

MEDICINE FOR REAL

California Lawmakers Should Tax and Regulate Cannabis Like Medicine

Last year's trio of bills comprising The Medical Marijuana Regulation and Safety Act (MMRSA) bring overdue clarity to California's 20-year-old program, but many legislative decisions that affect legal medical cannabis patients remain. In considering those decisions, it is important that lawmakers and regulators treat medical cannabis like real medicine.

We tax and regulate vices, such as alcohol and tobacco, in a fundamentally different way than we do medicine. We would never erect barriers to obtaining heart medication, but we do take steps to discourage tobacco use. Likewise, we would not tolerate a sin tax on insulin or chemotherapy, even if the revenue was dedicated to a laudable goal. Lawmakers must resist the temptation to lump medical and non-medical cannabis use together when making policy choices.

Some Californians, including members of the legislature, claim most medical cannabis patients are not really ill. One lawmaker recently testified that as few as 30% of patients are legitimate but provided no evidence to support the allegation. Some anecdotes of abuse of the state's medical cannabis law may be true, but lawmakers should reject the cynical position that most medical cannabis patients are recreational users. Research and experience show otherwise.

A study published in 2014 shows that of the 1.4 million Californians who have used medical cannabis, almost all (92%) report cannabis helped treat the symptoms of a serious medical condition. The study challenges the commonly held perception that medical cannabis is being overused by healthy people and demonstrates that the state's medical cannabis laws are providing real relief to many Californians ("Prevalence of medical marijuana use in California, 2012," Drug and Alcohol Review (2014), DOI 10.1111/dar. 12207).

This groundbreaking report is the first based on a large dataset representative of the state's population. The California Behavioral Risk Factor Surveillance System, which is an ongoing cross-sectional telephone survey, interviewed more than 7,500 Californians in English and Spanish, making this the most comprehensive scientific study of cannabis use in California ever conducted.

The analysis shows that one in twenty Californians have used medical cannabis. More than 30% used medical cannabis to treat chronic pain; 11% used it for arthritis, 8% for mi-

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graines, and 7% for cancer. Participants also reported using medical cannabis to treat the symptoms of HIV/AIDS, glaucoma, muscle spasms, nausea, stress, and depression. These are not trivial or minor ailments. These are serious medical conditions for which conventional treatments are often ineffective or unavailable.

The results refute smaller studies that suggest most users are young white males. Researchers found that medical cannabis was used at similar rates by men and women, the young and the old, patients with high and low levels of education, and in various regions of the state.

This rigorous evidence that medical cannabis is commonly used throughout the state by a diverse population, and that it is highly effective in treating serious conditions, matters right now. Lawmakers are considering new legislation this year regarding taxation, commercial licensing, patients' rights, and more. Those important decisions will affect medical cannabis patients and other stakeholders and need to be informed by facts, not anecdotes, misperceptions, or bias.

Voters are likely to decide in November if cannabis should be legal for non-medical use. There should be a separate conversation about what posture lawmakers and regulators take towards cannabis used for non-medical purposes. Those taxes and regulations might reasonably differ from those related to legal medical use.

In the meantime, we need everyone who is going to make a decision about medical cannabis this year to understand that medical cannabis is medicine for real. That is important because decisions made about genuine medicine will be fundamentally different than those we make about regulating alcohol, tobacco, or non-medical cannabis. The idea that most medical cannabis users are not really sick or that their use is not medical is misinformation. The research says otherwise, and our local and state policies should reflect the critical role medical cannabis plays in the treatment of California patients.

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Founded in 2002, Americans for Safe Access (ASA) is the nation's leading medical cannabis patient advocacy organization. Our mission is to ensure safe and legal access to cannabis for therapeutic uses and research. ASA works with our grassroots base of over 100,000 members to effect change using public education and direct advocacy at the local, state, and federal level. You can learn more about our organization at: safeaccessnow.org

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