target a specific drug, the issue is being attacked where it was, not where it is. Funding should be targeted to substance misuse, not to the drug du jour.”

Feinberg writes, “The current opioid epidemic is a symptom of the fraying of the socioeconomic fabric of the rural United States.” Furthermore, she mentions as factors contributing to the addiction crisis in Appalachia the economic decline, the physical effects of hard labor and aggressive marketing tactics by the pharmaceutical industry to treat chronic pain in some of the nation’s poorest communities.

Feinberg cites a growing methamphetamine crisis in central Appalachia as an example of how lawmakers can’t keep up with evolving drug use, writing, “When opioids are used, they are being increasingly combined with stimulants such as cocaine—which, like methamphetamine, is thought to help to counteract the depressant effect of opioids.”

And because, Feinberg writes, federal grants earmarked for combating opioids cannot be used to deal with a crisis involving another drug, such as meth, federal funding should focus instead on substance misuse, not specific substances.

Moving forward, Feinberg would like to see far more efforts being made to rebuild the social and economic fabric of rural communities instead of heavy-handed antidrug legislation—for example, funding support programs for people who have recently lost jobs, working to take better care of children in foster care and addressing syndemic crises like the spread of HIV and hepatitis C virus (HCV) among people who inject drugs.

To read the full article, [click here](#).

For further reading on Feinberg’s work studying addiction on the ground, check out “[Ohio Researchers Get \\$900K to Study Hepatitis C in Young Drug Users](#).”

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