

September 11, 2018

The Honorable John Schickel
Co-Chair, Interim Joint Committee on Licensing, Occupations, and Administrative Regulations
702 Capital Avenue
Annex Room 209
Frankfort, KY 40601

The Honorable Adam Koenig
Co-Chair, Interim Joint Committee on Licensing, Occupations, and Administrative Regulations
702 Capitol Avenue
Annex Room 329E
Frankfort, KY 40601

Dear Chairmen Schickel and Koenig:

As a physician specializing in Pain & Regenerative Medicine, I see pain on the front lines and understand how debilitating it can be. I read and recognize the potential value of specific parts of cannabis; however, marijuana as a whole is a different story.

We need to distinguish between whole marijuana and hemp-derived cannabinoids, the latter of which are already legal and marketed. Studies show greater medicinal promise in hemp-derived products like CBD than whole marijuana, negating the reasoning for legalizing marijuana in Kentucky.

Whole-plant cannabis lacks the rigorous methodology under which potentially harmful drugs are tested before safely endorsed. Political and financial considerations should not take precedence over a drug's long-term repercussions that are unknown at best.

While there may be outlier providers who view the untested benefits as greater than the established worrisome harms, the vast majority of physicians have enough concern to express pause. Consider that raw opium, coca leaves and mustard gas all have derivatives that can be prescribed with medical benefits, but rarely, if ever, are they prescribed in raw form. Marijuana should be no exception.

I support the policy set forth by the Kentucky Medical Association that marijuana's status as a schedule I controlled substance should be reviewed and changed for the purpose of research and the development of cannabis-based medications. Alternate delivery methods should be explored to avoid the inherent dangers of smoke inhalation and the uncontrolled variables affecting potency and dosage. The known harms should be studied to mitigate risks and safeguard vulnerable populations. Until such goals are achieved, I join physicians across the state in opposing any legislation intended to involve medicinal marijuana outside of scientific clinical trials.

As physicians, we cannot just see value in small components and blindly recommend the whole. There is great potential that the larger societal harms of whole-plant marijuana will offset the benefits. Condoning it as medicine sends the signal of an endorsement by the physician community that does not exist, and frankly is dangerous. Remember that opioids and nicotine were also once marketed as harmless. If only

we had weighed the scientific evidence more than the marketing, the balanced outcome could have saved millions of lives.

I welcome any questions that you may have. Thank you for your time and attention to this matter.

Sincerely,

Danesh Mazloomdoost, M.D.

Kentucky Medical Association Board of Trustees

Cc: Tom Hewlett, Committee Staff Administrator