Atomic General Asks Congress to End Patient Protections

Despite unequivocal statements of support for medical cannabis by Donald Trump as a candidate, his administration is attempting to end the limited protections Congress created in 2014 and has renewed each year since.

Attorney General Jeff Sessions sent a letter to congressional leaders in May, urging them to scrap the bipartisan amendment which prohibits the Department of Justice from interfering with state medical cannabis programs. The letter was made public by Tom Angell of Massroots.com and confirmed by others.

Sessions said that: “I believe it would be unwise for Congress to restrict the discretion of the Department to fund particular prosecutions, particularly in the midst of an historic drug epidemic and potentially long-term uptick in violent crime.” This concern runs counter to all evidence, as public health research has shown that opiate overdoses decrease substantially in states that enact medical cannabis laws, and no nexus between distributing medical cannabis and crime has been identified. In fact, a study by the Los Angeles police chief found that dispensaries attract less crime than banks.

Sessions also claimed that “[t]he Department must be in a position to use all laws available to combat the transnational drug organizations and dangerous drug traffickers who threaten American lives.” Yet state medical cannabis laws are all designed to prevent any involvement by organized crime.

A spokesman for the amendment’s lead sponsor, Rep. Dana Rohrabacher (R-CA), said “Mr. Sessions stands athwart an overwhelming majority of Americans and even, sadly, against veterans and other suffering Americans who we now know conclusively are helped dramatically by medical marijuana.”

Mexico’s President Approves Safe Access

On June 19, President of Mexico Enrique Peña Nieto enacted a bill making medical use of cannabis legal in the country. The bill passed 374-7 in Mexico’s lower house at the end of April. It passed the country’s senate in December on a vote of 98-7.

The Secretary of Health, Dr. José Narro Robles, stated on Twitter “I welcome the adoption of the therapeutic use of cannabis in Mexico.”

The bill authorizes the Health Ministry to create regulations for producing low-THC cannabis products for patient use. The new law allows only one percent THC or lower. Cannabis cultivation for medical and scientific purposes will be legal. A regulatory framework for patient eligibility and use, as well as cannabis cultivation and distribution is expected within a few weeks.

In the past year, courts in Mexico have granted to a handful of individual patients the legal right to cultivate and use cannabis. This is the first change to law or policy on medical cannabis.

Greece Announces Medical Cannabis Access

In a press conference at the end of June, the Prime Minister of Greece, Alexis Tsipras, announced that his will become the sixth European country to allow medical use of cannabis. Greece will down-schedule cannabis to allow doctors to prescribe it for a variety of medical conditions.

“From now on, the country is turning its page, as Greece is now included in countries where the delivery of medical cannabis to patients in need is legal.” Mr Tsipras was reported as saying at the press conference.

No plans for cultivation or distribution have been announced, but import of cannabis products from the Netherlands or elsewhere could begin soon. Other countries in Europe that recognize medical use are the Czech Republic, Finland, the Netherlands, Portugal and Spain.

The Rohrabacher-Farr amendment, as it has been named in prior versions, has passed by larger bipartisan margins each year since 2014. With the retirement of Rep. Sam Farr (D-CA), Rep. Earl Blumenauer (D-OR) has taken his spot as lead Democrat sponsor.

More than 9 out of 10 Americans believe medical cannabis should be legal, with an April Quinnipiac poll pegging support at 94 percent. Almost 3 out of 4 voters also said they disapprove of federal enforcement in states that have made cannabis legal.

PFC Debuts Online Training with the Univ. of Maryland

On June 22, ASA’s Patient Focused Certification (PFC) Training Program unveiled its new training platform, developed with the University of Maryland School of Pharmacy. The partnership between PFC and the university’s Center for Innovative Pharmacy Solutions (CIPS) will be the first cannabis training program to be offered through a university and accredited. The partnership will extend the reach of the PFC training program by making courses available through the university’s online learning platform at www.pfctraining.org.

“The University of Maryland School of Pharmacy is responding to the urgent need for a knowledgeable and well-prepared medical cannabis workforce,” said Magaly Rodriguez de Bittner, PharmD, the executive director of CIPS. “The School of Pharmacy’s partnership with ASA uses our online educational technology to meet the training needs of medical cannabis industry employees and advocates in 30 states, the District of Columbia, Guam and Puerto Rico. Through this partnership, we seek to promote medication safety through training and ultimately educate healthcare providers on the consideration of medical cannabis in treatment decisions.”

PFC is a project of ASA that builds on the organization’s experience educating the medical cannabis industry since 2002. The certified training courses cover best practices and regulatory guidelines for the industry, including cultivators, manufacturers, dispensaries and labs. Regulators, operators and industry work-continues, page 2
ASA Activist Profile: Frank Buress, Wisconsin

You have 72 hours to start anti-virus medicine after the shingles rash appears. Miss that window, and your odds of developing painful post-herpetic neuralgia skyrocket. That’s what happened to Frank Buress, whose case of shingles was so severe, covering every bit of his body but the palms of his hands, soles of his feet, face and his genitals, that his doctor misdiagnosed it as hives. When they figured out the diagnosis, it was too late, and the excruciating nerve condition set in and has plagued him for more than 15 years since.

His doctor in Wisconsin was sympathetic, prescribing a raft of opiate painkillers to deal with the condition, including Percocet, Fentanyl, oxyContin, and oxycodone, until Frank was up to 540 morphine equivalents a day – enough to kill a horse.

In 2014, Frank went to the pain rehab program at the Mayo Clinic to learn new ways to cope with pain. The meditation, guided imagery, biofeedback and relaxation techniques all helped distract him from the constant pain but did not really reduce it.

Then last June, he was diagnosed with cancer of the colon and the kidney, a growth on his lung, and six basal cell carcinomas on his chest. Doctors recommended removal of his sigmoid colon, to be followed by ablation on his kidney because it could not be treated with chemo or radiation due to stage 4 renal disease.

That’s when Frank moved to Portland, Oregon for 90 days to try medical cannabis. Once registered, he went on the Rick Simpson Oil (RSO) protocol, starting with 5mg of 3% THC three-times a day, doubling every four days until he was using 70% THC at 1000mg a day. The effects were dramatic.

“The amazing piece was that after day three, the pain was gone,” said Frank. “I’d been over 10 years with pain. It wasn’t distracted by the cannabis. The pain was just plain gone.”

Frank began to study up on opiates, learning the history of how Purdue Pharmaceuticals had pushed oxyContin as a panacea for pain, and the consequences. Out of that, Frank created a presentation on alternatives to opioids that covers what he learned at Mayo plus the medical cannabis option. He’s shown it to the local Criminal Justice Coordinating Council, and is scheduled to make presentations to the Governor’s State Council on Alcohol and Other Drug Abuse Prevention Committee and Intervention and Treatment Committee.

Frank is hoping to see Wisconsin join the 30 states and District of Columbia in creating a robust program that will give him access to the only medicine that gives him relief.

ACTION ALERT: Urge Congress to Renew Protections

Your Members of Congress need to hear from you today. The ONLY thing protecting state medical cannabis programs from Attorney General Session’s Department of Justice is an amendment to the Commerce, Justice, Science and Related Agencies budget. Since 2014, the Rohrabacher-Farr Amendment has barred the DOJ from spending money interfering with state medical cannabis programs, including prosecuting patients and providers. But it has to be renewed each year, and the Attorney General has urged Congress not to. That’s why Congress needs to hear from you.

Contact your members of Congress TODAY and ask them to ensure that protections for state medical cannabis programs are in the budget for fiscal year 2018 at SafeAccessNow.org/cjsamendment.

JOIN TODAY!

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California Program Changes

California’s effort to craft regulations for both medical and adult-use cannabis was transformed at the behest of the governor. An omnibus “trailer bill” attached by Gov. Jerry Brown to the state’s budget, unifies cannabis licensing and regulation as one bill – the Medicinal and Adult-Use Cannabis Regulation and Safety Act (MAUCRSA), was passed by the legislature and signed into law late last month. The changes it includes reflect feedback from patient advocates and cannabis industry lobbyists.

The new law creates a more uniform approach that benefits patients, as the separate medical and adult-use laws had created discrepancies between the two. The new, parallel structure eliminates inconsistencies which had left the medical side more restricted than adult-use. The same license types will now be available for both.

Business licensing is generally less segmented, with individuals and organizations no longer limited on the number of services they can provide. That will allow vertical integration from seed to sale. The state residency restriction on licensees has also been eliminated, as has the license for transporters.

Perhaps most importantly for patients, the new law enshrines consumer protections by mandating that manufacturers and vendors test cannabis products and report the results. It also preserves the sales tax exemption for patients with the voluntary state medical cannabis ID card. The bill creates a new type of collective for small cultivators to allow for sharing of resources, replacing the old SB-420 coop and collective model.

Under the new law, cannabis businesses will still have to obtain both a local license and a state license. The 15% state excise tax will still apply to both medical and adult-use, as will the cultivation tax of $9.25 an ounce.

The scope of the changes mean most of the draft regulations have to be withdrawn, revised and reissued for another public comment period. With a statutory deadline of January 2, 2018, time is short.

PFC continued from page 1