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The United States Judicial Panel on Multidistrict Litigation will hear arguments on November 29, 8 a.m. about a separate MDL for babies born opioid dependent. Location: U.S. Courthouse Room 9C, 9th floor, 500 Pearl St., NY,NY

Summary of issues follows below. Pre and day-of coverage encouraged.

Actions taken by a [legal-medical-child advocacy partnership](#) are calling into question exactly how best to craft a master-settlement agreement within Multi-District Litigation now being negotiated by a federal judge in Cleveland, Ohio relating to the growing number of opioid-dependent newborns resulting from America's synthetic opioid drug crisis.

A resolution to this issue might be decided on November 29 in New York.

The rate of children born who were repeatedly exposed to opiate drugs in utero is growing by seven percent a year, and that, according to medical experts is a conservative estimate. Thus, a coalition of attorneys and medical experts advocating on behalf of opioid-dependent infants born and afflicted with Neonatal Abstinence Syndrome (NAS) [are petitioning to have a new and separate legal track or MDL](#) created just for the long-term care of this special class of citizens.

[A growing number of suits](#) about this issue were filed in various states earlier this year. Several of the following class action suits in the courts indicated below were subsequently transferred to the *In Re National Prescription Opioid* MDL pending in Cleveland Ohio before Judge Dan A. Polster:

Filed: 2/26/18 *Tyler Roach obo Baby K.E.R. v. McKesson* (Louisiana Class)

Filed 2/28/18 *Derric and Ceonda Rees obo Baby T.W.B. v. McKesson* (Illinois Class)

Filed 3/2/18 *Walter and Virginia Salmons obo Minor W.D. v. Purdue* (West Virginia Class)

Filed 3/3/18 *Rachel Wood obo Baby O.W. v. Purdue* (Missouri Class)

Filed 3/16/18 *Melissa Ambrosio obo Baby G.A. v. Purdue* (California Class)

Filed 3/16/18 *Roxie Whitley obo Baby Z.B.D., Chris and Diane Denson obo Baby L.D.L., James and Teri Holland obo Baby A.C.H. v. Purdue* (Tennessee Class)

Filed: 3/21/18 *Darren and Elena Flanagan obo Baby K.L.F. v. Purdue* (Tennessee Class)

Filed 5/10/18 *Shannon Hunt obo Baby S.J. v. Purdue Pharma* (Maryland Class)

Because of the growing number of state class actions, a request was made to include a unique NAS Baby track within the existing MDL last May. This request was rejected by the federal Judge charged with control over the growing claims against opioid manufacturers and distributors.

[Now attorneys in these class actions](#) on behalf of NAS babies are asking the cases to be removed.

A more [recent class action suit in Niagara County, New York](#), that was removed to the USDC in the Northern District of New York, is expected to be tagged for the current MDL but attorneys will



oppose the removal to federal court as well. A remand motion is pending. See these specific cases and/or actions noted below:

Filed 5/9/18 *Erin Doyle obo Baby D.F. v. Actavis* (Ohio Class)

Filed 8/14/18 *Bobbi Lou Moore obo Baby R.R.C. v. Purdue* (West Virginia Class)

Filed 8/23/18 *Amanda Hanlon obo Baby C.E. v. Purdue Pharma* (New York Class)

On 8/24/18, attorneys other than us filed a Baby Complaint in Pennsylvania which has been tagged to go to the Ohio MDL; they have objected adopting the briefs we filed in *Doyle*.

On 9/20/18, we filed a motion with the Judicial Panel on Multi-District Litigation seeking the formation of an Opioid Dependent Baby MDL. It will be heard in NYC 11/29/18.

Now, these plaintiff attorneys are seeking [a separate MDL track for NAS babies](#), since these children and their caregivers will face a life-time of medical monitoring and specialized care because of opioid exposure in the womb. This action is set for consideration by the Judicial Plan for the MDL on November 29 in NYC.

The separate MDL would give NAS babies their own voice, it prevents competition between these children's needs and other government or hospital costs created by the opioid crisis, and it puts the financial responsibility for the hardships facing these children and their caregivers on Big Pharma, not on the nation's taxpayers or cash-strapped government budgets.

[Medical experts](#) Dr. Kanwaljeet S. Anand of Stanford University and Dr. Charles Wertz of West Virginia University argue that it is important to treat the NAS child as quickly as possible to promote the child's long-term growth and development. Non-profits, like the [organization Facing Addiction with NCADD](#), agree. [Testimony by these Doctors](#) document that the effects of opioid use during pregnancy increase the chances of premature births, low birth weights, growth retardation, and birth defects. The long-term impacts are DNA damage to the child, multiple physical and mental development defects, and the increased likelihood the child will be placed in foster care of some sort.

"There is an unprecedented epidemic of opioid addiction sweeping across the U.S.," said Dr. Anand. "Newborn babies are the most vulnerable citizens, their lives and developmental potential are disrupted by NAS, but arrangements for their short-term and long-term care have been ignored until now. These babies need strong advocacy and legal action to ensure that their rights are protected, and that they urgently receive essential medical care and rehabilitation. On average, one infant with NAS is hospitalized every hour in the U.S."

Named as defendants in the actions are an array of pharmaceutical manufacturers, distributors and retailers, all of whom netted billions of dollars due to unfair and deceptive trade practices that preyed on all Americans, including the unborn.

"As the parameters of the opioid epidemic are becoming clearer and clearer, it is clear a medical-legal-civic partnership is needed to insure the the long-term impact of this industry-created problem on children in the womb is addressed," said Medical Expert Brent Bell. "The current MDL seems [woefully inadequate](#) in giving these children their due. We must fight to change that."

Find out about these issues here: <http://opioidjusticeteam.com/opioid-infants/>