



Compassionate Access to Cannabis Should be Inclusive *Support Senate Bill 269*

Seriously ill patients who are properly authorized would be included in the Compassionate Use Program and could use/possess an allowable amount of cannabis or grow a limited amount in a secure location.

Cardholding medical cannabis patients would have to have one of the specifically listed debilitating medical conditions, a written certification by their medical practitioner, and formal authorization by the Department of Public Safety.

Medical practitioners could recommend cannabis to a qualifying patient, and would work with the patient to determine the best CBD:THC ration for each unique individual and their medical condition.

Independent laboratories would be licensed and regulated, providing consumer protection with regard to potency and contaminants. Labeling and packaging requirements promote safety.

Cannabis business licensing fees would be capped at a reasonable price, protecting small business access to the market and patient access to cannabis medicine.

Voters support allowing the compassionate use of medical marijuana

76% percent of Texas voters,¹ and the vast majority of Americans, believe seriously ill patients should be allowed to use marijuana medicinally if their doctors recommend it.² The government should not get between a patient and a doctor.

62% of Americans live in a state or district with medical marijuana

Currently 28 states, including conservative states like Arkansas, North Dakota, Arizona, Montana, Nevada, and New Mexico — as well as the District of Columbia — have workable laws that protect medical marijuana patients from criminal penalties.³ Texas is not included in this number because its law has a fatal flaw — it requires doctors to illegally “prescribe” marijuana and, like 15 other states, its law is limited to low-THC preparations.

¹ <http://texasresearch.org/poll/ut-tt-feb-15-poll>

² Quinnipiac University Poll, June 6, 2016, https://poll.qu.edu/images/polling/us/us06062016_Unru52x.pdf/

³ <http://www.ncsl.org/research/health/state-medical-marijuana-laws.aspx>

The medical community recognizes the importance of access

Medical marijuana is proven to be effective in the treatment of a variety of debilitating medical conditions. In its 1999 report, the National Academy of Sciences' Institute of Medicine reported, "Nausea, appetite loss, pain and anxiety are all afflictions of wasting, and can be mitigated by marijuana." Many other medical organizations and physicians have recognized marijuana's medical benefits,⁴ including:

- The Epilepsy Foundation
- The American Nurses Association
- The American Public Health Association
- The Leukemia & Lymphoma Society
- Arthritis Research Campaign
- The Lymphoma Foundation of America
- The American College of Physicians
- The National Nurses Society on Addictions
- Texas Nurses Association
- The majority of doctors responding to WebMD survey in 2014.⁵

In 2013, the Texas Medical Association told KVUE News:

TMA policy supports the physician's right to discuss with his or her patients any and all possible treatment options related to the patient's health and clinical care (including the use of marijuana) without the threat to physician or patient of regulatory, disciplinary, or criminal sanctions.⁶

Marijuana is less harmful than many prescription medications

According to the Centers for Disease Control and Prevention (CDC), drug overdose death rates in the United States have more than doubled between 1999 and 2013.⁷ In 2013, over 22,500 people died in the U.S. from drug overdoses related to pharmaceuticals.⁸ By contrast, medical marijuana is a safer alternative and can even reduce reliance on prescription painkillers. No one has ever fatally overdosed on marijuana.⁹

Medical cannabis access for patients with debilitating conditions is not a partisan issue

Both Texas Republicans and Democrats include in their party platforms a call upon the Texas Legislature to improve the Compassionate Use Act to allow doctors to determine the appropriate use of cannabis.

⁴ <https://www.mpp.org/issues/medical-marijuana/medical-marijuana-endorsements-and-statements-of-support/>

⁵ R. Scott Rappold, "Legalize Medical Marijuana, Doctors Say in Survey," WebMD website, April 2, 2014, <http://www.webmd.com/news/breaking-news/marijuana-on-main-street/20140225/webmd-marijuana-survey-web>

⁶ Mark Wiggins, "Lawmaker hopes 6th time's the charm for medical marijuana bill," KVUE, January 24, 2014, <http://mychronicrelief.com/texas-lawmaker-tries-again-for-medical-marijuana-bill/>

⁷ Centers for Disease Control and Prevention. National Vital Statistics System mortality data. (2015) Available from URL: <http://www.cdc.gov/nchs/deaths.htm>.

⁸ *Id.*

⁹ Collen. "Prescribing Cannabis for Harm Reduction," *Harm Reduction Journal*, 2012, <http://www.harmreductionjournal.com/content/9/1/1>, citing Carter GT, Flanagan AM, Earleywine M, Abrams DI, Aggarwal SK, Grinspoon L, "Cannabis in palliative medicine: improving care and reducing opioid-related morbidity," *Am J Hosp Palliat Care*, 2011, 28: 297-303.