

Personal comments about the debilitating medical conditions- advisory panel recommendations

This document represents my effort to analyze and report on the evidence base which surrounds the psychiatric uses of cannabis. It also presents my recommendations as to whether or not to add specified disease conditions to the list of debilitating medical conditions covered under the Oregon Medical Marijuana Act.

I have spent considerable time reading, thinking and writing and have been faced with a decision that in many ways is disagreeable. The *charge* given to me by the State Health Officer asks that “after thoroughly and objectively reviewing and evaluating the available evidence... each member is to advise the State Health Officer regarding whether or not the petitioned condition(s) should be included in the definition of “debilitating medical conditions” for purposes of the Oregon Medical Marijuana Act. “

This *charge* appears reasonable and prudent. But as the evidence has accumulated it has become apparent that there is a lack of high-grade research evidence such as double-blind randomized clinical trials to evaluate cannabis’ benefits.

This is in large measure due to a policy of the Federal government to disallow and block cannabinoid research, even decades after the 1982 release of Marijuana and Health by the Institute of Medicine. This inquiry made numerous recommendations for further research. Now, 18 years later the Institute of Medicine has again recommended research in Marijuana and Medicine: Assessing the Science Base. Practically no therapeutic research is occurring in the U.S.

None-the-less, there is a large and expanding body of research evidence based upon subjective accounts of efficacy, historical reporting and observation, that cannabis is being used therapeutically to treat psychiatric disorders. Since this is the research base available to me I decided to assign weight to the case reporting based upon it’s consistent historical prevalence while factoring the research which demonstrates adverse outcomes. This is far from scientifically rigorous. Additionally, the short time allowed to process, understand and write about this large amount of material has limited my ability to more deeply explore this subject.

I am thankful for the opportunity to consult in this matter. Still, I am somewhat uncomfortable with a decision-making process in which my recommendations could be used as justification to continue criminal penalties against ill and suffering people- whether their cannabis use is medically justified or not. Ill people belong in the medical system not the judicial system. A decision by the Oregon Health Division to disallow any

condition will result in patients being arrested and prosecuted for their cannabis use. As nurse in Oregon I must therefore express a conscience objection to this scenario as a violation of the nursing profession's Code for Nurses which says:

"The nurse provides services with respect for human dignity and the uniqueness of the client unrestricted by considerations of social or economic status, personal attributes, or the nature of health problems."

It is incomprehensible that nursing ethics support a position, which places patients within a criminal, rather than a medical context because they search for relief. Criminalizing any sick person in Oregon who uses cannabis does so.

Finally, it should be noted that the Oregon Health Division did not choose to implement this complicated law. The statute required them to do so. The Division has worked very hard to carry out the will of Oregon voters and has done more to protect sick Oregonians in this matter than either the Oregon Medical Association or the Oregon Nurses Association. Now there are indications that the Division is being pressured by some politicians for any decision, which may open legal protections to psychiatric patients who use cannabis.

Ultimately, the decision as to who may be allowed to register in the Marijuana Registry Program should, in my opinion, be based upon a patient and physician deciding that "it may mitigate symptoms" of the patient's disease. The People of Oregon made clear their desire that ill people who use small amounts of cannabis while under the care of a physician should be exempted from Oregon criminal sanctions.

My recommendations are, by necessity, weighted by that belief.

Edward Glick, RN

Date: March 28, 2000