

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF NEW YORK**

In re:

PURDUE PHARMA L.P., *et al.*,

Debtors

Chapter 11

CASE NO. 19-23649

**RESPONSE, BY, [REDACTED] INDIVIDUAL, PRO SE CLAIMANT
TO MOTION FOR CLASS CERTIFICATION BY AMANDA MORALES**

As an individual woman personally injured by the practice of long-term opiate therapy, the use of long-acting opioids and short-acting opioids, along with other prescribed drugs within the Pain Management System, I submit this statement in Response, to the above-mentioned Motion, in support of serious consideration for creating a separate Class for victims harmed by the use of prescribed opioids and other prescribed drugs. This group has completely different circumstances surrounding their injuries and should be distinguished from those involved in claims related to illegal drug use and perhaps add Punitive Damages to their Claims for Compensation.

Establishment of a Class for Direct Claims with Similar Circumstances

The Claim Form provided a section for punitive damages. Is it possible to certify a separate class for victims with direct claims that differ fundamentally from those submitted by individuals associated with illegal drug use? The Stigma is perpetuated by treating ALL victims as if they were doomed to use illegal drugs and if you didn't resort to that behavior, then your life experience with drugs, doesn't matter.

Survivors, such as myself, have consistently pointed out the negligence of pharmaceutical companies and their associated support systems in failing to address known safety concerns with safer packaging despite known risks.

Just from reading the description of Serotonin Syndrome, I can honestly say that I probably suffered from bouts of those effects. I took some of the same medications along with the opioids at different times and I have vague memories of some pretty awful experiences of feeling like I was going to die. It now seems, that every opioid discussion has become all about solving the illegal fentanyl and illegal drug crisis, as if the Industries who enabled the prescription opioid crisis were somehow, not culpable for their participation in creating and enabling it!

Misallocation of Settlement Funds

Much of the opioid settlement funds being awarded go to entities complicit in creating and enabling the crisis, including governments, healthcare entities, and others who failed to address the systemic flaws they participated in. These parties continue to collaborate to promote the narrative that long-term opioid use is safe when taken as prescribed, without acknowledging how very difficult that is for someone suffering the side-effects of the drugs. The enablers knowingly ignored the severe side effects and risks associated with opioids, allowing the crisis to develop and now evolve into a System that continues the narrative, ignoring the wisdom of survivors with different experiences. A class for similar victims makes sense. Punitive Damages should not be ignored or discharged.

Systemic Failures and Continued Harm

The foundational, systemic issues that allowed the opioid epidemic to flourish, as a result of the actions by the Sackler Family and their Pharmaceutical companies, including Purdue Pharma, remain largely unaddressed.

- The attempt to redefine terms such as "Opioid(s)," "Opioid Product(s)," and "Promote" to exclude substances like methadone, buprenorphine, and suboxone, just because they are used in abatement, creates regulatory inconsistencies. These substances, though used for addiction treatment, interact with opioid receptors and carry similar risks of misuse and harm.
- Exploitation of Recovery Systems: The continued profiteering mindset—evident in the handling of "abatement" funds—focuses on maintaining chemical dependency rather than offering meaningful solutions to prevent the need for prescribing opioids in the first place.
- The recently updated Federal Guidelines for Opioid Treatment Programs, released by SAMHSA, states that MOUD drugs MUST be available in Treatment Programs. So, no alternative treatment programs that offer only Non-pharmaceutical Recovery. This should NOT be mandated but since the root causes of the crisis are not being addressed within this foundational case, the federal government is now mandating MOUD drugs for Treatment Programs. Where the money goes, that is what grows. There should not be drug mandates for drug treatment programs but those are the types of policy decisions being made by those who participated in the development of the problem in the first place.
 - [federal-guidelines-opioid-treatment-pep24-02-011.pdf](#)
- Unwillingness of leaders to consider the concerns or harms to patients who do not cause problems by breaking the law, yet suffered due to the side-effects of the drugs and the negligence of the Systems that made them available in un-safe packaging.

CONCLUSION

1. Consider establishing a Class for victims harmed exclusively by prescribed opioids and other prescribed drugs to address the unique harms and negligence experienced by this group. Claims for Punitive Damages should be considered.
2. Ensure that settlement funds are allowed to be allocated to genuinely address the root causes of the opioid crisis rather than only enabling entities complicit in the perpetuation of drug dependence.
3. Reevaluate the definitions and regulatory approaches used to prevent further exploitation and deception under the guise of "abatement."

- The foundational issues underlying the opioid crisis must not be manipulated to sustain the same systems that allowed and caused the harm. Punitive damages should reflect the intentional and willful actions of the Debtors and their enablers, ensuring accountability and justice for the victims. A separate Class Certification for non-offenders should be established to differentiate the characteristics of their claims from the others.

Respectfully submitted without Prejudice,

[REDACTED]

[REDACTED]

CERTIFICATE OF SERVICE

I, [REDACTED], INDIVIDUAL woman, Pro Se Claimant, certifies that the above referenced document and associated attachments were presented by email on December 5, 2024, to the following:

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