

Erin Welsh

Hi, I'm Erin Welsh and this is This Podcast Will Kill You. You're listening to the latest episode in the TPWKY Book Club series this season, our ongoing miniseries where we bring authors onto the podcast to chat about their fascinating books in science and medicine. So far this season we've explored topics all across the realm of science, from how roads affect our lives and the lives of wildlife to how our brain picks and chooses what's important to remember, from why fungi ruled the world to how unsung heroes at a hospital on Staten Island helped to bring about a cure for tuberculosis. And we've got more topics to venture into this season. But just a couple. That's right, we've got just two more book club episodes left after this one for the season.

But don't worry, we'll be back next season with more book club episodes. And you can always check out our website thispodcastwillkillyou.com where you can find a link to our bookshop.org affiliate page under the EXTRAS tab. On that page, you can find the TPWKY Book Club list which includes all of the books we've covered so far as well as the ones that will be coming out later this season. And a hint for anyone who's doing some last minute holiday shopping, our book club lists are a great place to pick out some fascinating books for the readers in your life.

Speaking of fascinating books, this week we'll be delving into a story that is part public health crisis, part true crime, and part tragedy, whose impact is still felt by so many to this day. Journalist Philip Eil joins me to discuss his book 'Prescription For Pain: How a Once Promising Doctor Became the Pill Mill Killer'. That once promising doctor refers to Paul Volkman, an American doctor who is currently serving four consecutive life sentences in an Arizona prison for unlawful distribution of a controlled substance resulting in death. Looking at Volkman's early life and career, which included an MD and a PhD, this seemed like a guy destined for greatness, for a Nobel Prize even as one of his former colleagues suggested. How did Volkman go from being one of the most accomplished physician researchers in the United States to working at a cash only pain clinic in Southern Ohio to then spending the rest of his life in prison? That's the question at the center of Eil's 'Prescription for Pain'.

In the course of tracing Volkman's downfall, Eil also exposes the systemic failures and lack of oversight that permitted Volkman to remain in a position of power for so long, a position he exploited to harm those who sought his help. In general I think that most of us trust physicians to do the right thing. Of course we know physicians are flawed, they make mistakes, they're human after all. But when it comes to helping vs harming, we expect them to abide by a moral code, the bottom line of which is do no harm. Volkman's complete violation of this code begs the question why? Why did he continue down this path knowing that he was causing irreparable harm to individuals, to families, to an entire community? Through extensive research including conversations with Volkman himself, Eil reveals the disturbing answer to this question which is simply that Volkman sees himself differently than the rest of the world sees him.

Eil also puts Volkman's actions in the broader context of the opioid epidemic and how it has changed shape over the past 20 years. But importantly, throughout his book Eil doesn't lose sight of those who were harmed by Volkman, drawing attention to their lives and honoring their memory. 'Prescription for Pain' is a gripping account of a physician who abused his power and status and betrayed those who came to him for help. But more than that, it's a story of how he was able to carry out his crimes in this country in the early 2000s, enabled by a broken system and supported by corrupt officials. What is Volkman's true legacy? And how can we prevent someone like him from going down a similar path? Let's turn to the interview to find out, right after this break.

TPWKY

(transition theme)

Erin Welsh

Phil, thanks so much for joining me today. Happy to have you here.

Philip Eil

Thanks so much for having me, Erin.

Erin Welsh

Your book 'Prescription For Pain' is a meticulously researched account of the truly chilling life of Paul Volkman, a doctor, a doctor-doctor, MD/PhD specifically, who is currently serving four life sentences in prison for illegal prescriptions. As you discuss in the book, your reasons for writing this are in part personal. How did you first hear about this story? And what about it made you think to yourself, okay, I've got to write a book about this?

Philip Eil

To answer that question we have to go all the way back to 2009 when I was 23 years old. I was less than two years out of college and I had just started my journalism career. And one of the books that had inspired me to pursue writing, to pursue nonfiction writing was Truman Capote's 'In Cold Blood'. So young Phil has just started out on his journalism career, I've written maybe 10 or so small light hearted articles for local publications in my home state of Rhode Island. And 'In Cold Blood' had been one of the things that kind of got me on this path. And I'm talking to my dad and he mentions that... He brings up this case, the situation of this old classmate of his from the University of Chicago MD/PhD program. And this old classmate, Paul Volkman, at that time was facing a federal indictment. The indictment alleged that Volkman had participated in a multiyear drug dealing scheme basically.

Federal prosecutors said that Volkman was working out of cash only pain clinics in Southern Ohio, that these clinics were patrolled by armed guards, that local pharmacies refused to fill the prescriptions written there, that he was prescribing prodigious amounts of opiate painkillers as well as sedatives and muscle relaxers. And most awfully that a number of his patients had died over the course of this conduct from apparent overdoses after taking the medications that Volkman prescribed them. So as I describe in the book, my dad is a mild mannered, nerdy guy who wears glasses and plays golf and sings in civic chorales and I'm not sure he's ever even gotten a speeding ticket. He's not the kind of guy you would expect to know someone who's accused of essentially being this kind of prescription drug dealing kingpin. So I was immediately struck by that kind of familiarity, that these two guys had gone not just actually to medical school together but college as well. But also the foreignness of it, that this guy who my dad knew was accused of these horrifying crimes.

And another factor was that my dad had fallen out of touch with Paul Volkman in the years between their graduation from the University of Chicago in the mid 70s and Volkman's indictment. So he couldn't account for what had happened in between those two dates. So it was also a mystery. So throw all these things together and you've got me, the energetic and ambitious and also pretty naive young journalist who has big dreams of writing a true crime book like Truman Capote. And I was immediately hooked. I was about to enter a graduate writing program and I had already gotten in with a portfolio that was based on some other stuff.

But I immediately pushed that stuff to the side and said this is the story I wanna pursue. This just seems so fascinating and rich. It immediately struck me as a big story even though I didn't really know what was between those years of their graduation and Volkman's indictment. And one other thing I'll just add is that Volkman was not a guy who was a regular at my house growing up. It's not like he came over for dinner or hung out at family barbecues. I never met him. I'd never even heard of him. He was this long lost guy from my dad's past. So I was coming to the story with a personal entry point but without any history with this guy. And I was off to the races from that point.

Erin Welsh

And 15 years later, you say you started this 15 years ago and then here now you have this book. Did this book change shape as you worked on it or as the broader narrative surrounding opioids in the US changed?

Philip Eil

Yes. I mean I'd say for the first couple years I was just a graduate student who was in an MFA, masters of fine arts writing program, who needed a big project. Not a finished book but like a thesis project, and I use that term lightly because your audience is probably used to much more serious and rigorous theses than the one I had to produce for my MFA program which is just kind of like an exhibition of my work. So initially I didn't know that this would be a book. I just knew it was a big story. I mean in a technical sense I didn't have confirmation it was a book until 2021 when I landed a book deal. I always from a pretty early stage in my mind thought there was enough for a book here. The journalist in me who wants to just point to facts is like no, I didn't actually have a contract until 2021.

I mean so that's a kind of literal answer to your question. The other answer is to start this in 2009, there hadn't been that many books at that point written about the opiate epidemic. We're in this phase of we're so far into this epidemic, it's progressed from prescription drugs to heroin to fentanyl. And we're also in this stage I think of slowly understanding how this all happened with the help of remarkable books. I mean Patrick Radden Keefe's 'Empire of Pain', Sam Quinones' 'Dreamland', Beth Macy's 'Dopesick', Anna Lembke's 'Drug Dealer, MD'. My book, by the time it came out, joined this kind of subfield of nonfiction literature about the opiate epidemic. Whereas when I started there were a few of those books but not too many of them out there. And one thing that allowed me to do... This book didn't wind up being short, it's 400 pages on its own, because I knew those other books were out there to really just focus on this one doctor's extraordinary life.

Erin Welsh

Let's take a quick break and when we get back, there's still so much to discuss.

TPWKY

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Erin Welsh

Welcome back everyone. I've been chatting with Phil Eil about his book 'Prescription For Pain': How a Once Promising Doctor Became the Pill Mill Killer'. Let's get back into things. Speaking of Volkman, let's get a bit into his story. So here we have this highly educated, highly driven guy who starts out with this promising career. He's got his MD, he's got his PhD. But then things begin to go downhill for Volkman. He's involved in medical malpractice suits, he's having a hard time finding and keeping a job, no one will insure him. How did Volkman eventually find himself working at a cash only pain clinic in Southern Ohio? Like what was the turning point? Or were there several turning points?

Philip Eil

So that, I mean I talk at the beginning of the book how it was really that question, Erin, that drew me in of like what happened to this guy? On paper he was a high school valedictorian, he got a partial scholarship to his undergraduate studies at the University of Rochester. He and my dad both got federally funded scholarships to get MD/PhDs at the University of Chicago, the MSTP, medical scientist training program. That was fascinating to me. You would think that a guy like that would emerge with no debt, with two degrees, really the highest qualification we have in our culture, double doctor, as you said at the start. You would think a guy like that would just have endless possibilities in front of him, endless options. And how was it that he wound up in such a seedy and ultimately criminal situation?

That's a question that after many, many of research and reporting, I wind up answering in the first part of my book before the crimes start because actually Volkman's crimes don't start until he's well into his 50s. He's had kind of a full adult life, he's had a career. And as you say, it was an odd career. He and my dad were really trained to be researchers, they weren't really trained to see patients. Volkman flamed out of research fairly early on. And the reasons are there's kind of a theme that would emerge in his life where he said it was one thing and the facts as determined by interviews with other people or documentation say another. Volkman says basically he had produced this brilliant work of research about a new treatment for strokes at a laboratory in Chicago and that his lab director was away and came back and didn't understand it and wouldn't sign off on it. And so Volkman's, according to him, paradigm shifting research was ultimately spiked for reasons that he says were due to his lab director.

The lab director who I tracked down said a very different story, that Volkman was not a particularly promising or bright researcher, that he didn't produce a lot in the way of funding or research, that he seemed distracted and was working a lot on nights in emergency rooms and that they ultimately decided that this wasn't a good fit. So again, this is the start of Volkman's career. And for me as his biographer, we have a trend emerging that would continue to emerge of him saying one thing, often a self-glorifying narrative, and another person saying another. So from there he has stints in pediatrics, his decision to go into pediatrics kind of befuddles his classmates, it didn't make economic sense, it didn't make sense with his personality. That ultimately wasn't earning the kind of money he hoped it would for his now growing family. He's married, he has two kids, he's living in Chicago.

He starts moonlighting in emergency rooms on nights and weekends, first in Chicago. Then he discovers that he can actually earn more money taking these kind of temporary, what are called locum tenens, gigs across the Midwest. So ultimately, these last for days or weeks at a time. Over the years he works in dozens of hospitals in Indiana, in Ohio, in Iowa, in Wisconsin. He's kind of a traveling doctor. And over the course of about 20 years, as you say, he's sued for malpractice. All cases which he says were without any basis. He says he was a victim of an out of control malpractice lawsuit system and predatory lawyers and patients who were looking for a quick payout. And I include that version of the story in the book of course but as I always do, because I'm a journalist, I tracked down these cases and the people involved in them when I could to see what they said. And once again, they told a very different story.

In one tragic case, a young pediatrics patient who was about a year old died from what a jury agreed were Volkman's actions. Which I can talk more about that. In another case, a woman's arm was amputated from the below the elbow. In another case, a young guy was left with permanent brain damage from what was argued to be kind of negligence on Volkman's part. So these were really serious cases where people had really serious injuries and the facts as I determined them were much more incriminating than Volkman led on. So all of this happens and by 2003 the lawsuits add up enough where malpractice insurers notify him at some point. And it's unclear, he gave me differing accounts whether his rates became too high that he couldn't afford them or he was actually like kicked out of malpractice insurance entirely. It wasn't clear but the result was he couldn't get malpractice insurance.

And so he's in his mid 50s, he's living on Lakeshore Drive in Chicago with a rent of \$4500 a month, he has a lot of expenses. And he's virtually unemployable in most medical settings. And after kind of some desperate scrambling he finds an ad online for a cash only pain clinic in the Appalachian part of southern Ohio on the Ohio River. And malpractice insurance isn't required. And that's how he winds up in southern Ohio.

Erin Welsh

And this clinic that Volkman ends up joining already existed at this point. What can you tell me about the beginnings of Tri-State Health Care and Denise Huffman? Like how was Denise, someone without any medical credentials whatsoever, able to open a cash only pain clinic?

Philip Eil

Yeah. So I'll preface this by saying there were a lot of things that kept me motivated on this story for more than 10 years. One, the facts were just astonishing. They remain astonishing to me even after the book is out and I've processed this all. Like this is why I write nonfiction, not fiction, because if you read this in a novel, you might not believe it. Denise Huffman who started the clinic that would ultimately hire Volkman was a native of eastern Kentucky. She had dropped out of high school, not gone to college, had no medical training. She had worked in fast food restaurants and factories, although her employment history is a bit murky as are a lot of things about her life. She was a contrast to Volkman. Volkman spoke to me virtually endlessly for the book, first in person before his trial, then via email and letters after his trial. Denise Huffman did not really speak to me at all so I had to kind of cobble together her story from legal documents.

But according to Denise, she started this non hospital-affiliated pain clinic, again she has no medical background, because it was a business that she felt the area needed. The area is this region. First she was in Kentucky but it's kind of where the Rust Belt and Appalachia overlap. Used to be industry around here, most of that is long gone. And by this time in the early 2000s it's a really poor place and has been for quite a while. If you talk to people around here as to why Denise, here being Southern Ohio, Eastern Kentucky, why Denise founded this clinic, it's because there was an existing model for how to run this kind of business that was up and running. This kind of high volume prescribing, cash only pain clinic, that so called pill mill that a few people had tried and that was kind of shown to work even if the doctors and other people wound up going to prison. There was money to be made there. And she seems to have had some kind of connection, personal/professional with one of the most infamous doctors who ran this kind of clinic in the region.

So she says it was a good clinic that the people who were in pain in the area needed, other folks say no, she saw the writing on the wall, she was kind of an understudy of this crooked doctor and started her own operation. But that's who Denise Huffman was. She turned it into a kind of a family business. Her daughter went to work for her managing the day to day operations. Some of her nieces worked there as medical assistants and nurses. The first few doctors she hired, more than one of them ran into issues with the Kentucky Board of Medical Licensure. I tell those stories in the book. At a certain point, she hops over the river to Portsmouth, Ohio and finds Dr. Volkman online. And so this odd couple, big city doctor with an impeccable resume, at least on paper, and this woman who's a native of Appalachia who doesn't have any kind of training or much education, they wind up partnering up in a sense. She's the clinic owner, he's the doctor. And that partnership would last for more than two years.

Erin Welsh

This ultimate success of the Tri-State Health Care clinic, it's not unique in itself and it really does fit into this larger context of painkillers in the early 2000s. Can you talk a little bit about that and where these pill mills including Tri-State Health Care sort of fits into the growing awareness of pain during this time as the quote unquote "fifth vital sign"?

Philip Eil

Volkman's crimes took place between 2003-2006. And that places them squarely in kind of the early years of the opiate epidemic. I mean literally if you look at graphs from the CDC about deaths due to opiates, they break it down into three eras: the prescription era, the heroin era which is largely seen as a result of the crackdown on prescribing, and now we're in this fentanyl era. So these are pretty early years. This is less than a decade after the arrival of OxyContin and the story of what happened around OxyContin which I describe as kind of the big bang of the opiate epidemic, the wildly inappropriate and cynical ways that those drugs were marketed, and the kind of misinformation as marketing that was spread about the supposedly low risk for addiction and the much wider uses for these really strong opiate medications than anybody previously thought. That is well documented in books by Barry Meier and Sam Quinone and Patrick Radden Keefe and the excellent documentary Crime of The Century by Alex Gibney on HBO.

As a side note, Volkman for kind of unclear reasons preferred to prescribe generic oxycodone. So he really didn't prescribe the brand name OxyContin. So this actually isn't an OxyContin story per se but any story involving opiates and overprescribing in this era is an OxyContin story because they're the ones, Purdue Pharma, who really got this whole mess rolling. So Volkman as a guy who even to this day from federal prison, having been convicted of drug dealing, maintains he was treating pain and being compassionate and being professional and helping people. He's really a man of his era in that the era you described of the fifth vital sign, this was a moment when the winds of change were really blowing in the direction of let's treat pain more aggressively. The fifth vital sign, for folks who don't know, is this campaign to treat or assess pain upon a patient's arrival in a healthcare setting like you would their pulse or their blood pressure or their temperature even though critically pain is not measurable independently like those other things which makes it more complicated.

But it was a time when the medical world was trying to shift and culture generally was shifting. A piece of kind of trivia that I found in my research was that Congress actually included in a bill, an unrelated bill, the distinction that the decade from 2000-2010 would be dubbed the decade of pain control and research. And state legislatures were passing laws protecting doctors who wanted to prescribe opiates. This is all the context in which this case unfolds. And we now know that it was an era when a lot of actors, be they corporations, be they doctors, distributors, even McKinsey the consulting company kind of used this cloak of treating pain, of relieving suffering, to make a lot of money and to cut corners and ultimately to cause a lot of damage in the process. It's this unimpeachable idea, right? I'm not against treating pain, right? Who is against relieving suffering? But that cause, which had this new momentum at the time, gave cover for a lot of bad actors and Paul Volkman was one of them.

Erin Welsh

Let's take a quick break here. We'll be back before you know it.

TPWKY

(transition theme)

Erin Welsh

Welcome back everyone. I'm here chatting with Phil Eil about his book 'Prescription For Pain'. Let's get into some more questions. After Volkman moved to Ohio, he didn't fly under the radar for too long. What were some of the immediate red flags that popped up when he started working at Tri-State that very clearly showed that he was involved in a drugs for money scheme?

Philip Eil

First off, he continues to live in Chicago. The odd couple nature of his relationship with Denise fascinated me and the fact that he lived in Chicago and was commuting on a weekly basis, went down on Monday, returned Friday, to a town 400 miles away in southern Ohio. So that's a key part of this story, right? Just the distance and his... I think he was used to traveling from his years as a locum tenens doctor. But there were people who were so upset with him during his time in Ohio, one of whom told me she said to him you need to go back and start this clinic in your neighborhood in Chicago. That was the kind of vibe it was.

Anyway, so he gets down there and almost immediately pharmacists, which the clinic needed at that time to fill their prescriptions, are alarmed by the prescriptions he's writing. They strike the pharmacists, many of whom would later testify at Volkman's trial, as excessive, as dangerous, as it was sketchy the number of patients who would kind of arrive at pharmacies in waves or their willingness to pay cash or the fact that many of them seemed young and pretty able-bodied for people who were filling prescriptions for opiate painkillers and sedatives like Valium and muscle relaxers. So kind of one by one, the local pharmacists say we don't want any part of this, we're not gonna fill these scripts. This is within months of Volkman arriving. Volkman, you may get a sense of his personality, says this is a result of their ignorance or their corruption or some collusion on their part against him, certainly isn't his prescriptions which according to him are by the book and completely appropriate.

So he's not thrown off course. And he and Denise do something that at the time was legal, they submit an application to the Ohio Board of Pharmacy to establish an on-site dispensary at their clinic. I think this is designed, the law was designed for like rural doctors who maybe had to write an occasional script every now and then and it was convenient for them to just be able to give it to patients on-site. I don't think these laws were designed to open up a kind of massive, in terms of the amount of pills moving through, dispensary on-site. But that's what this became. The Ohio Board of Pharmacy gave this clinic the green light and that's kind of when the floodgates opened. This turns their clinic, this was within months of Volkman arriving down there, into a one stop shop, again all cash, where patients could see the doctor, receive their prescriptions, literally walk down a hall and get those scripts filled with this kind of ad hoc tossed together pharmacy which was dispensing enormous amounts of medication.

Volkman from this small clinic in a small town in rural Ohio became the single largest purchaser of oxycodone in the country for the year 2004. That was the kind of volume he was writing and dispensing. And the clinic operated like this as a one stop shop for again, a couple of years. Pretty soon the DEA got wind of it through various ways, complaints by pharmacists, by other people, and they start an investigation within a few months. But it would take quite a while for that investigation to I guess acquire enough momentum where they felt they could shut him down.

Erin Welsh

Part of that momentum was when some of Volkman's patients began to die from what appeared to be drug overdoses happening on a regular basis really. And what finally then led to this DEA raid on the clinic in 2005? And what did they find that was quote unquote "highly unusual" I guess to put it mildly?

Philip Eil

I don't know if I ever learned what the exact inciting incident was for that raid in 2005 but they had been collecting enough information at that point. So there were complaints from local pharmacists before Volkman and Denise started the dispensary. Then when the dispensary got up and running there were complaints or at least red flags thrown by medical distributors who were filling their orders and saying we've never seen orders of this size for oxycodone. And then of course there were the deaths, as you mentioned. I never got an exact number of how many deaths investigators looked into. I was told it was over 30 deaths that they at least explored. And they ultimately found enough of a connection where they mentioned 14 patient deaths in Volkman's indictment.

And this is in a place by the way, I should note, that at the time of Volkman's arrival already had an established problem with addiction, overdoses, opiates. I found a clipping from a local newspaper from 2003, the year he arrived, where mayoral candidates in Portsmouth were debating whether the city deserved the nickname 'the oxycontin capital of the world'. So that's the place he arrived in. And so he's at this clinic and the DEA swoops in for the first of more than one raid in the summer of 2005. And a lot of people show up and they videotape it. And that tape is shown at Volkman's trial and I ultimately get my hands on it. And they find... Well they find guns, there's a number of guns at the clinic. There are guns upstairs in an office, a rifle on the floor, there's another gun leaning against the wall, this is all visible in the video. There's a handgun behind the counter at the dispensary.

Inside the dispensary there are stacks of prefilled and labeled bottles, kind of like an assembly line operation, these are just kind of ready to go. It doesn't really seem like the kind of place that would be offering specific highly tailored medical care if these bottles of 90 oxycodone or Valium are just kind of ready to go. According to some testimony, there are urine sample cups that are visible kind of lying around. It's a mess. And a really sketchy operation to put it mildly. I mean I've seen the video and it's just kind of mind boggling. And yet after that day in the summer of 2005, Volkman is not shut down, he continues to practice, he is again undaunted by the fact that the feds have come in and taken a whole bunch of paperwork and raided the clinic essentially. And he goes back to work, back to what he's doing. The show continues and the money keeps pouring in and more people continue to die after that point.

Erin Welsh

Yeah. And so then he's still there despite this, like you said, just kind of unbothered in a sense. How did he eventually get arrested? Like what ends up happening where it's like okay, this is it now like that we had this raid, we have more evidence, enough is enough, and then he gets finally arrested for his crimes?

Philip Eil

In one sense I don't really have an answer to what the tipping point was because I think it's an open question and a good question to ask. Why did it take the DEA nearly three years to shut this guy down? He starts in April 2003, red flags are there from the start. And he isn't shut down, and by shut down I mean the DEA formally suspends his registration to prescribe controlled substances, until February 2006, nearly three years after he started. So I think people should ask, even though I think Volkman deserved to be taken down by the DEA and I think overall it was good that they took him off the streets... One of the first articles about this case was in the Columbus Dispatch and they kind of asked what took so long. The headline was 'More Died as Three Year Probe Unfolded'. So I don't really have an answer to why it took that amount of time.

But I can say that Volkman was not chastened by this raid of his office in 2005, in fact his behavior became even more outrageous. Within a couple months his relationship with Denise sours and they part ways. And Volkman decides while he's looking for a new office to try to run a pain clinic out of his house that he was renting in Portsmouth. A quiet, out of the way residential street in a quiet town. He opens up or attempts to open up a really high volume, both in terms of the number of people coming in, the number of scripts going out, pain clinic. And it just wreaks havoc on this neighborhood. The street clogs up with cars, people are milling around in the front yard and the backyard because there's no sign on the house. They're knocking on the neighbor's door asking for the doctor at odd hours of the day. There's a guy with a gun who's a security guard wandering around. It's total chaos. Even Volkman's defense lawyers at his trial used the term 'chaotic' to describe it, which it's chaotic if your defense lawyers are gonna say yeah, those couple weeks were chaotic.

Oh, another extraordinary moment is when the mother, the desperate mother of a patient of his, the patient who was in recovery from addiction before going to Volkman's clinic, she's literally fearing for his life, knowing about this doctor. She's a guard at the local prison. Barges into the clinic, kind of elbows her way into a room where, this is a clinic in the house, where Volkman is seeing a patient and threatens him. Says basically I have a gun in my car, if you don't stop prescribing to my son, I will use it. This is the kind of environment Volkman is operating in. That woman would testify at his trial and tell that story. But again, that gets shut down by the local police. He's still not ready to stop. He finds a new office space about an hour north in a town called Chillicothe. And for four or five more months continues to operate until again, I don't know what the exact calculus was except the DEA finally decided it had what it needed to initially suspend his registration.

And look, there are good reasons why the DEA needs to present evidence before they can just yank a doctor's drug registration. That's a person's livelihood. But it certainly does beg the question of what took so long. But by February 2006, they had what they needed and they raid his office for the last time, suspend his license to prescribe controlled substances. And then a little over a year later a federal indictment follows in 2007.

Erin Welsh

While researching for this book, and you've mentioned this throughout our conversation, you were able to spend a lot of time communicating directly with Volkman through in person chats, through email, through letters. And you talked about how his version of events often appears very different than the version of events that other people tell or that is just as laid out in the facts. What patterns did you see in his telling? Like do you think that he truly does see himself as a victim?

Philip Eil

Yes. Oh absolutely. He says as much in an open letter that he wrote from prison in 2018 that was published on a blog that's sympathetic to the plight of doctors convicted for prescription drug dealing. He literally says I'm a victim in this story. And that's kind of a distillation of his view of his entire life story. The most prominent trend in his telling is he's a victim. Not only is he a victim but he was a good guy helping people. According to him, these were people in chronic severe pain for whom other treatments had failed, who were kind of at their wits end, whose lives had been severely harmed by these injuries or illnesses. And that he was the only doctor with the brains to know how to treat them in the guts to prescribe these stigmatized medications of opiate painkillers. And as he says, basically give them their lives back. That is his version.

And so in his telling he's been railroaded by the federal government, the DEA is a corrupt out of control agency that in its zeal to prosecute the war on drugs found doctors to be a more appealing target than traditional street corner drug dealers and started going after innocent doctors and he was one of them. For him, it's a story of a grave injustice that he was charged in the first place and that he was convicted and sentenced to life in prison. I found that stance to be unwavering in my years literally of communicating with him. He's not a guy who's prone to admitting really any kind of fault. He has an extremely high view of himself in terms of his intelligence, in terms of his morality, and an extremely low opinion of a lot of other people who he sees as his antagonists.

And that list came to ultimately include me, the son of his former classmate who showed up with a tape recorder and a notebook and who wound up publishing first a magazine article that wasn't to his liking and well I haven't heard from him since I published the book but I know he didn't approve of a much shorter magazine article that told what I thought was the accurate story. So in a lot of ways the book became a character study of an exceedingly bright guy who just sees the world fundamentally differently from virtually everyone around him. At his sentencing in 2012 said I have no apologies to make and called the judge a heinous criminal. At that point, Volkman's lawyers had backed off the case as a number of lawyers for him had done previously and he was representing himself and he told the judge that she was the criminal, not him. And some folks have understandably asked in my book events, was he using the drugs himself or did he have a gambling addiction or was he trading pills for sex?

There have been a lot of doctors convicted of prescription drug dealing during the opiate epidemic. And when you look at some of these cases as I have, you see those things, right. You see the tales of the doctors who were using drugs themselves or who were trading pills for sex or who were gambling, whatever. And I say that I think this book would have been a lot thinner if when I scratched the surface I found that it was a fairly kind of traditional vice that explained Volkman's behavior. But there was no real evidence of that. Instead it became a story, a much more complex story of a guy who more or less in his right mind or at least not under the influence of anything I could tell, did this and did this for nearly three years. I mean this is the very opposite of a hot-blooded crime that happened in an instant. Not only did this guy do this conduct for three years, he was commuting for hours each way every week and had plenty of time to think about what he was doing. So that is really what interested, or that's one of the things that interested me is how does that happen? What does it look like when a person thinks that way?

Erin Welsh

Another thing that makes Volkman stand out, even among these other physicians who have been convicted of illegally prescribing opioids, is his sentence.

Philip Eil

Yeah. Out of all of the doctors, and I've seen estimates as high as there have been a few hundred convicted over the course of the opiate epidemic and virtually every state has at least one case of a doctor who who broke bad and was convicted of crimes during the opiate epidemic, I looked really hard to see if there were any sentences that matched or exceeded his sentence of four consecutive life terms and I did not find any. It's a high water mark. And there are reasons for that that I can get into a little bit. But just to start, it's one of the many things that makes this case stand out. I would also say that I didn't really find many, if any, other cases involving an MD/PhD. And I should add that Volkman's PhD was in pharmacology and toxicology. So it wasn't in some unrelated field. It was literally in the discipline of drugs and how they affect the body.

Erin Welsh

Ultimately both Volkman's story and this larger story of the opioid epidemic, they're true crime stories with villains like Volkman and with victims. In your process of writing the book, how did you go about making sure that the experiences of those harmed and exploited by Volkman were represented or honored?

Philip Eil

Here's another, in my book events I'm always saying and that's another reason why this took me over 10 years. This was a thing that I really didn't want to rush. Again like we said at the beginning, I was 23 years old when I started this, I hadn't published a book, I hadn't even published any of the in-depth reporting on serious subjects that I would do later on in my career. And I knew that this was an exciting story, one. But I also knew that it was a really serious story. To me as a journalist, there is no bigger responsibility than telling a story of somebody who's no longer here to tell their own story and/or somebody who's been the victim of a serious crime. And in this case there were many of those people. There were 14 of those people. And we could go on a whole long detour about true crime stories, I got really obsessed with true crime as a genre as one of the ways of kind of working through my anxiety about how I would try to pull off this story.

I would read a lot of books and watch a lot of documentaries and listen to a lot of podcasts. And the good ones inspired me and helped steer me in the right direction. And the bad ones, and there are plenty of bad ones or at least flawed ones, gave me a long list of things I didn't want to do. And one of the things I didn't want to do was flatten the lives of the people who died in this story or sensationalize their story or stigmatize these people or demean them in any way. And there was actually a helpful reminder within the story itself of how not to do it because Volkman himself clearly did not see these people as three dimensional people. I mean there was an email that was presented during his trial that he wrote at the time he was doing this work in which he said most of his patients were hillbillies. That's a word I would never ever use to describe these people and certainly don't in the book.

So telling the story right, and by right I mean in a way where the loved ones of these people didn't feel disrespected, where the community itself of Portsmouth in southern Ohio and Appalachia in general didn't feel disrespected. This is a region that's been maligned so many times in popular culture, in the press. I was well aware that I was the caricature of the east coast journalist driving in from out of town. I didn't want to be one of those people who just looked down his nose at this place and maybe went once or twice and then went home to write a story that fell into some of the worst tropes. So yes, I took the responsibility, the task of writing about these victims really seriously and I tried to speak with as many of their loved ones as I could and get as much detail about their lives as they could. Not just their tragic final moments but also who they were as happy, healthy people because that's an important part of their story too. So yes, that was really important to me.

Erin Welsh

One of the key aspects of this story, and it's something that we've kind of touched on already, is that it's not just one rogue doctor taking advantage of a broken system. Along Volkman's journey are so many individuals and organizations that are complicit in this, enabling him. Like the pharmacist Fletcher that you mentioned who filled Volkman's suspect prescriptions, like the manufacturers of the meds who lied about their addictive potential, like corrupt officials who turned a blind eye to the pain clinic, like the system that allowed an unqualified person to operate a cash only pain clinic in the first place. And we already asked this kind of unanswerable question of why did it take so long, and I suspect that this is part of it is that there were so many moving parts, for Volkman's crimes to eventually not just come to light but be actually dealt with. But the question that I want to ask is what measures have been put into place to prevent this or at least reduce the chances of this happening again? And where is there oversight potentially still lacking?

Philip Eil

I'm speaking to you from Portsmouth, Ohio now where I'm here for a book tour. And at both the city level, Portsmouth is where most of the events of the book took place, and the state level, they passed laws to close loopholes that clinics like this exploited. There are laws on the books now where I think it's according to the city ordinance owners of the clinic have to be doctors or involved in the medical field, clinics need to be affiliated with a local hospital or educational institution. Just those two things right there would have made a clinic like this impossible. I believe at the state level Ohio was one of the few states that passed a so called Pill Mill Bill, Florida was another, I think Tennessee was another. Coincidentally this law was signed a couple weeks after Volkman's trial ended, that just happened that way. So the state was well aware of issues around pain clinics and the Ohio State legislator voted unanimously, which is not super common, to pass this bill, putting a lot more oversight on clinics like this.

What's interesting is that was in 2011. But if you go back to the 90s, a lot of state legislatures passed laws making it easier for doctors to write opiate scripts. And whether these were genuine responses to the kind of cultural shifts we talked about earlier or whether there was like Purdue Pharma lobbying behind the scenes for such a law, I don't know. But Ohio was one of those states and I know this because Volkman, as part of his story of what he tells, was that he was following the Ohio Intractable Pain Act to a T. And he felt because he was following the state law, which by the way I don't think he was actually following, the DEA should have never come in and did what they did. So there are laws on the books in Ohio and elsewhere that prevent clinics like this from happening. That's in some sense the good news.

I mean the not so good news is that we now know cracking down on the flow of prescription medications did not end the opiate epidemic, it just prompted a shift in the opiate epidemic initially to heroin and now to the horribly dangerous fentanyl. And we saw deaths... I mean recently thankfully there's been a leveling off and a dropping of fatal overdose numbers at the state level and nationally. But for many years, including through to the pandemic, those numbers of fatal overdoses just kept climbing up and up and up. So that is one thing I would say in terms of areas for oversight, and then there were whole sections of the book about the DEA that wound up on the cutting room floor. The Washington Post and 60 Minutes have done some great reporting on ways the DEA could have done better with the opiate epidemic. The culture of kind of revolving door between officials at the DEA and the pharmaceutical industry and the negative effects that that has, the refusal of the DEA to lower the national quotas for opiate manufacturing.

There's a scathing report by a Republican Attorney General in West Virginia pointing at the DEA's refusal to... The DEA, among its other responsibilities, basically decides how much of a given controlled substance the entire country needs via these kind of manufacturing quotas. And even when alarm bells were going off well into the opiate epidemic and people were pleading with them to lower the quotas knowing that simply the downstream effects of more opiates would be bad on the ground level, they didn't do that. And if folks want some interesting reading, the West Virginia Attorney General's report is remarkable. He says again a guy in a red state, a law enforcement official, that people died as a result of that. But the DEA is just one area.

I mean the FDA fell asleep on the job, that's portrayed in stories about OxyContin. Academic medicine has a lot to answer for. The causes of this man made crisis are numerous. One thing I often mention is that I focus on a doctor who was convicted and I'm not here to say Volkman didn't deserve to be convicted, I think he did. But if you zoom out, you see that dozens, hundreds of doctors were convicted of criminal activity but very, very few drug distributors or pharmaceutical companies faced criminal charges. Of course they've been sued to the ends of the earth and back and they've paid out enormous amounts. But again, very few of them faced real criminal charges.

So I think the opiate epidemic is a story... I mean yes, doctors are white collar crime but there's kind of white collar crime above them that really didn't get prosecuted. And it makes me think of the financial crisis where virtually no one faced criminal charges for this massive man made crisis. So I think one of the lessons of the opiate epidemic is I came away thinking we really don't take white collar crime all that seriously in this country. And there were people and organizations higher up in the chain than doctors who probably deserve some of that.

Erin Welsh

Going back to Volkman specifically, what lasting impact do you think that he has had on medicine, on Portsmouth, on how prescriptions are regulated? Like how much did he impact those things or maybe just a broader question of what can we learn from Volkman's story?

Philip Eil

In some ways this case stands out for reasons I described because it took place in one of the worst hit areas of the country for the opiate epidemic, because of Volkman level of high education, the MD, the PhD, because of the sentence. But in many ways he was just one of many doctors. And that was what interested me about this story. As a reader and as a writer, I am drawn to stories that tell a bigger story through the individual particulars of one case. And another thing that I'm not sure I've mentioned is that Volkman, as part of his staunch insistence on his innocence, refused to take a plea deal which was unlike most of the other charge doctors. Some of them went to trial but most of them did not. But he did. And so there were 70 prosecution witnesses called and 10 defense witnesses in this trial, it took place in Federal Court over eight weeks in Cincinnati in 2011. And as a result, there was a 4000 page transcript that I ultimately got my hands on that was just invaluable to me in writing this story.

So again, one of the reasons this case stands out is because we can see it all the more clearly because of that testimony that took place in open court, all of which by the way is a result of Volkman's arrogance and insistence that he was right. Like there's so many ways where I as a storyteller benefited from his arrogance because he was willing to speak to me at length, because he refused a plea deal. It's kind of ironic or something that his story got told in so much more granular detail because of his own kind of belligerence.

Not to be too cute about it but maybe this is old news to your listeners, but I learned or at least on a gut level I will never forget that Volkman's brilliant test scores and intelligence and educational pedigree did not prevent him from doing heinous things. And if anyone needs a reminder of that, that MD/PhDs from University of Chicago and high school valedictorians can commit awful crimes, well my book is an example of that. It's a lesson also in how a certain kind of psychology or a person with a certain kind of psychology can move through the world and the damage that that person can do. I mean one of the most, a couple of the most memorable conversations I had for this book were with Volkman's two adult children, both of whom wound up being estranged from him because he's kind of an impossible person to interact with.

Having said all that, one of the reasons I'm so excited to be on your podcast is because I didn't necessarily write the book because I knew what all the lessons would be to take away from it. I'm not an MD, I'm not a PhD, I'm not a pharmacist, I'm not a researcher. I told the story but I'm so eager for folks in those worlds to read the book, not just because I want people to read the book, and to apply their own experiences and their own knowledge and hear what they take away from it. So yeah, I have my own lessons that I learned from it but I wanna hear what people in med school say about it and people on state medical boards say about it and pharmacists. Because I think that again, that was one of the things that interested me about the story. It wove through malpractice and bankruptcy law and criminal law and pharmacies and medicine and there was just so much there that I could sink my teeth into. But I wanna hear what other people think about it.

TPWKY

(transition theme)

Erin Welsh

Phil, thank you so much for such an enthralling conversation. And to our listeners, if you find yourself wanting to know more about Volkman and his role in the opioid epidemic, check out our website thispodcastwillkillyou.com where I'll post a link to where you can find 'Prescription for Pain: How a Once Promising Doctor Became the Pill Mill Killer', as well as Phil's website. And don't forget you can check out our website for all sorts of other cool things including but not limited to transcripts, quarantini and placebo recipes, show notes and references for all of our episodes, links to merch, our bookshop.org affiliate account, our Goodreads list, a firsthand account form, and music by Bloodmobile. Speaking of which, thank you to Bloodmobile for providing the music for this episode and all of our episodes. Thank you to Lianna Squillace and Tom Breyfogle for our audio mixing. And thanks to you, listeners, for listening. I hope you liked this bonus episode and are loving being part of the TPWKY Book Club. A special thank you as always to our fantastic patrons, we appreciate your support so very much. Well until next time, keep washing those hands.