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Date: May 4, 2018

To: House Human Services Committee

From: Jon Porter, MD

Medical Director

University of Vermont Medical Center

Re: Opposition to Section 3 of S.216

I write as a member of the Vermont Medical Society and as a physician involved in the care of patients experiencing chronic pain to oppose Section 3 of S. 216, which would expand the definition of conditions allowing a patient to qualify for the marijuana registry to any "Other disease, condition, or treatment as determined in writing by a qualifying patient's health care professional."

## My concerns include the following:

- The legislation subverts a long-standing and effective federal regulatory process designed to ensure that medications are efficacious at specific doses for specific conditions. In aspiring to the injunction of primum non nocere, physicians and other clinicians must rely on empirical, peer-reviewed studies to understand the benefits and associated risks of all medications. While cannabinoids hold promise in a number of areas, further work is needed to establish both effectiveness and risk. I cannot think of a single other medication which has come into general medical use by way of such a legislative end run.
- The provision of marijuana for essentially any condition holds the potential for adversely affecting the relationship between patients and physicians. In essence, Section 3 conveys to the public the legislature's seal of approval for the use of marijuana for any condition; patients may (very understandably) view their physician as unsupportive or uncaring about their condition if they hesitate or refuse to prescribe marijuana when they have serious concerns about its efficaciousness or safety in a particular patient.

• In real sense, S. 216 elevates medical marijuana to the status of a medical panacea. While there is no doubt that marijuana and its synthetic forms hold promise to alleviate suffering, this is a psychoactive drug with addictive potential, serious neurodevelopmental and cognitive impacts on those who use it regularly under the age of 25, and real public health consequences for Vermonters.
I respectfully ask the Committee to consider the provisions and implications of Section 3 seriously and amend it to ensure that medical marijuana is dispensed in accord with sound scientific principles.