



Medical Marijuana—The Patient Connection

- 1) Why Medical Marijuana is important to me.
 - A. Marijuana saves lives and reduces harm. Patients matter. Safety matters. Our community matters.
 - B. My son, Jack Splitt
 1. Severe spastic quadriplegic cerebral palsy, severe dystonia, severe pain, anxiety, dependency on wheelchair and equipment, life support for lung failure, PTSD from repeated invasive medical procedures, pain and life-long extended hospitalizations.
 2. Pharmaceuticals (benzodiazepenes) were marginally effective with life-threatening side effects which destroyed all quality of life (organ damage, harmful drug interactions and extreme sedation).
 3. Removed from school for legal medical marijuana use
 4. Jack's Amendment to the Caregiver's Act in 2015, Jack's Law in 2016 to allow medical marijuana use in school.
 5. CannAbility Foundation formed to serve families who seek safe access to medical marijuana treatment for their medically fragile/disabled children, by providing advocacy, education, resources and support.
 - a. Hundreds of families successfully treating with medical marijuana.
 - b. Stress of raising a special needs child—management of services and medical treatment
 - c. Quality of life
 - d. CANNABIS NURSES MAGAZINE ARTICLE highlights several children and pediatric issues; Doctors, nurses and mothers address the issues.
<http://cannabisnursesmagazine.com/category/july-august-cnm-2017/>
(this link will bring you to the page with CannAbility's story and several other pediatric cases by families, doctors and nurses)
- 2) Benefits of legalization
 - A. Access
 1. Life-saving medicine
 2. Variety of products to treat disease
 3. Dosable, quality controlled medicine
 4. Safe marketplace
 - B. Infrastructure
 1. Dispensaries: Medical and Recreational
 2. Caregivers
 3. Innovation and economy

- C. Education
 - 1. Marijuana as medicine/cannabinoid research
 - 2. Mainstream discussions debunking myths and stigma
 - 3. Platform for learning appropriate dosing/consumption
 - 4. Benefits and risks of consumption
 - 5. Underage consumption prevention
- 3) Caregiver Model
 - A. Patient chooses to assign the growing of their medical plants and/or the manufacture of their medicine from those plants to a caregiver.
 - B. Plant counts determined by physician based on medical need and delivery method (flower, concentrate/oil, tincture, salves, patches) *Those using concentrated oil need higher plant counts.
 - C. Option for high plant counts necessary in order to manufacture large quantities of oil (concentrate) in order to compensate for plant size variation, maintain strain variety, and ensure propagation and sustain constant availability of medicine.
 - D. Dispensaries provide variety of products, but due to the nature of a business model, can fall short for patients needing high quantities of oil and strain variation. Not cost effective for business to produce or patients to purchase.
 - E. Law enforcement needs more tools/education to be able to differentiate between criminal grows and legitimate patient grows in order to protect patients and stop black market criminals.
- 4) Why Recreational and Medical Models?
 - A. Patients with conditions not on the qualifying list to get a medical card through the CDPHE cannot use a Medical Dispensary.
 - B. Patients who do not qualify under CDPHE guidelines still need access to medicine, therefore must use a Recreational Dispensary.
- 5) Why THC/ Potency Limits are NOT the answer.
 - A. Medically, the state should not be in the business of determining medical dosing.
 - B. Patients need access to appropriate level of THC in order for the medicine to be therapeutic/treat their symptoms.
 - C. Patients cannot afford to buy higher quantities of lower THC medicine, nor can they simply consume more to get to the required level of THC and other cannabinoids for effective symptom relief.
 - D. Limiting THC does not address the core issue of overconsumption. Novice users need to understand the difference in potency levels in available forms of consumption, and what those options actually are (ie, "What is shatter? Is it stronger or weaker than flower?")
 - E. Enforceability is an issue. How? Time? Economic cost? Testing?
- 6) Solutions:
 - A. Enforce and continue to develop current regulatory infrastructure to legitimize and protect caregivers (Caregivers Act) by providing law enforcement the tools and education needed to protect patients and maintain community safety.
 - B. Access to testing of medical marijuana in all delivery models to ensure access to safe clean, dosable medicine.
 - C. Create public awareness campaign to educate consumers on dosage, potency, and method of consumption which protects children, patients and novice users. (Point of sale education?)

- D. When drafting marijuana policy, ensure stakeholder input is always comprised of relevant experts (patients, caregivers, growers, cannabinoid scientists, doctors, law enforcement, educators, nurses, doctors, researchers, advocates, regulatory agencies, etc).