

 Council on Licensure,
Enforcement and Regulation




2012 Annual Educational Conference - September 6-8
San Francisco, California

**Medical Marijuana:
Politics Meets
Regulation**

Presenters: Dr. Heidi Oetter, MD
President, Federation of Medical Regulatory
Authorities of Canada


Richard Morales, Section Director
Colorado Division of Professions & Occupations

Promoting Regulatory Excellence

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Colorado Background

- State Constitutional Change
- Designed to benefit persons suffering from a debilitating medical condition
- Regulatory Environment
 - MMJ Patient Registry
 - MMJ Vendors, Retailers & Caregivers
 - Physicians


Colorado

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Social & Political Environment

- Change in Federal Stance on MMJ
- Legislative Bills & Hearings
- Medical Marijuana Advocates & Activities
- Law Enforcement Experiences


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Canada



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Health Care

- Single payor
- First dollar coverage
- 91% hospital services publicly funded
- 99% physician services publicly funded
- Fewer physicians per population
- 99% of physicians belong to one mutual defense organization 


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Licensing and regulation


- Provincial Colleges or territorial government
- Colleges have delegated authority
- No DEA, colleges have oversight of doctors prescribing practices 

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Federal versus Provincial Responsibilities

- Health Canada: drug scheduling
- Criminal law is a federal responsibility
- Medical marijuana: regulation under the Controlled Drugs and Substances Act



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Medical Marijuana

- Ontario Court of Appeal 2000
- Violation of Charter of Rights and Freedoms
- Gravely ill patients denied access to symptom relief




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Medical Marijuana Access Regulations

- Made possession of small amounts of marijuana legal if for medical purposes
- Patients could also grow their own or have someone grow it for them
- Access limited to patients suffering from grave and debilitating illness for whom conventional therapy failed
- Patients needed physician to submit forms to Health Canada
- Physician confirmed diagnosis, need and dose



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More Court Rulings

- Unconstitutional to not supply marijuana
- "Prairie Plant Systems Incorporated"




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Relaxed Physician Obligations

- Provide diagnosis, no longer provide dose



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Headlines!



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Marijuana
Med. marijuana: Just because William Breathes got his card doesn't mean all's right with registry

Marijuana
The state will need a pot of money to maintain the medical marijuana

Marijuana
Medical marijuana: 3,200 patients in limbo, may be tossed due to technicalities

Marijuana
Medical marijuana hearing sets in fight on the senate floor

Marijuana
Medical marijuana registry numbers on the rise


Marijuana
Medical marijuana fees, bill pro-- again

Marijuana
Department of Health Reality TV Campaign a Disaster

Marijuana
Medical marijuana community fights health department's PTSD policy




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Statistical Data from the MMJ Registry

Sex	Percent on Registry	Average Age
Males	68%	41
Female	32%	43

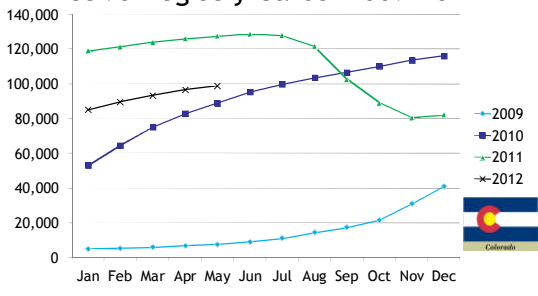

Reported Condition	# of Patients	Percent
Chachexia	1,201	1%
Cancer	2,553	3%
Glaucoma	1,022	1%
HIV/AIDS	627	1%
Muscle Spasms	17,035	17%
Seizures	1,668	2%
Severe Pain	92,704	94%
Severe Nausea	11,471	12%




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Active Registry Cards 2009-2012


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Working with Board to Manage Reactions

- It's not evidenced based!
- This isn't right!
- Not in my practice!
- But we'll look stupid if we don't do anything!
- I want to make a stand!
- We're not equipped to fight the proliferation of MMJ!




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It's all about the medicine.

- Should someone seeking medical marijuana receive substandard medical treatment?
- Focus on the medicine and safety to practice




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Complaints Received by the Colorado Medical Board

- Inappropriate MMJ Certifications
- Physician Using MMJ




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Current Concerns

- HC has difficulty growing enough marijuana
- Compassions clubs operate under radar to provide supply
- 15,000 licensed growers, never inspected by HC




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Current Reality

- Regulation was intended to authorize access for a small number of patients
- Demand has exceeded supply
- 2005- 805 patients
- 2011- 12,264 patients
- Ontario court judgment: estimate 400,000 users of "medical marijuana"



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Parallels with Medical Alcohol

- Lawful possession and use of alcohol during prohibition




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BC Bud

- High potent marijuana grown in BC
- 6 billion dollar illegal industry, 95% exported to USA
- Majority operated by gangs
- 20,000 homes growing it




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Regulatory Enforcement Issues Specific to MMJ

- Safety to Practice
- Identifying Experts
- Complainants vs. Patients
- Witnesses
- Investigative Intense



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Enforcement Issues Continued

- Grand Standing
- Legal Service Resources




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Regulatory Experience

- Physicians remain reluctant gatekeepers
- HC limited resources to scrutinize use
- Very few complaints to regulators
- High societal tolerance of recreational use
- Serious concerns with criminal supply/distribution




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HC Proposed Regulations

- Essentially remove HC from any enforcement or oversight
- Physicians become authorizing agent
- HC no longer does supply and distribution




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FMRAC's Position on Amendments

- Maintain status quo, or
- Treat it like a pharmaceutical, schedule it and supply is through pharmacies, or
- Decriminalise it




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FMRAC's Position on Medical Marijuana

- The practice of medicine should be evidence based
- Physicians should not be asked to prescribe or dispense substances or treatment for which there is little evidence of efficacy or safety



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