



**FOR IMMEDIATE RELEASE**

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## **New Poll Shows Overwhelming Support for Non-Addictive Pain Management Options**

*Overwhelming majority of voters strongly support non-opioid pain management solutions and favor policies that increase access to these alternatives for seniors.*

**Washington, DC (September 9, 2024)** – Voices for Non-Opioid Choices ("Voices") announced the results of a new poll highlighting the increasing demand for non-addictive pain management options among voters. The poll, conducted by Forbes Tate Partners Insights, found that 91 percent of voters view addiction to prescription opioids as a serious public health issue. Voters also expressed widespread concern about the risks associated with opioid prescriptions, particularly for seniors.

The poll revealed that only 8 percent of voters over 65 believe the opioid pain treatments available today are the best and most effective for patients. In contrast, 83 percent of seniors believe it is crucial for patients to have access to non-opioid pain treatments that are just as effective as opioids. In fact, 86 percent of seniors said they would likely choose a non-opioid option if it were equally effective, and an overwhelming 84 percent prefer a non-opioid treatment over an opioid when given the choice.

"As a physician, I have seen firsthand the devastating impact of opioid addiction. It is essential that we provide patients, particularly seniors, with safer, equally effective pain management options," said **Voices Board member and anesthesiologist Dr. Joseph Smith**. "The availability of non-addictive options is critical to reducing the risk of addiction in vulnerable populations."

Eight in ten voters agree that patients should have equal access to both non-opioid and opioid treatments. This strong support extends across party lines, with 86 percent of voters believing that seniors should not face higher out-of-pocket costs for non-opioid treatments compared to opioids. This includes 89 percent of Democrats, 86 percent of Republicans, and 79 percent of independents.

These new polling results highlight the importance of the recently introduced Alternatives to Prevent Addiction in the Nation (Alternatives to PAIN) Act (S.3832/H.R.7142). Senators Thom Tillis (R-NC) and Mark Kelly (D-AZ), as well as Representatives Mariannette Miller-Meeks (RIA) and Tony Cardenas (D-CA), introduced this bipartisan legislation to increase access to nonopioids for seniors covered by a Medicare Part D plan. The legislation ensures that seniors have full access to non-opioid pain management options at the pharmacy counter, allowing patients and healthcare professionals to choose the treatment that is right for them.

"These poll results send a clear message: Americans want non-addictive pain management options, and they want them now," said **Chris Fox, Executive Director of Voices for NonOpioid Choices**. "We cannot ignore the risks opioids pose to seniors and their families. The Alternatives to PAIN Act offers a critical solution to this crisis by ensuring that non-opioid therapies are available and affordable."

Voices advocates for policies that prevent opioid addiction before it starts by increasing patient and provider access to non-opioid therapies. Recent projections by the Centers for Disease Control and Prevention show that 215 Americans die every day to an opioid-related drug overdose. The coalition dedicates itself to advancing policy solutions to prevent opioid addiction by minimizing unnecessary exposure to prescription opioids.

Access the full poll results [HERE](#).

Access the one-pager [HERE](#).

About Voices for Non-Opioid Choices  
Voices for Non-Opioid Choices is a nonpartisan coalition committed to preventing opioid addiction by promoting access to non-opioid therapies for managing acute pain. The coalition works tirelessly to ensure that all Americans can benefit from effective, non-addictive pain management options, regardless of their healthcare coverage or setting. For more information, visit [www.nonopioidchoices.org](http://www.nonopioidchoices.org).