

September 13, 2016

Dear Marin Health Care District Board Members,

On behalf of Americans for Safe Access (ASA), I am writing to offer our endorsement of the resolution proposed by Dr. Larry Bedard, entitled “Inpatient use of medicinal cannabis at Marin General Hospital.” The resolution would have the board request that Marin General Hospital develop policies allowing physicians to recommend medical cannabis and patients to use the therapeutic substance as inpatients at the hospital.

ASA supports the resolution because California state law already gives physicians the right to recommend medical cannabis. Federal courts have upheld this right as protected speech under the First Amendment in the decision of *Conant v. Walters*.¹ Additionally, the U.S. 9th Circuit has held that the Rohrabacher-Farr amendment to the U.S. Department of Justice’s budget prohibits the prosecution of conduct that is legal under state medical cannabis law.²

Not only is this resolution legally permissible, it is good health care policy. It is potentially dangerous for hospitals to compel their patients to interrupt their medical cannabis therapy. In addition, studies have shown that medical cannabis states have nearly 25% fewer opioid overdose fatalities. Studies have also shown that access to medical cannabis can lower or eliminate a patient’s need for opioids. Not allowing patients to use medical cannabis to treat their pain, would result in a greater use of opioids, placing them at a higher risk for addiction as well as fatal opioid overdose. Additionally, hospitals that prohibit patients from using their medical cannabis during their hospital stay, de-incentivize them from seeking treatment for their serious medical issues. Patients should not be forced to give up one form of necessary medical therapy simply to have access to hospital services.

Marin General Hospital would not have to pioneer such guidelines, as hospitals in other countries have already developed guidelines and policies for medical cannabis use. For

¹ 309 f.3d 629 (9th cir. 2002).

² “We therefore conclude that, at a minimum, § 542 prohibits DOJ from spending funds from relevant appropriations acts for the prosecution of individuals who engaged in conduct permitted by the State Medical Marijuana Laws and who fully complied with such laws.” *U.S. vs. McIntosh*, Court of Appeals, 9th Circuit, filed August 16, 2016, available at: <https://cdn.ca9.uscourts.gov/datastore/opinions/2016/08/16/15-10117.pdf>.

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example, the Israeli Ministry of Health has developed a document, entitled “Medical Cannabis - Clarifications and Guidelines for Possessing and Using during Hospitalization.”³ These guidelines could serve as the basis for a policy developed by and tailored to Marin General Hospital.

To be clear, none of the aforementioned legal protections or policy suggestions would *require* physicians at Marin General Hospital to make medical cannabis recommendations. Rather, they would give doctors an additional tool in their toolbox to use when they feel medical cannabis therapy would be appropriate for a particular patient and allow current medical cannabis patients to continue this therapy without interruption.

We strongly urge the board to adopt the medical cannabis resolution offered by Dr. Larry Bedard.

Sincerely,

Michael Liszewski
Government Affairs Director

³ Available at:

https://american-safe-access.s3.amazonaws.com/documents/israeli_ministry_of_health_hospital_guidelines_for_cannabis.pdf.

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