

Episode: *Author Interview: “Opioid Epidemic Grief and Characterological Harm Reduction”*

Guest: Christy A. Rentmeester, PhD

Host: Tim Hoff

Transcript: Cheryl Green

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[bright theme music]

[00:00:03] TIM HOFF: Welcome to another episode of the Author Interview series from the *American Medical Association Journal of Ethics*. I’m your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Christy A. Rentmeester, the managing editor of the *AMA Journal of Ethics*. She’s here to discuss her article, “*Opioid Epidemic Grief and Characterological Harm Reduction*,” in the July 2024 issue of the Journal, [Harm Reduction and Opioid Use Disorder](#). Dr Rentmeester, thank you so much for being back on the show. [music fades]

DR CHRISTY RENTMEESTER: Thanks, Tim.

[00:00:40] HOFF: So, what’s the main ethics point of this month’s article?

RENTMEESTER: The pain of illness and the pain of being treated for an illness are morally distinct, and this article investigates that distinction, especially with respect to the phenomenon of grief and grieving. So, during the ongoing opioid epidemic, we’ve learned many new things about pain treatment, especially with opioids or synthetic opioids as a source of morbidity—for example, opioid use disorder—and as a source of mortality—for example, death by overdose. We’ve also learned a lot about grief. And grief is a kind of moral work, but we don’t always think of it in those terms. The grief that we suffer from the death of a single person, for example, is different from the kind of grief we suffer when thousands upon thousands die during an epidemic, especially an epidemic that was largely caused by pharmaceutical marketing and errant prescription and management of opioids. So I suggest that grieving dead people of the epidemic, the opioid epidemic, requires morally relevantly different work by survivors, by all of us. And I ask, what might it mean morally to do the work of bereaved survivorship well during an opioid epidemic? When we experience loss, those losses can cause some harms to our characters. We can become callous, bitter, resentful, for example. And this article is about how we can mitigate some of those harms to our character by drawing upon art.

[00:02:48] HOFF: And so, what’s the most important thing for health professions students and trainees specifically to take from your article?

RENTMEESTER: We need to continue to deploy macro-level educational approaches to harm reduction. And part of that means helping students and trainees learn about their prospective roles in appropriate pain management. It’s also important that students

and trainees understand the universal nature of anyone's vulnerability to opioid dependency. Under the right conditions of pain, any one of us could become a person who uses drugs, who develops opioid use disorder. The opioid epidemic and its aftermath, whenever that arrives, will influence which pain management strategies that clinicians throughout their careers will have available to help patients in pain. And the aftermath of the opioid epidemic, again, whenever that arrives, will also influence how freely clinicians will be able to implement and administer those strategies in the care of patients.

So, students and trainees need to really carefully consider what opioids and the iatrogenic nature of the opioid epidemic suggests to them about their capacity to do harm. And I'm not saying that all clinicians will do harm, will harm their patients, with opioids. But what I am saying is that part of what it means for clinicians to wield their prescribing authority responsibly means that they have deep, thoroughgoing understandings of their capacity to do harm. So we hear very little, despite all of our exchanges on the opioid epidemic, about how thoughtful clinicians have navigated their own grief about clinicians' roles in the opioid epidemic. And this is a source of epidemic grief, to which students and trainees and all clinicians should probably be introduced and free to explore.

[00:05:12] HOFF: And finally, if you could add a point to your article that you didn't have the time or the space to fully explore, what would that be?

RENTMEESTER: Well, as I mentioned in the article, art can help us avoid harms to our characters that epidemic grief can exacerbate. And one specific artwork that I discuss in this article is Chopin's *Nocturne in B major, Op. 62, No. 1*. And this is a work that was composed between 1845 and 1846 that is, nearly 200 years later, still beautiful today. There are many other works of art that we could draw on. [tender classical music on piano begins] So much more could be added about favorite works that can give us opportunities to look closely and to listen closely when we are grieving, and especially at epidemic scale.

[00:06:05] HOFF: Dr Rentmeester, thank you so much for your time back on the podcast and for your continuing contributions to the Journal.

RENTMEESTER: Thank you, Tim.

HOFF: The song you're hearing in the background is Chopin's *Nocturne in B major, Op. 62, No. 1*, performed by Olga Gurevich, courtesy of Wikimedia Commons. A link to the full performance is available in the show notes. To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.