

Proponent of Medical Cannabis-written testimony

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Dear Chairman Thompson and Members of the Committee,

I am a married mother of three, a grandmother of another three, and a Registered Nurse for the past three decades. When I graduated nursing school; I took an oath similar to the oath required for you to enter into public office. The nursing oath is founded on patient advocacy. As a patient advocate it is our responsibility to protect the rights of our patients and advocate for the best care available. This care allows them the freedom to heal, or the ability to die with dignity and comfort, this is why I stand here before you today.

My objective is to provide you with factual data that substantiates my beliefs. As cannabis research continues, it is difficult to decipher between valid medical research from reliable sources, and publications that say cannabis is a cure all. First Cannabis is NOT a cure all and second cannabis is NOT for everyone. The information I will be sharing with you is supported by reliable sources including the Journal of the American Medical Association (JAMA), The Center for Disease Control (CDC), and several meta-analyses. For those of you who are not familiar with a meta-analysis, it is a technique utilized by researchers that collects and collates a wide range of previously conducted research, then compares the results and utilizes the data as the basis for concluding their hypothesis. In essence, it's the grand-daddy of medical research studies. In addition I have provided links to the sources showing that several medical ailments and conditions can benefit from the use of medical cannabis. Today I will be discussing a few of these diagnoses and conditions that have directly impacted my personal life.

- **Cancer**

- Statistics show that Cancer is #1 in the age-adjusted mortality rate in Kansas, we have 158.8 deaths per 100,000 people annually. I suspect each one of you have dealt with a family member or friend who has suffered from this disease or the side effects of treatment. In many cases, the quality of life these patients endure include suffering from chronic pain, chemotherapy-induced nausea, vomiting, depression, and sleep disorders.
- Considerable clinical evidence indicates that cannabis could yield a variety of treatment options. The American Cancer Society has acknowledged that medical marijuana has been useful in reducing chemotherapy-induced nausea and vomiting as well as being helpful in the treatment of neuropathic pain (pain caused by damaged nerves)¹ In a meta-analysis published in the Annals for Palliative Medicine, 4 out of the 5 studies reviewed found that cannabis was significantly associated with a decrease in cancer-associated pain.²

Suicides

- Sadly, the suicide rate in Kansas continues to trend upward. One regression analysis statistic shows that the suicide rate among men aged 20 through 39 years fell in states which had legalized medical marijuana compared to states that have not yet legalized medical marijuana.³
- A second study in California showed that suicide rates had decreased since the legalization of medical marijuana in 1996.⁴ More studies need to be done to
- In addition, the revenue that Kansas would receive through the sale of medical cannabis could be utilized to finance mental health initiatives and care for all of Kansas' vulnerable citizens.

• Opioid Crisis

- Nationally, the opioid mortality rate has decreased, yet the state of Kansas continues to increase. Statistics show that every one of us know of someone who is struggling with an opioid addiction, or worse yet, has perished due to that addiction.
- 115 Americans die every day from opioid use; this is more than breast cancer, car accidents, or guns. There has been much discussion regarding the benefits of medical cannabis to decrease or eliminate opioid use, in a meta-analysis published in the Journal of the American Medical Association. They found that states with medical cannabis laws had a 24.8% lower mean annual opioid overdose mortality rate compared with states without medical cannabis laws.⁵
- JAMA internal medicine published a study that compared opioid prescription patterns and found that states that allow the use of cannabis for medical purposes had 2.21 million fewer daily doses of opioid prescribed per year under Medicare Part D, compared with those states without medical cannabis laws. Opioid prescriptions under Medicaid also dropped by 5.88% in states with medical cannabis laws compared with states without such laws.⁷
- I am sure you have heard from the opposition that cannabis is a “gateway drug”. While this misconception is widely stated as a fact there have been no scientific medical studies to support this. However, in an interview with CNN, one individual said “cannabis IS a gateway drug, it provided me with a gateway to recovery.”

• Medical Summary

- Although I've only addressed three disease states today, there are over 30,000 cannabis-centric scientific papers documenting cannabis as it relates to other diseased states such as MS, diabetes, PTSD, depression, anxiety, epilepsy, seizure disorders, kidney disease, Lou Gehrig's disease, chronic pain, healing of chronic wounds, and many more.

- **Misconceptions**

- One of the concerns related to legalizing medical cannabis, include an increase in teenage usage. A JAMA study from July 2019 shows legalizing cannabis could discourage teen use. Data was collected by the CDC from more than 1.4 million high school students between 1993 and 2017, the results show teen pot use both before and after medical marijuana laws had been adopted in 27 states, including seven of which had also legalized recreational marijuana during this time. The study revealed that the number of teens who said they smoked pot dropped by 8%.
- One prevalent theory was that teens find it more difficult to access marijuana as drug dealers are replaced by licensed dispensaries.⁸
- A meta-analysis published on Med Page Today in Feb. 2018, reviewed national pot use among U.S. teens. It included 11 studies dating back to 1991. Their conclusion was, “Medical marijuana laws have had little impact on recreational pot use among U.S. teens, findings that appear to debunk claims by opponents of medical marijuana that the laws have led to greater cannabis use among adolescents.”⁹

- **Education**

- With regards to the education and communication, we have more work to do. Consumers have been besieged with false claims of the healing benefits derived from cannabis. Even our physicians are confused by what is real and what is fake news.
 - In a recent survey, 85% of residents and fellows in their final stages of training stated they “were not at all prepared to answer questions about medical marijuana.”¹⁰
 - This is why it will be imperative that Kansas residents have access to education through properly trained medical personnel.
 - As part of the group “Kansas Nurses for Medical Cannabis”, we have already begun educating medical personnel. We have found tremendous support, and enormous interest from the medical community. Medical professionals in Kansas are ready for this challenge and anxious to provide alternative treatments for our patients
- In conclusion, we ask that you let go of any preconceived notions, listen to the people you represent, listen to the families who have become medical refugees, listen to the substantiated evidence, and support a bill to legalize medical cannabis in Kansas. I would like to leave you with a quote “Prohibition...goes beyond the bounds of reason in that it attempts to control a man’s appetite by legislation and makes a crime out of

things that are not crimes.....a prohibition law strikes a blow at the very principles upon which our government was founded” Abraham Lincoln.

Thank you.

1. <https://www.cancer.org/treatment/treatments-and-side-effects/complementary-and-alternative-medicine/marijuana-and-cancer.html>
2. <http://apm.amegroups.com/article/view/16199/18209>
3. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4232164/>
4. <https://news.medicalmarijuanainc.com/new-study-finds-drop-in-suicide-rates-after-medical-marijuana-legalization/>
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7. www.cnn.com/2018/04/02/health/medical-cannabis-law-opioid-prescription-study
8. https://www.cnbc.com/2019/07/08/new-jama-study-shows-legalizing-pot-might-discourage-teen-use.html?fbclid=IwAR2HSmQyoccn1FouGjyjkVeY_WGXiHnXIR8o21ZlyT6U6kaNnPKd1HqM6kQ
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