

S. 683 CARERS Act

August 2015



The Drug Policy Alliance supports S. 683 Compassionate Access, Research Expansion, and Respect States (CARERS) Act, which would affirm the right of states to set their own medical marijuana policies, reschedule medical marijuana to Schedule II, enable access to CBD oil, allow banks to provide financial services to marijuana dispensaries, permit VA physicians to recommend medical marijuana to veterans, and eliminate barriers to medical marijuana research.

The majority of states allow for some form of medical marijuana use

- Public support for medical marijuana is overwhelming: a 2015 CBS News poll found 84 percent support for legalizing marijuana for medical use.¹
- 23 states, the District of Columbia and Guam already have comprehensive medical marijuana programs, and an additional 16 states allow cannabidiol (CBD), but all forms of medical marijuana remain illegal under federal law.²
- Currently, patients who use medical marijuana in compliance with state law are at risk of federal prosecution, as are producers, dispensary owners and employees.
- The CARERS Act affirms the right of states to set and maintain their own medical marijuana laws by amending the federal Controlled Substances Act (CSA) to exempt individuals compliant with their state medical marijuana laws from federal prosecution under the CSA.
- The CARERS Act would NOT mandate that states have a medical marijuana program or change existing state laws on marijuana.

All forms of medical marijuana are currently prohibited under federal law

- As a Schedule I drug under the federal CSA, marijuana is categorized as having a high potential for abuse and NO accepted medical use.
- The CARERS Act would reschedule marijuana from Schedule I to Schedule II, allowing for potential regulated medicinal uses of marijuana components.
- The CARERS Act would exclude CBD from the definition of marijuana under the CSA. CBD is a non-psychoactive medical marijuana compound used to treat severe pediatric seizures. CBD is legal in 37 states but produced in only a few. Current law does not allow for CBD transport across state lines, forcing families of children with severe epilepsy who do not reside in CBD-producing states to forgo treatment – or go to incredible lengths while risking federal prosecution.

Federal barriers create unnecessary risks to public safety and limits on research

- State-legal medical marijuana businesses are prevented from accessing banking services, forcing them to operate as cash-only businesses and putting public safety at risk. The CARERS Act would allow banks to provide financial services to state-legal medical marijuana dispensaries, keeping businesses well-regulated and communities safe.
- Marijuana's classification as a Schedule I drug creates an onerous research permit approval process. Bureaucratic approvals and barriers prevent academics from advancing our medical knowledge by studying medical marijuana.
- The CARERS Act would eliminate barriers to research by reclassifying marijuana as a drug subject to less stringent research restrictions and

ending NIDA's monopoly on production of marijuana for research purposes.

Medical marijuana has proven therapeutic applications and is supported by leading health organizations

- Numerous studies have demonstrated the therapeutic benefits of medical marijuana to treat or manage the symptoms of serious conditions, including chemotherapy-induced nausea,³ HIV/AIDS,⁴ epilepsy,⁵ chronic pain⁶ and multiple sclerosis.⁷
- These findings substantiate the conclusions of the Institute of Medicine of the National Academy of Sciences. Researchers found a substantial consensus among experts that medical marijuana can be used to treat nausea, appetite loss, pain and anxiety, among other conditions.⁸
- Access to medical marijuana for people with certain conditions is supported by public health groups and professional associations, including the American Public Health Association,⁹ the American Nurses Association,¹⁰ the Epilepsy Foundation¹¹ and the National Association for Public Health Policy.¹²

¹ CBS News, "Poll: Support for legal marijuana use reaches all-time high," April 8-12, 2015 (accessed May 28, 2015), <http://www.cbsnews.com/news/poll-support-for-legal-marijuana-use-reaches-all-time-high/>.

² National Conference of State Legislatures, "State Medical Marijuana Laws, last modified July 20, 2015," (accessed August 5, 2015), <http://www.ncsl.org/research/health/state-medical-marijuana-laws.aspx>. In May 2015, the Governor of Puerto Rico issued an executive order legalizing medical marijuana derivatives. The order has not yet been implemented.

³ See for example, F. C. Machado Rocha et al., "Therapeutic Use of Cannabis Sativa on Chemotherapy-induced Nausea and Vomiting Among Cancer Patients" *European Journal of Cancer Care* 17 (2008): 431-433; Gil Bar-Sela et al., "The medical necessity for medicinal cannabis: prospective, observational study evaluating the treatment in cancer patients on supportive or palliative care," *Evidence-Based Complementary and Alternative Medicine* 2013(2013); Suzanne Johannigman and Valerie Eschiti, "Medical Use of Marijuana in Palliative Care," *Clinical Journal of Oncology Nursing* 17, no. 4 (2013).

⁴ Margaret Haney, Judith Rabkin, Erik Gunderson, Richard W. Fulton, "Dronabinol and Marijuana in HIV(+) Marijuana Smokers: Acute Effects on Caloric Intake & Mood," *Psychopharmacology (Berl)* 181,(2005): 170-178; E. Woolridge, S. Barton, J.Samuel, et al., "Cannabis Use in HIV for Pain and Other Medical Symptoms," *Journal of Pain Symptom Management*, 29, (2005), 358-367.

⁵ See for example, David Gloss, Barbara Vickrey, "Cannabinoids for Epilepsy," *Cochrane Database of Systematic Reviews*, 6, 2012; Brenda E Porter and Catherine Jacobson, "Report of a parent survey of cannabidiol-enriched cannabis use in pediatric treatment-resistant epilepsy," *Epilepsy & Behavior* 29, no. 3 (2013): 574-77.

⁶ See for example, Mark A. Ware et al., "Smoked Cannabis for Chronic Neuropathic Pain: A Randomized Controlled Trial," *Canadian Medical Association Journal* 182 (2010): 694-701; Igor Grant et al., "Medical marijuana: clearing away the smoke," *Open Neurology Journal* 6(2012): 18-25; B. Wilsey et al., "Low-dose vaporized cannabis significantly improves neuropathic pain," *J Pain* 14, no. 2 (2013): 136-48.

⁷ Paul F. Smith, "New Approaches in the Management of Spasticity in Multiple Sclerosis Patients: Role of Cannabinoids," *Journal of Therapeutics and Clinical Risk Management*, 6, (2010), 59-63; Jody Corey-Bloom et al.,

Veterans face unfair discrimination and limits on their access to medical marijuana

- Currently Veterans Administration (VA) providers are prohibited from completing forms seeking recommendations or opinions regarding a veteran's participation in a state medical marijuana program. The CARERS Act would allow VA physicians operating in medical marijuana states to recommend that patients use medical marijuana.¹³
- Even in states where medical marijuana is legal and civilians may obtain medical marijuana recommendations, veterans cannot discuss the benefits of treatment with their VA physicians. Veterans deserve the same access to treatment that civilians already hold, and the federal government should not stand in the way.¹⁴
- A 2014 study showed that those using medical marijuana experienced a 75 percent reduction in PTSD symptoms.¹⁵ Many veterans suffer from PTSD, and although ample evidence indicates medical marijuana effectively treats symptoms,¹⁶ current prohibition deters veterans from pursuing this treatment option. The CARERS Act would ensure our veterans have full access to this safe and effective treatment for PTSD and other wounds of war.

"Smoked cannabis for spasticity in multiple sclerosis: a randomized, placebo-controlled trial," *Canadian Medical Association Journal* 184, no. 10 (2012): 1143-50.

⁸ Janet E. Joy, Stanley J. Watson, Jr., and John A. Benson, Jr., *Marijuana and Medicine: Assessing the Science Base*, Division of Neuroscience and Behavioral Research, Institute of Medicine (1999).

⁹ "[The APHA] encourages research of the therapeutic properties of [cannabinoids] and ... urges the Administration and Congress to move expeditiously to make cannabis available as a legal medicine," The American Public Health Association, *Access to Therapeutic Marijuana/Cannabis, Resolution 9513* (Washington, DC: Author, 1995).

¹⁰ "The American Nurses Association actively supports patients' rights to legally and safely utilize marijuana for symptom management and health care practitioners' efforts to promote quality of life for patients needing such therapy," American Nurses Association. *In Support of Patients' Safe Access to Therapeutic Marijuana* (Washington, DC: 2008).

¹¹ "The Epilepsy Foundation supports the rights of patients and families living with seizures and epilepsy to access physician directed care, including medical marijuana," Epilepsy Foundation. *Epilepsy Foundation Calls for Increased Medical Marijuana Access and Research* Washington, DC: 2014.

¹² "The federal government's unwillingness to allow the legal, medical use of marijuana is a direct affront to the U.S. public's health," National Association for Public Health Policy, *Position Paper on Medicinal Marijuana* (Reston, Virginia: Author, 1998).

¹³ Department of Veterans Affairs, "VHA Directive 2011-004: Access to Clinical Programs for Veterans Participating in State-Approved Marijuana Programs," (Washington, DC: January 31, 2011).

¹⁴ Drug Policy Alliance, *Healing a Broken System: Veterans and the War on Drugs* (New York, 2012), 12-14.

¹⁵ GR Greer, CS Grob, AL Halberstadt, "PTSD symptom reports of patients evaluated for the New Mexico Medical Cannabis Program" *Journal of Psychoactive Drugs* 46 (2014):73-7.

¹⁶ Torsten Passie et al., "Mitigation of post-traumatic stress symptoms by Cannabis resin: A review of the clinical and neurobiological evidence," *Drug Testing and Analysis* 4, no. 7-8 (2012): 649-59; Pablo Roitman et al., "Preliminary, Open-Label, Pilot Study of Add-On Oral Δ9-Tetrahydrocannabinol in Chronic Post-Traumatic Stress Disorder," *Clinical drug investigation* 34, no. 8 (2014): 587-91.