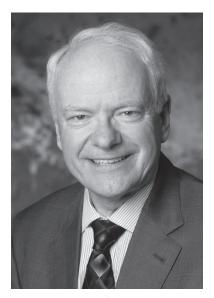




Letter From the NAME President



Buin Pletour un

Brian L. Peterson MD NAME President 2017

It was the best of times, it was the worst of times, it was the age of wisdom, it was the age of foolishness, it was the epoch of belief, it was the epoch of incredulity, it was the season of Light, it was the season of Darkness, it was the spring of hope, it was the winter of despair...

So begins A Tale of Two Cities, and Charles Dickens' words seem equally applicable in 2017. Are these the best of times for death investigation in general, and forensic pathology specifically? Surely at least, not bad. Our science continues to improve, year by year. We enjoy an efficient and effective division of labor, with trained, credentialed death investigators "out there" attending scenes, and subspecialty trained forensic pathologists "in here" performing autopsies. Although our numbers are not huge, thanks to cooper-

ation with larger like-minded groups such as the College of American Pathologists we have achieved some marvelous victories; the changing landscape of Maintenance of Certification/Self-Assessment Modules comes to mind. From *CSI* to Hollywood to Amazon best-sellers, our field is well-known to the public—or at least they think they know—and perceptions are generally favorable.

At the same time, focusing on this issue of *Academic Forensic Pathology*, we are somewhere between a deluge and a tsunami of opioid-driven death that threatens to overcome us. Take a baseline of drug abuse – cocaine and heroin, with the occasional exotic such as phencyclidine thrown in. Mix in very effective marketing of a former second tier drug, oxycodone, and a hard push by government, credentialing agencies, and





advocacy groups to make pain the "fifth vital sign." Layer on patient expectations for smiley faces and lives free of any pain, and finally add a dash of changing prescribing practices that will predictably drive long-term prescription opioid users to the street—and we have a perfect storm of overdose death. Case numbers and laboratory burdens explode even while inexpensive potent analogs of fentanyl reach our shores by the ton. Office accreditation is imperiled by case numbers while formerly serviceable screening methods such as ELISA are rendered ineffective due to the regular import of novel analogs. How is our profession to respond?

Well, back to optimism. This issue of *AFP* will be an effective tool; given that the lethal drug mix varies by neighborhood, city, county, and state, here is timely information with which we all need to become familiar. Our colleagues may face a different mix of drugs, but we are all confronting the same root issue. And what we report, the government at many levels

is beginning to acknowledge as well. Perhaps the silver lining here will include increased recognition of the importance of our work, increased funding, and an increased emphasis on regionalization that will make better use of our small numbers. Ultimately, a larger pipeline that will produce, years down the road, more forensic pathologists to meet the demand.

What to do? Well, as this issue evolves, week by week, stay in touch with your colleagues. Keep an eye on the listserv, one of the first places that new issues and challenges appear. Read and contribute to *Academic Forensic Pathology* – this is your journal and the voice of our profession. Come to NAME meetings – electronic communication is good, but face to face meetings are invaluable to both information exchange and networking. Spend some time informing your politicians, at every level; they are hungry for clearly-presented data and your voice of reason is invaluable to them. Most of all, please remain connected to, and involved with, NAME. We will get through this.