

June 10, 2025

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

FILED
U.S. BANKRUPTCY COURT
2025 JUN 16 PM 4:24
SD, SDNY

In re:

PURDUE PHARMA L.P., et al.,

Debtors

Chapter 11

CASE NO. 19-23649

OBJECTION TO THE APPROVAL OF DISCLOSURE DOCUMENTS & PLAN

I respectfully object to the approval of the current **Disclosure Statement** and **Plan** in the Purdue Pharma bankruptcy proceedings on the following grounds:

1. Misleading Terminology

The Disclosure Statement includes **terminology that seeks to redefine what an “opioid” is**, blurring critical distinctions in ways that benefit future marketing strategies rather than public understanding. This redefinition allows for the continued **advertisement and promotion of opioids under the guise of “abatement programs”** and “education” initiatives—mechanisms that risk perpetuating the very crisis they purport to resolve.

2. Exclusion of Direct Victims from Meaningful Participation

The System has **disregarded input from certain direct victims of the opioid crisis**, treating their concerns as unserious. The **mediation process lacked good faith**, as those who had previously objected to the plan and voted “no” were not given a meaningful opportunity to participate in a dialogue aimed at achieving consensus. Only creditor groups and participants who had **already voted “yes”** were included in discussions. Victims with lived experience have critical insights to prevent future harm—and their exclusion represents a missed opportunity for structural reform.

3. Conflicting Creditor Claims and Rewarding Enablement

In documents, certain creditor groups now seek reimbursement for funds they spent because of **their own participation in and enablement of the opioid crisis**. These groups should not be prioritized over direct victims or benefit disproportionately while their role in the public health disaster remains unexamined.

4. Implementable Reforms That Do Not Affect the Settlement Amount

Some reforms proposed do **not even affect the overall monetary value of the plan** and could be remedied, if there were a Good Faith effort to prevent future harm by addressing harmful policies that were enacted to benefit Purdue Pharma, their affiliates and all of the corporate/governmental enablers. A ‘yes’ vote, providing releases, doesn’t necessarily require changes to dollar amounts but could be achieved by addressing the root cause issues to prevent future harm and ensure reality is the baseline of truth for healthcare and mental health decisions. For example:

- **Tell the truth going forward.** Do not allow the redefinition of terms like “opioid”, “opioid product” or “promote” merely to enable continued marketing of opioids by changing the narrative.
- **Patient-focused insurance reform:** Require that any **reimbursements to insurance companies** come with **mandates to expand coverage for non-pharmaceutical therapies for pain**—such as massage, holistic care, nutritional supplements, and natural remedies. These are often effective and far less risky alternatives yet remain unaffordable or uncovered, due to the dominate use of pharmaceuticals in the overall Healthcare System.
- **Safe packaging:** Require opioids and all narcotics to be manufactured with **unit-dose, patient-friendly packaging** to support proper use and reduce diversion, especially for drugs known to impair **cognition and memory**. Failure to address this issue in a court overseeing the restructuring of a pharmaceutical company guilty of mass opioid distribution is negligent.
- **Require a Supplemental Mediation to Attempt Consensus with Direct Victims:** Consider addressing the valid concerns of Direct Victims who voted “NO” and made a timely Objection to the initial plan, which is basically the same as the new plan, except now “third party releases” are being characterized as consensual, even though they are directly tied to receiving any compensation from Debtors.
- **Require that Governmental and Corporate Recipients of Opioid Trust Funds include Direct Victims in Decision-Making Roles:** Mandate that NON-Victim recipients whether public or private—must provide meaningful opportunities for Direct Victims (*those with receipts*) involved in this case to participate in shaping policy and oversight by appointing them to board positions or advisory roles, within organizations that receive or distribute Opioid Trust Funds, either directly or through affiliated programs. This ensures that the perspectives of those with unique life

experiences are represented in the development and implementation of prevention and abatement strategies.

5. Truth, Prevention, and Responsibility

This **landmark case must acknowledge the root causes of the crisis**—including the structural incentives and false narratives propagated by Big Pharma and enabling by the Medical/Governmental Industrial Complex, as a whole. **The narrative should not be redefined to shield liability or create marketing opportunities.** True abatement requires truth-telling, addressing root causes, and structural accountability, not reframing and relabeling.

Conclusion

The Purdue Pharma bankruptcy case is a historic opportunity to **reset the public health priorities of the nation.** Ignoring or diminishing the voices of victims, manipulating language, and allowing those who helped create the problem to control the solution is not justice—it is ensuring repetition.

Please Do not approve a plan built on redefinition, exclusion, and narrative manipulation. Instead, implement the reforms that respect victims, empower prevention, and tell the truth.

Respectfully Submitted, retaining all rights without prejudice under the sovereign Constitution of the United States.

[REDACTED]

CERTIFICATE OF SERVICE

 INDIVIDUAL Pro Se Claimant, certifies that the above referenced document and associated attachments were presented by email on June 10, 2025, to the following:

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