

## **Testimony to the House Federal and State Affairs Committee**

Opposing SB 560 March 16, 2022

Chairman Barker and Committee Members:

The Kansas Sheriff's Association is opposed to the method of medical marijuana legalization proposed in SB 560. Although it is more controlled than other proposals, it still presents many unintended consequences. Our association has long held if marijuana is to be 'prescribed' by physicians and used as a medication, it should be subject to the same rigorous approval process that other commercially available drugs undergo. Potentially therapeutic components of marijuana should be investigated, but they should only be made available to the public after adequate testing by the FDA. Furthermore, these compounds should be dispensed via standardized and FDA-regulated pharmacies to ensure purity and concentration.

Marijuana, unlike any prescription drugs designated for specific medical purposes at physician regulated strength of active ingredients and a physician regulated dosage unit is the way medicines should be delivered to the public.

It is common for the crude marijuana plant and its products to be contaminated with fungus or mold. Furthermore, crude marijuana contains over 60 active cannabinoids, few of which are well studied. Marijuana growers often breed their plants to alter the concentrations of different chemicals compounds. For instance, the concentration of tetrahydrocannabinol (THC), the principal psychoactive ingredients, is more than 20-fold more than in marijuana products used several decades ago. Without rigorous clinical trials, there is no way of knowing which combinations of cannabinoids may be therapeutic and which may cause harm or damage. As marijuana dispensaries, experiment by breeding out different cannabinoids in order to increase the potency of THC, there may by unanticipated negative and lasting effects for individuals who smoke these strains.

The one positive thing about this bill is the prohibition of smoking, combusting, or vaping the products. (Page 24, section 30).

The THC limits in this bill are set at 35% for plant material and no limits for extracts. Those are very high concentrations. Our research did not find any marijuana vegetation today containing more than 30% THC, including on the pro-marijuana sites we looked at. One site stated, "Finding a strain with levels of 30% THC is rare, but not impossible…what is the highest THC percentage that's actually been recorded? Recently, Leafy performed a review of legally sold cannabis flower and their respective lab reports…they found Ghost OG registered the highest

THC percentage with a whopping 28.7%."<sup>1</sup> So why are we encouraging even higher THC content in this bill.

FDA-approved forms of THC (Dronabinol) and a THC-analog (Nabiolne) are both available orally. Indications for these drugs are HIV/AIDS cachexia and chemotherapy-associated nausea and vomiting.

Unlike smoked, crude marijuana, these medications have been subject to randomized, placebocontrolled clinical trials. (National Library of Medicine National Institutes of Health Article)

Another issue is the black market. In states where medical marijuana has passed, more highly concentrated marijuana is sold out the back door than is given to users with a medical marijuana card. Legalization does not stop the black market or any of the other risks surrounding a black market.

## <u>Jail Issues</u>

A big concern we have is what happens when a person with their medical marijuana card lands in jail. Will we be required to provide a federally controlled substance to them? Will we have to buy it for them? How the courts will rule on these issues is unknown. Nevertheless, calling it a medicine will certainly lead them toward these conclusions. Nothing in the bill covers this. Jails and correctional facilities are not given an exemption from use of marijuana in the facility.

## **Enforcement Issues**

Several enforcement agencies are presented by legalizing medical marijuana:

<u>Drug Canines:</u> Any legalization of marijuana has resulted in the courts in many states saying the reaction of a drug dog trained to detect marijuana can no longer establish probable cause for any drug. We estimate that about 85-90% of the drug dogs used in Kansas are trained to detect marijuana. These dogs generally cost around \$20,000 each to be acquired and fully trained. This is an enormous expense to local law enforcement. If this bill is passed, it needs to include some of the expected revenue to go into a grant program to replace those dogs. The total cost statewide will exceed \$1 million.

<u>Issues with Identifying and Confirming a Person has a Medical Marijuana Card:</u> The bill does not contain any explicit language requiring a person to reveal to law enforcement they have a medical marijuana card. There also is not a requirement to provide access to the registration or licensure databases in a real time, 24/7, secured system such as KCJIS to verify a licensure or registration. This is especially important when the person says they have a card but do not have it with them.

<u>THC Content Limits:</u> There currently is no testing available for law enforcement to check THC percentage content in the field. Our labs may not have that ability either. This will mean enforcement of THC level restrictions will be nearly impossible.

<sup>&</sup>lt;sup>1</sup> THC Percentage in Cannabis: How Much Is Too Much - Hail Mary Jane ®

The Kansas Sheriff's Association is an opponent on any bill proposing making medical marijuana legal in the State of Kansas. We ask you to not move this bill forward favorably.

We thank you for your consideration and the opportunity to provide testimony to the Special Committee.

Sheriff Jeff Easter KSA Legislative Chair