

Report and recommendations to the New Mexico Secretary of Health from the Medical Cannabis Advisory Board to the Medical Cannabis Program

From a Public Hearing on Friday April 7, 2017 at the Harold Runnels Building Auditorium, 1190 St. Francis Drive, Santa Fe NM

Report prepared by J. Mitchell Simson MD, MPH Chair, Medical Cannabis Advisory Board

A public hearing of the Medical Cannabis Advisory Board to the New Mexico Medical Cannabis Program was held in the Harold Runnels Building Auditorium at 1190 St. Francis Drive in Santa Fe NM from 10:00 am to 1:10 pm on Friday April 7th, 2017.

A. Introductory Comments, Introduction of Board Members, Approval of Agenda.

Dr Mitchell Simson called the meeting to order at 10:06 am. Board members present:

1. Dr Laura Brown, Family Medicine
2. Dr Rachel Goodman, Obstetrics/Gynecology
3. Dr William Johnson, Psychiatry
4. Dr Mitchell Simson, Internal Medicine and Addiction Medicine

Board Member excused:

1. Dr Belyn Schwartz, Physical Medicine and Rehabilitation

Vacant Board positions:

1. Infectious Disease
2. Oncology
3. Neurology

Present representing the Department of Health:

1. Andreas Sundberg, Patient Services Program Manager Medical Cannabis Program
2. Kenny Vigil, Medical Cannabis Program
3. Chris Woodward, Office of the General Counsel NM DOH

B. Medical Cannabis Program Update

Mr Vigil provided the biannual update on the Medical Cannabis Program. With the addition of new staff members and the move to a larger office the Program has been able to process about 4500 applications monthly. He reports that the time from receipt of a completed application to mailing an identification card is no more than 2 weeks. The Program has over 35,000 active enrollees.

The Program has vacancies for the Medical Director and Health Educator. It is unclear if the present hiring freeze will impact filling these 2 positions.

Training programs continue for Law Enforcement and medical providers throughout the state. No problematic interactions with enrollees and Law Enforcement were reported to have occurred since the prior public meeting.

C. Actions of the Secretary of Health on prior recommendations from the November 4th, 2016 public meeting.

The Secretary of Health did not render any decisions concerning the Advisory Board recommendations from the November 4th, 2016 public meeting until June 6th 2017 and I received a copy of these on June 16th, 2017.

Recommendations to add Opioid Dependence and Neurodegenerative Dementias including Alzheimer's to the approved diagnoses list and allowing for Telemedicine evaluations of applicants were all declined. The Secretary felt the fourth petition which involved increasing plant allowances by Producers did not fall within the stated responsibilities of the Advisory Board and so was not requiring any action on her part.

D. Discussion of Submitted Petitions

Dr Simson said that the program received a large number of petitions on the deadline day for petition submissions. Prior to the public hearing the

Advisory Board conferred with legal counsel regarding several of these petitions. It was determined that the following petitions would either require legislative changes or were outside the scope of work of the Advisory Board and so would not be considered at this meeting:

- 2017-001 Add veteran status as a qualifying condition
- 2017-002 Allow any chronic condition to be a qualified condition
- 2017-003 Change LECUA to give MAB more authority
- 2017-004 Change LECUA to make renewals every three years
- 2017-006 Allow PPL holders to use manufacturers for conversion of product
- 2017-008 Remove CBD from producer plant counts
- 2017-010 Increase plants for licensed producers
- 2017-011 Add definition of medical treatment to LECUA and add definition of adequate supply
- 2017-023 Develop MCP education and research components

Dr. Johnson commented allowing PPL holders to use manufacturers seems reasonable, As a certifying practitioner it would help enrollees get product in a friendly form without having the costs of purchasing product from producers. Dr. Johnson did feel removing CBD plants from plant count is a challenging idea. Dr. Simson did remind the Board that there was a recommendation to increase producer plant counts at last meeting but the Board members did not provide a specific number regarding the plant count increase. Dr. Johnson pointed out the addition of an education and/or research component has been endorsed in the past. Given the ongoing rapid growth of the program and comments regarding lack of data collection the addition of education and research would be beneficial. Dr. Brown pointed out that legislation regarding research had passed one house this recent legislative session.

1. Petition 2017-012 to add Autism as an approved Medical Condition; tabled from November 4th, 2016 meeting.

The Medical Advisory heard a previous petition related to Autism and had tabled the petition at that time. This condition has been previously petitioned for in the State of New Mexico. Delaware added Autism with self-injurious aggressive behavior. Pennsylvania will be adding; however, their program is still in development. Dr. Simson spoke with staff from both States and said Delaware was apprehensive about adding as a condition; however they had tremendous pressure from those working with people who have Autism to add as an approved

condition. Dr. Brown asked if self-injurious is defined in Delaware and Dr. Simson said it was not defined.

Dr. Johnson stated that they had a petition for Autism in 2010 that passed but was not approved by the Secretary of the Department. He further went on to say, that we hobbled by a lack of good science. We do know Autism is difficult for the persona and the caregiver. Petition was interesting and material demonstrated that there were neuro-protective protections and neuro-modulators. However, a lot of the information is speculative with lots of unknowns. Dr. Johnson spoke of how much of the material is anecdotal reports based in pre-clinical interviews, however later in the research it states pre-clinical studies is insufficient. There are a lot of unknown effects and deficits are hard to analyze. Dr. Johnson did feel medical providers and their patients should have a right to explore as an option Dr. Johnson did question if there should be an age limit.

Dr. Brown stated she approaches this from a harm reduction perspective. Current medications are much worse and have potential of causing more harm. When making these types of decisions we should keep harm reduction front and center.

Dr. Simson discussed an article from the Journal of pediatrics from 2015, the end conclusion was conservative regarding use. The research leaned toward a combination of CBD and THC, however it was important to note that there remains a major concern regarding unknown impact on developmental issues.

Dr. Johnson noted all parties should be aware of hazard, however side effects that were heightened by research may not be reflective of impact on long term users. Dr. Johnson also asked if any members had any thoughts on age limits for users. Dr. Brown asked how many people in New Mexico have a diagnosis of autism? Dr. Johnson stated the nation rate is one in 68 have a diagnosis on the autism spectrum. The actual numbers vary depending on the specific diagnosis. Dr. Simson asked if we should consider using behavioral disturbance like they use in Delaware and Dr. Brown asked how that would be defined.

There was a public comment that cannabis is less dangerous than other medications and not all people with Autism are self-injurious.

Motion: Dr Johnson made a motion to approve Autism Spectrum as defined in the DSMV. Dr. Brown seconded the motion.

Voting in Favor of the Motion: Brown, Johnson, Simson

Voting against the Motion: none

Absent: Schwartz, Goodman

Board Action: By a vote of 3 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Autism Spectrum as defined in the DSMV be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

2. Petition to add ADHD as an approved Medical Condition; tabled from November 4th, 2016 meeting.

Dr. Johnson reread petition, and once again felt we are dealing with a petition trying to establish rational literature when the information is incomplete and possibly inadequate. Petitions for this condition have been submitted in October 2015, November 2016 and again in April 2017. Petitioners supplied anecdotal information. Dr. Johnson stated as a practitioner he prescribes many stimulants that carry side effects; however, based on his experience cannabis is not an effective treatment. Many times, this diagnosis first appears in elementary school age children. Due to concern of impact on development it is important to be conservative. However, when dealing with adults, we know they can make their own decisions and they have completed neuro-development, We could possibly set an age limit or should we allow anybody defined as an adult. Dr. Johnson maintained his concern about neuro-development and safety of use with children. Many people treat cannabis as a benign substance however studies have shown a decline in IQ in users. Dr. Brown felt adding ADHD for adults will keep focus on harm reduction, and it is a safer option.

There was a public comment that anybody should be provided access to avoid potential addiction issues. There were multiple comments from the public. One commented it is often challenging for enrollees to find the right medication. Another stated that anxiety combined with depression should not be limited to CBD only. Another commented that dispensary dosage is important with anxiety.

Motion: Dr Johnson made a motion to approve ADHD for those over 18. Dr. Brown seconded the motion.

Voting in Favor of the Motion: Brown, Johnson, Simson, Goodman

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that ADHD for those over 18 years of age be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

3. Petition 2017-013 to add Anxiety as an approved Medical Condition.

There was a previous petition in 2011 to add anxiety as an approved condition. The Medical Advisory Board submitted a request that this diagnosis be added to the approved ones but that condition was not approved by the Secretary of Health.

Dr. Johnson, commented that in Psychiatry anxiety is a broad diagnosis. There is some data to show CBD products can be helpful. If approved there is currently not a system in place to limit purchase to high CBD only. While producers could help guide enrollees with choice, only a minority of staff at the licensed producers have training in make recommendation. In Dr. Johnson's opinion is it a murky area. Dr. Simson commented that he found the submitted petitions did not provide the articles or even abstracts but instead merely provided a reference list. Dr. Simson stated he spent hours retrieving and reviewing articles. The articles he located reflected that CBD is helpful in cases on anxiety and often suggested selective use of product. Dr. Brown focused on the area of harm reduction, ie, reducing the lethal overdoses.

Motion: Dr Johnson made a motion to approve Anxiety. Dr. Goodman seconded the motion.

Voting in Favor of the Motion: Brown, Johnson, Goodman

Voting against the Motion: Simson

Absent: Schwartz

Board Action: By a vote of 3 to 1 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Anxiety be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

4. Petition 2017-014 to add Depression as an approved Medical Condition.

Dr. Johnson made a motion to approve Depression as an approved condition.

Dr. Brown asked if it would be for all forms of depression.

Dr. Johnson stated that Bipolar Depression was proposed in 2009, and that condition was not recommended, however in 2010 Depression was proposed and recommended but was not added as a condition. Dr. Johnson believes there are many categories under depression for which cannabis treatment could be helpful.

Dr. Simson commented that a 2014 review, the endocannabinoid system help with serotonin signaling which in standard for other treatments for the diagnosis of depression.

Motion: Dr Johnson made a motion to approve Depression. Dr. Brown seconded the motion.

Voting in Favor of the Motion: Brown, Johnson, Goodman, Simson

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Depression be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

5. Petition 2017-015 to Add Concussion CTE, or TBI as a condition

Dr. Johnson stated he felt this was a broad petition. Dr. Simson stated that many of the articles cited provided mostly sports commentary and many were related to anti-doping. While there were animal studies, those studies tended to show that to be effective you would need to pre-treat with cannabis. Many spoke of CBD and the protection of the blood/brain barrier. Dr. Simson spoke about Chronic Traumatic Encephalopathy (CTE) which is a post traumatic neurodegenerative disease. Dr. Simson felt the addition of this condition paints a broader picture of what the petition wants to cover.

Dr. Brown asked when traumatic brain injury came up as a condition. Jessica Gelay from Drug Police Alliance commented it was in November 2012. Public comment from one stated that Sativex has been approved as standard treatment but must be used immediately and some people may have an allergic reaction.

Dr. Brown commented there is potential for prevention, focusing on the harm reduction component. Dr. Johnson asked if repeated dosing would increase protective nature or could it cause more harm. The general response is it seem unclear. Dr. Goodman commented that research out of Israel shows effective in acute injury.

Dr. Goodman made a motion to table decision as this could possibly be Palliative care. Dr. Simson seconded the table and stated that there may be a need to divide out conditions to Concussions or TBI and CTE.

Board Action: Petition 2017-015 was tabled.

6. Petition 2017-016 to add Diabetes as an approved Medical Condition

Dr. Simson commented that use seems to decrease insulin and waist size, but no decrease in lipids not glucose. Effects seem to be similar to those obtained through current medications and does not seem to improve diabetes. It is not specifically used to treat Diabetes but may help with some regulation of the CB 1 receptor. Dr. Simson further noted that painful peripheral neuropathy is already an approved condition. Dr. Simson further noted that one reference to a 2006, 15-year study showed cannabinoid users had an increase in caloric intake and alcohol use and increases in blood pressure but no other changes. Another study showed that cannabis users were slightly less obese. While effects are interesting that are not specific to Diabetes control.

Dr. Brown reinforced that fact that PPN is already an approved condition so those with a diagnosis of diabetes could apply under that diagnosis. A public commenter stated that this should be approved as a preventive not as a treatment.

Motion: Dr Simson made a motion not to approve Diabetes. Dr. Johnson seconded the motion.

Voting in Favor of the Motion: none

Voting against the Motion: Brown, Johnson, Goodman, Simson

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Diabetes **not** be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

7. Petition 2017-017 to add Dystonia as an approved Medical Condition

Dr. Brown stated that cervical dystonia is already an approved condition, however it is unclear on range of dystonia. Dr. Simson commented that adding Dystonia would create a broader spectrum for application.

Motion: Dr Simson made a motion not to approve Dystonia. Dr. Goodman seconded the motion.

Voting in Favor of the Motion: Brown, Johnson, Goodman, Simson

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Dystonia be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

8. Petition 2017-018 to Migraines as an approved Medical Condition

There was a split vote in the past to add Migraines as a qualifying condition, ultimately the Secretary of the Department of Health did not approve to add as a condition. Dr. Brown asked Department Staff if we receive applications for migraines. Andrea Sundberg informed Board members that we do receive applications for the condition of migraines and they are applied for under Severe Chronic Pain. Dr. Brown asked if we should make the condition Chronic Headaches to include migraines.

Public commenters stated that many migraines manifest in nausea. Another liked the all-inclusive approach.

Motion: Dr Brown made a motion to approve Chronic Headaches to Include Migraines. Dr. Simson seconded the motion.

Voting in Favor of Motion: Brown, Johnson, Goodman, Simson

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Chronic Headaches to include Migraine be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

9. Petition 2017-019 to add Arthritis as an approved condition

Dr. Simson stated that the current diagnosis does cover all cases of arthritis. Dr. Simson asked that the program modify the current application to reflect that fact.

Board Action: No vote was taken as this diagnosis is already covered under several other approved diagnoses.

10. Petition 2017-020 to add Sleep Disorders as approved Conditions

Dr. Johnson commented that relief from insomnia is very helpful for those suffering with PTSD. Dr. Simson stated that issues with sleep dysfunction may be related to other conditions that are already on the approved list.

However, there is research data showing cannabinoid receptors are involved in sleep physiology.

Motion: Dr Johnson made a motion not to approve Sleep Disorders. Dr. Goodman seconded the motion.

Voting in Favor of the Motion: Brown, Johnson, Goodman, Simson

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Sleep Disorders be added to the list of conditions eligible for enrollment in the New Mexico Medical Cannabis Program.

11. Petition 2017-021 to add Substance Abuse Disorder as an approved Medical Condition.

Dr. Johnson stated that a recent study stated there was a 31% reduction in opiate use with concomitant cannabinoid use. Dr. Brown provided a statement that many of her clients state that they are using cannabis to assist in their substance abuse disorder. Dr. Goodman stated that she knows last meeting the Medical Advisory Board recommended to the Secretary of Health adding Opiate Use Disorder to the list of approved Medical Conditions.

Kenny Vigil explained that we do not have a response from the Secretary of Health related to adding Opiate Use Disorder as an approved condition. In addition, there was a current bill HB529 that passed both houses that would add Opiate Use Disorder as an Approved condition; however, the Governor did veto this bill.

Dr. Brown focused on use of cannabis from a harm reduction perspective. She stated she has seen the benefits in opiate use disorders. Dr. Brown stated that she felt approving depression and anxiety will help. Dr. Simson stated this petition's scope is much broader than opiate use disorder as defined by the DSM5 and recommended at the previous public meeting.

Dr. Simson made a motion to table decision pending the Secretary of Health's response to the November 4th public meeting recommendation to add Opioid Use Disorder to the list of approved Medical Conditions.

Public comments including stating that this is such an important issue it should not be tabled and that lives will be lost due to overdoses in the interim.

Dr Simson moved that the petition be tabled.

Board Action: The petition was tabled.

12. Petition 2017-22 to allow Patient Collectives for growing cannabis

Dr. Johnson stated this is allowed in Washington and Colorado and seems like a good idea. Dr. Brown feels this supports access and they are licensed. Other Board members agreed.

Motion: Dr Brown made a motion to approve Licensed Patient Approved Collectives. Dr. Johnson seconded the motion.

Voting in Favor of the Motion: : Brown, Johnson, Goodman, Simson

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that Licensed Patient Approved Collectives be approved to provide cannabis products to the participants in the New Mexico Medical Cannabis Program.

13. Petition 2017-005 to increase patient limit to 12-16 ounces

. Brown asked how many exceptions does the program receive. Andrea Sundberg stated about three a week. Dr. Brown asked if the Board members felt it provides a barrier to have a medical exception. Dr. Johnson stated he would also approve reciprocity. Dr. Brown stated the current limit creates a challenge for those that have a personal production license and harvest once a year.

Public Comment – current limit is not enough and also important to allow testing. In addition, another commented that the use and creation of concentrates requires much more flower product.

Dr. Simson made a motion to increase adequate supply to 16 ounces. Dr. Johnson seconded motion. Dr. Goodman asked if this change would impact medical exception. Dr. Brown modified the motion to allow for a medical exemption to increase up to 24 ounces.

Motion: Dr Brown made a motion increase the personal patient limit to 16 ounces with a medical exemption limit of 24 ounces. . Dr. Goodman seconded the modified motion.

Voting in Favor of the Motion: Brown, Johnson, Goodman, Simson

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health to approve an increase the personal patient limit to 16 ounces with a medical exemption limit of 24 ounces of cannabis products for the participants in the New Mexico Medical Cannabis Program.

14. Petition 2017-009 to remove upper THC limit.

Dr. Johnson stated the current 70% THC limit was created in regulation. Dr. Brown stated the Medical Advisory Board had previously opposed that limit.

Motion: Dr Johnson made a motion remove the upper limit of 70% for THC content. Dr. Brown seconded the motion.

Voting in Favor of the Motion: : Brown, Johnson, Goodman, Simson

Voting against the Motion: none

Absent: Schwartz

Board Action: By a vote of 4 to 0 the Medical Cannabis Advisory Board recommends to the Secretary of Health that the upper limit of 70% THC concentration for producers in the New Mexico Medical Cannabis Program be removed.

E. Public Comment

A wide range of public comment then was accepted. One questioned why DMSO was prohibited in the rules and regulations. The Advisory Board requested more information about this be forwarded to them. Others requested more clarification and definition of the terms “tinctures”, “oils” and “concentrates” and also reinforced that these products require much more plants than simple leaves or buds.

There was significant concern expressed again that the rapidly increasing number of participants is not being matched by increasing production capacity. The production has been limited by the amount of plants each producer may have as well as what is felt as an inadequate number of new licensed producers being approved. This is especially felt in the rural areas of the state.

Others expressed concern about the three Advisory Board openings and the makeup of the Board itself. They spoke about the possibility of

creating a task force with a wider variety of “stakeholders.” The Board members in attendance wholeheartedly agree with these ideas and would support such efforts. Dr Simson said that he had contacted the head of the Greater Albuquerque Medical Society to put a request for new Board volunteers in their next newsletter.

F. Adjournment and Next Public Hearing

There being no other business the public hearing was adjourned at 1:10pm. The next public hearing is tentatively scheduled for November 3rd,2017 at 10:10am.

J. Mitchell Simson MD, MPH

June 19, 2017

Acting Chair, NM Medical Cannabis Advisory Board