

Submission to Legislative Assembly for the ACT: Exposure draft of the Drugs of Dependence (Cannabis Use for Medicinal Purposes) Amendment Bill 2014

This is a personal submission as a member of the professoriate of UNSW Australia rather than a product of my role as the founding Director of the National Cannabis Prevention and Information Centre at that University.

I have 20 years' experience researching the nature and treatment of cannabis use disorder including the use of nabiximols and cannabidiol (CBD) in the management of cannabis withdrawal.

The proposed criteria for approval to be by the Chief Health Officer is so wide under Category 3 (for the mitigation of a symptom of any other medical conditions and its treatment) that the Bill is *de facto* legislation with a registration requirement that is very likely to be ignored and difficult/expensive to monitor.

The requirement that a medical specialist, and for Category 3 one other doctor, declare the appropriateness of the application places such practitioners in an invidious position given that the thin evidence-base relevant to such an authority (see NCPIC Bulletin 18 attached) largely rests on synthetic THC and nabiximols not whole plant cannabis. As a result the arising legal position of the medical practitioner is questionable as the following issues arise:

- For which conditions might whole plant cannabis be appropriately recommended?
- For which conditions is it contra-indicated?
- Can it be used during pregnancy/lactation?
- What other medications are contra-indicated with whole plant cannabis?
- At what dose? And by what protocol for titration?
- At what frequency?
- By which method of administration?
- For what duration?
- What training should medical prescribers of whole plant cannabis undertake?
- How will they advise applicants regarding driving, use in the workplace, mixing with other drugs such as alcohol?
- How will diversion be monitored?

Division 2.3 concerns licenses to cultivate. How will those approved under Division 2.2 access cannabis while licensees are developing their crops to the appropriate maturity for harvesting?

Does the approved user have any redress should the nominated person refuse supply or lose their license to cultivate due to a new criminal conviction?

Is there any requirement on the licensee to avoid the use of hormones, stimulants, fungicides and other contaminants? Can the licensee be compensated for his/her cannabis?

Can children be living in the homes of the licensee and/or the approved person? If the approved person or license holder is incapacitated how is the cannabis to be transported? If the licensee needs to travel from the ACT for any reason under what conditions is the licensee able to transfer responsibility for the crop temporarily?

Until these issues can be clarified in the amendment to the Bill, I do not believe it can safely be included and should not be considered by the Legislative Assembly of the Australian Capital Territory.

Professor Jan Copeland (PhD)

16th November 2014

Attachments:

NCPIC Bulletin, 18 September 2014, *The use of cannabis for medical purposes*

Web link:

<https://ncpic.org.au/media/1931/the-use-of-cannabis-for-medical-purposes.pdf>