

NONPRECEDENTIAL DISPOSITION

To be cited only in accordance with FED. R. APP. P. 32.1

United States Court of Appeals

**For the Seventh Circuit
Chicago, Illinois 60604**

Submitted August 3, 2023*

Decided August 3, 2023

Before

AMY J. ST. EVE, *Circuit Judge*

THOMAS L. KIRSCH II, *Circuit Judge*

DORIS L. PRYOR, *Circuit Judge*

No. 22-2103

ALEXANDER D. CAMBRONERO,
Plaintiff-Appellant,

v.

CHRYSTAL MELI and CHERYL
JEANPIERRE,
Defendants-Appellees.

Appeal from the United States District
Court for the Eastern District of
Wisconsin.

No. 20-cv-1635-bhl

Brett H. Ludwig,
Judge.

ORDER

Alexander Cambronero, a Wisconsin prisoner, sued Cheryl Jeanpierre, a prison doctor, for deliberate indifference to his medical needs after she ended his prescription for gabapentin, which Cambronero took for chronic pain. The district court entered summary judgment for Dr. Jeanpierre, deferring to her decision to end the prescription

* We have agreed to decide the case without oral argument because the briefs and record adequately present the facts and legal arguments, and oral argument would not significantly aid the court. FED. R. APP. P. 34(a)(2)(C).

because Cambronerero had been caught with an alcoholic drink, and drinking alcohol while taking gabapentin can cause dangerous side effects. We affirm.

While Cambronerero was imprisoned at Waupun Correctional Institution, he complained of chronic wrist and back pain, and Dr. Jeanpierre prescribed gabapentin in September 2018. The following January, Cambronerero complained that he was still in pain. Dr. Jeanpierre diagnosed him with carpal tunnel syndrome and increased his gabapentin dosage. As a condition of that increase, Cambronerero signed a pain-management agreement prohibiting him from, among other things, using alcohol. In March, however, a guard found Cambronerero in the prison's greenhouse, holding an open cup of an alcoholic drink, and on April 5 he was convicted of possessing an intoxicant. *See* WIS. ADMIN. CODE § DOC 303.43.

The same day, Dr. Jeanpierre discontinued Cambronerero's gabapentin prescription because he had been caught with alcohol, which she believed violated the agreement, and because he had alternatives for pain relief—lidocaine cream, naproxen, and acetaminophen. But Cambronerero filed health services requests with Waupun's medical unit, asking for more gabapentin and insisting that he had not drunk any of the alcohol. Nonparty medical staff denied the requests because Cambronerero had been caught with alcohol. The following month, Dr. Jeanpierre left Waupun to work at a different prison.

Over the next year, Cambronerero repeatedly filed medical requests reporting that his medications were not helping his pain and requesting gabapentin. Nonparty medical staff again denied the requests and prescribed other treatments because of Cambronerero's conviction for possessing alcohol.

Dr. Jeanpierre temporarily returned to Waupun to fill in and saw Cambronerero one more time in September 2020. She requested approval from a medical-unit director to resume Cambronerero's gabapentin prescription but told him that the request would likely be rejected because of the alcohol. As predicted, the director denied the request, citing the conviction.

Cambronerero then sued a Waupun health-services manager (Chrystal Meli) and an unknown doctor (later identified as Dr. Jeanpierre) under 42 U.S.C. § 1983, alleging that they had acted with deliberate indifference to his medical needs in violation of the Eighth Amendment by canceling his gabapentin prescription. He also asserted that he had not breached the pain-management agreement because he had only possessed alcohol and had not drunk it. (Cambronerero also brought state-law negligence claims,

which he has abandoned on appeal, and he conceded that Meli was entitled to summary judgment, so we say no more on these topics.)

Dr. Jeanpierre moved for summary judgment. She conceded that Cambroneró's chronic pain constituted an objectively serious condition but argued that she had exercised her professional judgment in discontinuing the gabapentin. She attested that she did so because drinking alcohol while taking gabapentin can cause drowsiness and dizziness that would endanger Cambroneró and those around him, Cambroneró's possession of alcohol meant he was at significant risk of drinking it, and Cambroneró still had the non-gabapentin medications. She added that Cambroneró had also violated the pain-management agreement by possessing the alcohol. Cambroneró responded that summary judgment was not warranted because he did not drink the alcohol and because Dr. Jeanpierre knew that his other medications were ineffective.

The district court entered summary judgment for Dr. Jeanpierre, deferring to her medical judgment. Her decision to end the prescription warranted deference, the court explained, because Cambroneró had offered no evidence that minimally competent doctors would have responded differently and because Dr. Jeanpierre had reasonably inferred from his possession of alcohol that he was at risk of drinking it.

On appeal, Cambroneró argues that a reasonable jury could find that Dr. Jeanpierre acted with deliberate indifference because, he says, she knew that his other medications were ineffective but canceled his gabapentin prescription anyway.

To be liable for deliberate indifference, the defendant must have consciously known of and disregarded an excessive risk to the plaintiff. *Farmer v. Brennan*, 511 U.S. 825, 837 (1994). One way to establish the requisite mental state is to show that a doctor persisted in a course of treatment despite knowing that it was ineffective. *Thomas v. Martija*, 991 F.3d 763, 772 (7th Cir. 2021). This is Cambroneró's theory of relief.

But Cambroneró offered no evidence that Dr. Jeanpierre knew, at the time she discontinued his gabapentin, that the other medications were ineffective. Cambroneró points to his medical requests complaining about his pain and asking for changes to his medications. The only requests relevant to Dr. Jeanpierre would be from the two-month span after she ended his prescription and before she left Waupun. But Cambroneró provided no evidence that Dr. Jeanpierre saw these requests or was made aware of them by the staff members who replied to them. The only evidence suggesting otherwise is Cambroneró's declaration attesting that he believed that Dr. Jeanpierre knew his non-gabapentin medications were ineffective. But declarations must be based

on personal knowledge, not unsupported conclusory assertions. FED. R. CIV. P. 56(c)(4); *Simpson v. Franciscan All., Inc.*, 827 F.3d 656, 662 (7th Cir. 2016). Cambronero did not attest that he told Dr. Jeanpierre that he was still in great pain despite his other medications, and he states no other basis for his belief about what she knew. His declaration, therefore, amounts to speculation rather than competent evidence sufficient to raise a factual dispute about Dr. Jeanpierre's knowledge. *See Pulera v. Sarzant*, 966 F.3d 540, 550–51 (7th Cir. 2020).

Cambronero also contends that Dr. Jeanpierre's decision to take him off gabapentin was not owed deference because she based that decision not on her medical training but on a "personal view" that patients at high risk of drinking alcohol should not receive prescription medications like gabapentin. But, without evidence that no minimally competent professional would have responded similarly, the court correctly deferred to Dr. Jeanpierre. *See Pyles v. Fahim*, 771 F.3d 403, 409 (7th Cir. 2014). Dr. Jeanpierre attested—based on her medical education and experience—that she canceled the prescription because Cambronero had been found with alcohol, and taking gabapentin while drinking alcohol is dangerous. Cambronero offered no competent evidence that this reasoning is inconsistent with an exercise of medical judgment.

Additionally, Cambronero insists that Dr. Jeanpierre was not entitled to judgment because he simply possessed and did not drink the alcohol; therefore, he contends, Dr. Jeanpierre was wrong to say he violated the pain-management agreement. But § 1983 provides a cause of action for violations of the Constitution, not for violations of state law or administrative policies. *Hunter v. Mueske*, No. 22-1340, 2023 WL 4553391, *4 & n.1 (7th Cir. July 17, 2023). Whether Dr. Jeanpierre violated the prison policy embodied by the pain-management agreement is therefore irrelevant to Cambronero's § 1983 claim. *See id.* (rejecting argument that violation of prison policy, on its own, violated Eighth Amendment).

Finally, Cambronero contends that a reasonable jury could find that Dr. Jeanpierre caused him pain by canceling the prescription. But even if she did, she can be liable only if canceling the prescription constituted deliberate indifference to Cambronero's medical condition. *See Stockton v. Milwaukee County*, 44 F.4th 605, 614–15 (7th Cir. 2022). And, as we have explained, it did not: Dr. Jeanpierre canceled the prescription based on her medical judgment that taking gabapentin while drinking alcohol is dangerous and specifically considered that Cambronero had other pain medications. And Cambronero lacks evidence that Dr. Jeanpierre knew that those other medications were ineffective.

AFFIRMED