

DRUG FREE AUSTRALIA

Position paper on medicinal cannabis

Position paper on medicinal cannabis 'Medical Marijuana' has been legally available in Australia since the mid-1990s, when the synthetic-THC capsule developed in the US called Marinol was imported into Australia under TGA Special Access for 100 patients. Marinol can be imported today under the same arrangement. Alternatively, the wholeleaf extract of cannabis, called Sativex, was approved by the Australian TGA in 2012 for MS spasticity

[1] Both medications are pharmaceutically standardised in terms of dosage, strength and purity, which crude cannabis products are not. Both of the above medications can be used for maladies where clinical trials have previously shown promise – nausea, AIDS wasting, chronic pain and MS spasticity. A third pharmaceutical medicine which is high in CBD, called Epidiolex, is currently being tested in the US and could be tested here under similar arrangements – CBD is the element within cannabis believed to be responsible for the relief of severe seizures in epilepsy-like syndromes for some sufferers, including children.

[2] Medicinal benefits' of cannabis are very, very slim with only (in reality) two or three products that have been thoroughly vetted and clinically trialled (not voted for) that only bring some relief and have zero curative properties.

They being, Epidiolex (4th line treatment for small category of epilepsy) and Sativex (or other brands) for nausea.

[3]. All other 'claims' have not been scientifically validated at all, and that's the research – not cherry picked. See Cannabis As Medicine?

<<https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.dalgarnoinstitute.org.au%2Findex.php%2Fresources%2Fcannabis-as-medicine&data=05%7C01%7C%7C875e7eb18cc54c06447208db7869d785%7C84df9e7fe9f640afb435aaaaaaaaaaaa%7C1%7C0%7C638236171241652291%7CUnknown%7CTWFpbGZsb3d8eyJWljojMC4wLjAwMDAiLCJQIjoiV2luMzliLCJBTil6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=sjCqG8UIhsFPq61pvQZLtr28yBRF2ps9Sc1oDUM4Ojs%3D&reserved=0>

[4]. Any thought of allowing patients to grow their own cannabis to cheapen costs must contend with the weighty issues of diversion of such cannabis for recreational use, as evidenced in those US States that have allowed homegrown cannabis. It is recognized that various medical treatments for cancer or other ailments can be prohibitively expensive for suffering Australians, and PBS subsidies make them available to those that need them. Our Federal government has allowed the licensing of Australian grown cannabis and manufactured cannabinoid medications, which may be cheaper than imported

medications. If it is argued that pharmaceutical cannabinoids manufactured here or overseas are expensive, Drug Free Australia has called on the Federal Government to make PBS subsidies available according to the same criteria as other needed treatments - if it can be demonstrated that significant numbers of Australians need and would use them.

[5] . Administration of cannabis to patients in such states will produce a short term relief of symptoms, albeit with an exacerbation of its many long term toxic effects, oncogenicity, and gateway effects in other drug use, and likely damage to adolescent brain development.¹⁻² It needs to be recognised that that many of the patients who are brought along to parliamentary inquiries, and who offer public testimony of the wonderful effects of cannabis are actually speaking from a background of pre-existing cannabis dependency and addiction. As correctly identified by the US National Institute on Drug Abuse President Dr Volkow, who has written the leading article in the New England Journal of Medicine on June 4th 2014, cannabis can cause many illnesses, so the claim that cannabis relieves a pain in whose aetiology cannabis was implicated must be viewed with substantial circumspection by those charged with responsible decision making in our community. It should be noted that these disorders include chronic back pain.

[6] . It is not Australia's medical establishment that is asking for crude cannabis to be used here as medicine. The push for smoked marijuana is particularly by drug

legalisation lobbyists. The harms of smoking as a delivery system are self-evident – no medicine is ever smoked. Cannabinoids are not a first-line drug for any medical condition. Other legally available drugs are better for each of the few conditions which cannabinoids have been found to moderately alleviate. In the most extensive scientific review of ‘medical marijuana’ to date by the US Academies of Science’s Institute of Medicine, 95% of ‘medical marijuana’ users in their US surveys were previously recreational cannabis users. Many of the maladies cited by medical cannabis patients cannot be objectively verified by medical practitioners, relying only on the patient’s own subjective word, opening medical cannabis use to mischief-making and unverifiable claims as happens with the Australian Disability Support Pension. Drug Free Australia has specifically asked the Federal government to provide mechanisms to circumvent medical cannabis being used recreationally by ruse as described above. In one US State with ‘medical marijuana’ laws, 74% of young people entering treatment for cannabis addiction sourced their cannabis from people with ‘medical marijuana’ prescriptions, demonstrating that diversion to recreational users will always be a problem under such provisions. While it is unclear whether medical cannabis is the cause, US States that have legalised medical cannabis have higher rates of recreational use than other States. According to the 2013 National Drug Strategy Household Survey, a survey of more than 24,000 Australians, 90% of Australians did not approve the recreational use of cannabis. While 69% of Australians support ‘medical marijuana’ in the same survey, Drug Free

Australia contends that very few of these Australians would be able to specify the handful of medical indications attributed to cannabis, and would likely disapprove anything which would proliferate recreational cannabis use. Colorado laws and surveys of teens demonstrate that crude medical cannabis proliferates recreational use.

[7] Agreement between DSM-5 and DSM-IV measures of substance use disorders in a sample of adult substance users

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8977110/>

[8] See Active Ingredients In Marijuana Found To Spread And Prolong Pain -

<http://www.sciencedaily.com/releases/2009/08/090813170848.htm>