

January 25, 2018

To: City Council

From: Michael Szewczyk, MD  
Chair, Board of Health

Re: Resolution 185-17

On December 18, 2017, the City Council discussed R 185-17 which provided for the Council's support of legal access to cannabis as a medicine, including cultivation by patients for medical purposes. After public testimony and Council discussion this matter was tabled and referred to the Board of Health to provide input on the resolution. This matter was discussed at the Board of Health's January 16, 2018 meeting and the following recommendations were made.

### **Recommendations**

- 1) The Board of Health recommends that the City Council support statewide legalization of medical marijuana (7 yes, 2 no).
- 2) The Board of Health recommends that the City Council support Initiative Petition 2018-054, but has concerns that the number of plants allowed for home cultivation could result in excessive amounts of marijuana, leading to diversion for illicit use (5 yes, 3 abstain, 1 no).
- 3) The Board of Health recommends that the City Council support The National Academy of Sciences recommendation for a national cannabis research agenda that addresses key gaps in the evidence base on the short- and long-term effects, both beneficial and harmful, of cannabis use (unanimous).

### **Discussion**

In 2014 the Board of Health reviewed a proposed amendment to Chapter 16 of the City Code as it relates to marijuana. This amendment would have further decriminalized possession and allow for home cultivation within the city limits of Columbia. At that time, the Board of Health felt that there was some evidence as to the beneficial effects of medical marijuana but there was significant concern about inconsistency with state law and the lack of supporting regulation and infrastructure for such a program. Board members felt that legalization and cultivation was, most appropriately, a state-wide issue.

Since then, more states have legalized medical marijuana and there is additional evidence as to its benefits. The National Academy of Sciences released its third report on January 12, 2017 (prior reports 1984 and 1999) noting that "there is conclusive or substantial evidence that cannabis or cannabinoids are effective" in the treatment of chronic pain, chemotherapy induced nausea and vomiting and the spasticity associated with multiple sclerosis. Over the last few

years, several articles in scientific journals have reported that in states with legalized medical marijuana there is less opioid use in chronic pain patients and less mortality from opioid related overdoses. While this data is compelling, it is preliminary and long term studies have not been done. In addition, a recent article published by the American Psychiatry Association, in which logistic regression models were used to assess prospective associations, suggests the opposite, that cannabis use increases the risk of developing opioid use disorder.

The Board of Health believes that medical marijuana can have beneficial effects, but there is disagreement among board members on whether or not statewide legalization, be it through legislation or citizen initiative, is the best way to make it available to those who may benefit. The majority of board members recognize that the classification of cannabis as a Schedule I drug and the politics surrounding its use, has prevented much needed research regarding the health effects of its use. It is also recognized that the most likely path for legalization in Missouri is through a citizen initiative petition.

Currently there are 26 initiative petitions regarding marijuana that have been filed with the Missouri Secretary of State's office. The Board of Health believes that Initiative Petition 2018-054 represents a reasonable mechanism by which medical marijuana can be made available to the public. It includes broad language that allows the Department of Health and Senior Services to develop regulations and establish the necessary infrastructure for a statewide program and does not prevent enforcement of inappropriate or illicit use of marijuana. That said, some Board members did have concern that allowing 6 plants per person or 12 plants in a household was excessive, having heard prior testimony that each plant could produce a pound of marijuana. It was felt that excessive amounts could lead to diversion, recognizing that marijuana is a "cash crop". These concerns are somewhat mitigated by the language in Petition 2018-054 which limits a person's supply to what would be necessary for 90 days of use.

The National Academy of Sciences has noted that public agencies, philanthropic and professional organizations, private companies, and clinical and public health research groups need to fund and support cannabis research. Clearly, over the last 50 years, research that should have been done, has not been done. As the Council considers supporting the effort to legalize medical marijuana, the Board of Health recommends that the Council also consider voicing their support for further research regarding the health effects of marijuana.