

Judiciary Committee

LB 643

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Division of Public Health
Department of Health and Human Services**

Good afternoon Senator Seiler and members of the Judiciary Committee. My name is Dr. Joseph Acierno (J-O-S-E-P-H A-C-I-E-R-N-O). I am the Chief Medical Officer and Director of the Division of Public Health for the Nebraska Department of Health and Human Services, and I am currently serving as acting CEO for the agency.

I am here today to testify in opposition to LB 643 and AM 680

LB 643 is titled, "Cannabis Compassion and Care Act." In the broadest terms, the bill provides that medical doctors may certify qualifying patients as eligible for a Department of Health and Human Services registry identification card in order to purchase, possess, and use what is commonly referred to as "medical marijuana."

This bill is nearly identical to bills introduced in Kansas in 2014 and again in 2015. Today, I would like to begin by discussing two questions about medical marijuana: 1. Is it safe? and 2. Does it work?

Every drug or chemical substance has interactions with other drugs and has side effects, some of which may be detrimental or even life-threatening. The interaction between medical marijuana and the prescription drugs that a patient may be taking is an example of a safety concern.

There are questions about the most appropriate form of marijuana and the best routes for administration of marijuana to treat various disease processes.

There are questions about marijuana's desirability and efficacy when the patient is addicted to legal or recreational drugs or alcohol.

There are questions about the safety of medical use of marijuana during pregnancy, in pediatrics, in adolescent populations, and in the older adult.

There are questions about the safety of marijuana to cardiac health, to the liver, to the eyes, to reproductive health, and to oral health.

Studies have shown that smoking marijuana has negative pulmonary implications similar to those of smoking tobacco.

Furthermore, while trying to establish a correct safe dosage, safe lengths of treatment, and best routes of administration, researchers and practitioners in states that have legalized medical marijuana have been frustrated in their research because of the ever changing chemical composition and potency of the plant through genetic manipulation.

Descriptions about the relationship between marijuana and various psychopathologies are abundant in medical literature. Anxiety, dysphoria, negative emotional responses, depression and suicidal ideation are a few, but cause and effect has not been conclusive.

The relationship of marijuana to cognitive and psychotic disorders is not simple to study because effects might be non-existent, acute, transient, delayed, or persistent.

LB 643 creates new work for the Department of Health and Human Services that will require additional staffing resources considering this is creating an entirely new program. I have discussed our concerns with Senator Garrett. For example, the bill requires the Department to establish and maintain a secure, web-based verification system that must be operational within 90 days after the effective date of the Act. Although the bill authorizes collection of fees for issuance and renewal of the registrations, there is no appropriation of funds to create such a verification system prior to collecting registration fees. The bill includes other specific timeframes for promulgation of regulations and for issuance of registrations that will be difficult, if not impossible, to meet. Though this was addressed in the amendment, I still believe the timeframe will be difficult to meet. There are a number of regulatory issues that will likely need to be addressed in this legislation.

I would be happy to answer any questions.