

Vermont
Medical
Society

Sen. Economic
Development
Committee

**VERMONT
MEDICAL SOCIETY
APRIL 30, 2025**



H.321 - GENERAL SUPPORT FOR HOUSE-PASSED VERSION

In 2020, when Act 164 was passed the original intent was to create a safe retail market for current cannabis users to safely access regulated, cannabis products - not to cultivate new users or grow an unwieldy market.

With over 110 recreational shops, and cannabis retailers and communities reporting the market is oversaturated, the Vermont Medical Society supports the temporary moratorium on retail licenses. This pause can allow for rule-making that engages in robust market analysis, includes community input, and determines the appropriate density on the statewide and community level to protect public health and sustain the market.



Comments on Suggested Amendments

Direct Sales

- Potential for erosion of public health protections
- Increasing retail density
- Oversaturating an already saturated market

Advertising Regulation

- Constitutional rights of youth
- Websites/online presence
- Youth more susceptible to marketing
- VT teens cannabis use
- Alcohol ad review

Potency of Edibles

- 5 to 10% potency per edible
- Data shows exponential increase in youth accidental ingestions
- Physicians report respiratory distress in toddlers

DIRECT SALES

The Vermont Medical Society does not support direct sales of cannabis “on-farm” or “off-farm,” in part because of the potential for erosion of public health protections like age compliance, packaging and labeling requirements and product potency restrictions.

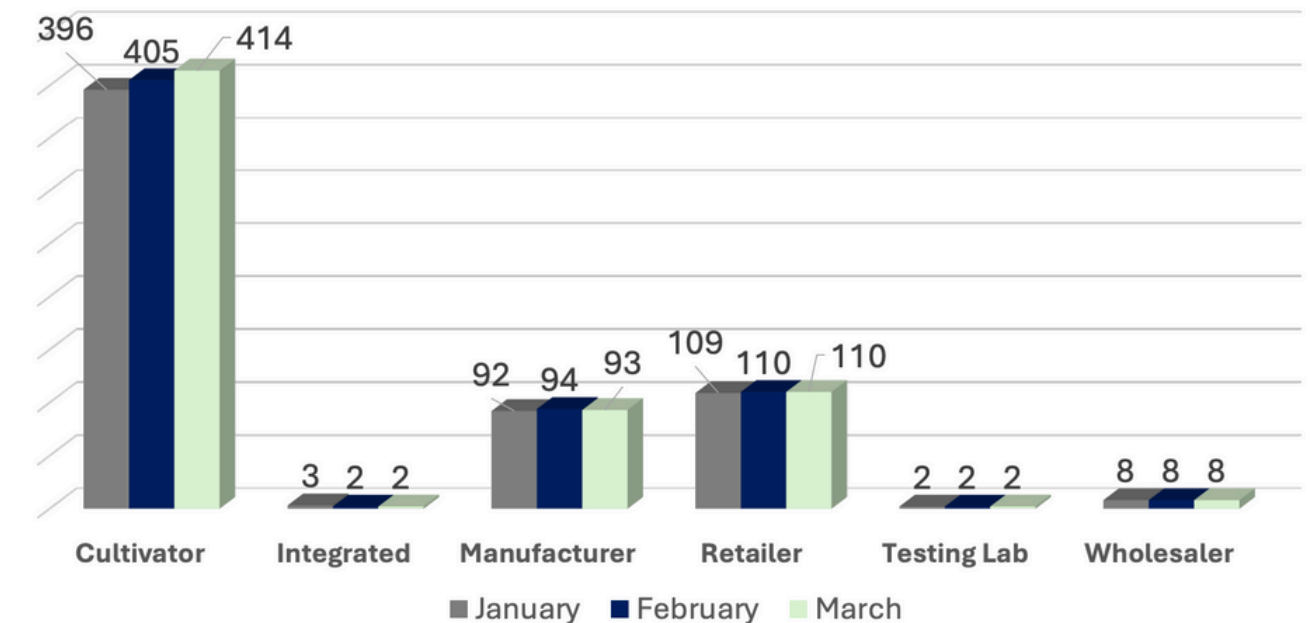
“A crucial factor to consider in regulating products that pose health risks is the method of sale. The direct delivery of recreational cannabis products, similar to tobacco products, can inadvertently enhance access for youths and young adults if regulations do not adequately cover various policy dimensions, such as age verification requirements and delivery-specific licensing and enforcement.” [American Journal of Public Health](#), Feb. 2025

Public health impact of Increasing retail density:

Data from Vermont prevention specialist, Dr. Andrea Villanti, shows a direct correlation with states that have legalized marijuana sales and a reduced perception of harm among youth and young adults. A [CDC study](#) from September 2020 looked at youth exposure to marijuana advertising after Oregon legalized retail sales of marijuana and found that about three-quarters of youths reported exposure to cannabis advertising, with exposure higher in youths in school districts with a closer average proximity to retail cannabis stores and persistent online exposure.



ADULT USE PROGRAM – MARCH 18, 2025
Active Licenses (629) by Type



With 414 growers and 110 retailers, direct sales could tip an already saturated retail market.

ADVERTISING REGULATION

The VMS urges the Committee to maintain the original intent of Vermont's advertising protections to ensure that cannabis advertising does not promote the use of cannabis, that less than 15% of those exposed to cannabis advertising are under 21, and that consumer protection, public health and public safety take priority over creating an industry dependent on developing new users.



From Feb. 27, 2020 when Act 164 was still under debate

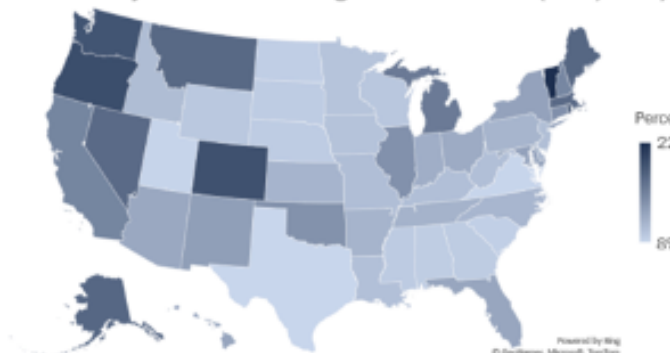
"The purpose of the bill is safety for current users," (Rep. Anne) Donahue said. "If there are more people who start using because they see ads, that means there are more people potentially on the highway driving impaired; there are more children exposed — the negative things that we don't want to see happening." [Seven Days VT](#)

"Rep. John Gannon (D-Wilmington), vice chair of Gov Ops, agreed that the ban jibes with the bill's intent. "We really were focused on making sure that children were not going to be encouraged to use cannabis in the bill," Gannon said. "I think this will help." [Seven Days VT](#)

Vermont has the highest percentage of people 12 and older reporting past 30-day cannabis use

Past 30-day cannabis use among those 12 and older was highest in Vermont (22%) compared to other states in 2019/2020. Overall, 12% of people in the U.S. who were 12 and older reported using cannabis in the past 30 days.

Past 30-Day Cannabis Use Among Those 12 and Older (2019/2020)



Data source: National Survey on Drug Use and Health

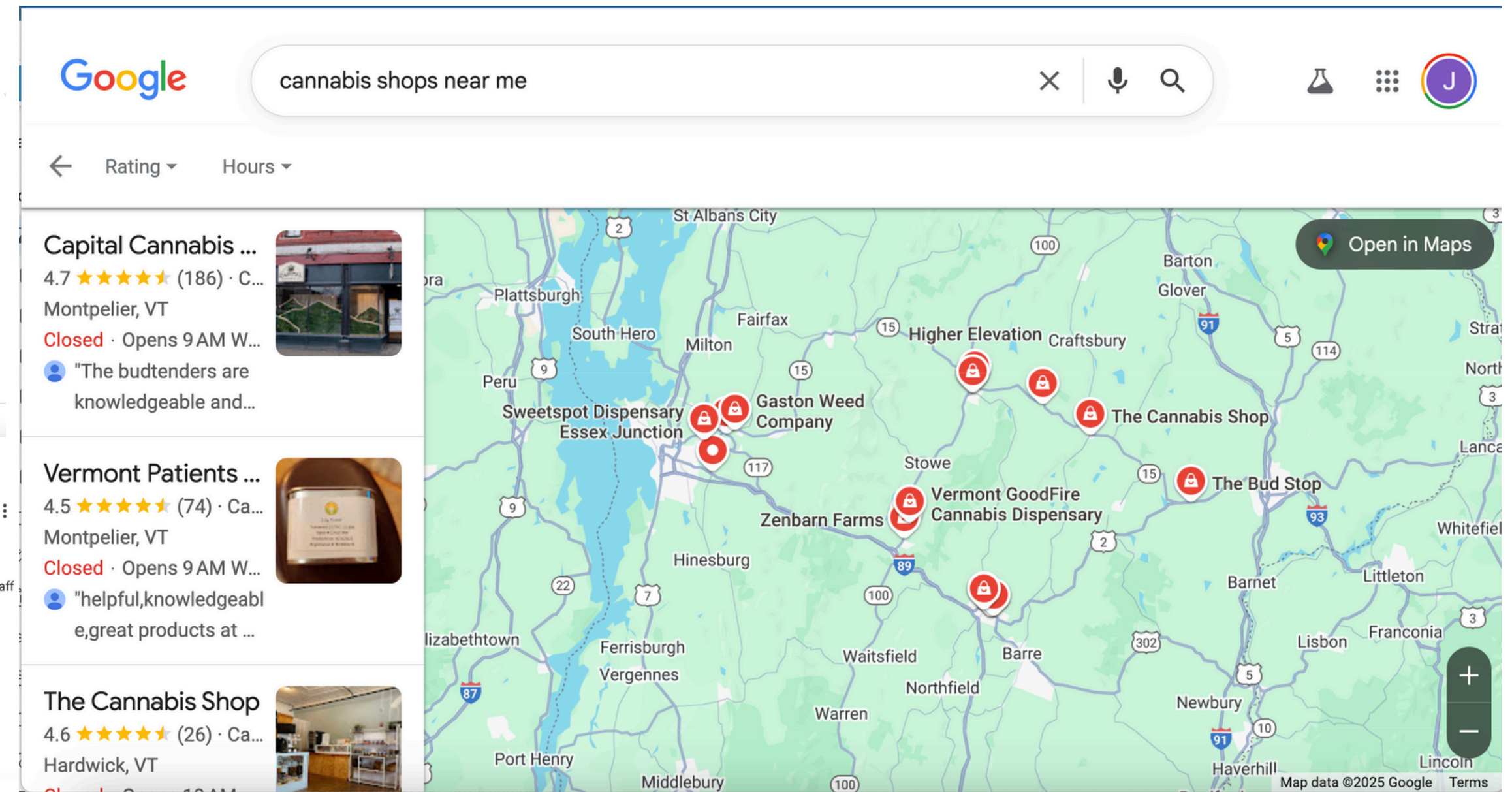
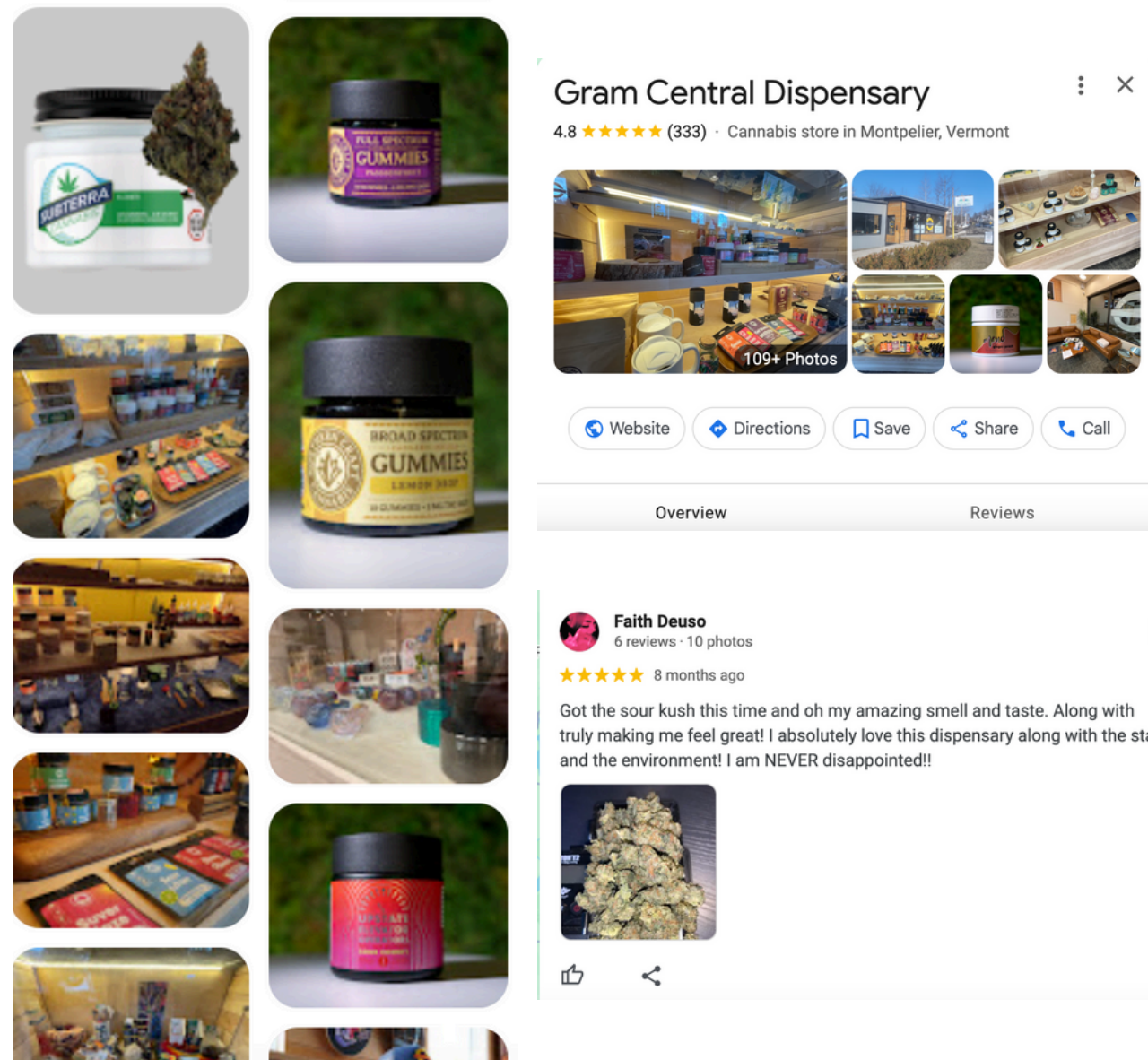
Vermont Department of Health

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We know youth and young adults are more susceptible to advertising. A recent study said because critical reasoning abilities are not fully developed during adolescence, policymakers should "ensure regulations to restrict marketing of unhealthy commodities protects adolescents as well as younger children." Similar to what this body is seeking to do with the Kids Code bill, Vermont's medical and public health community wants to protect our youth and young adults from digital marketing and promotion of a product while their brain is still developing.

ADVERTISING REGULATION



“Though most social media platforms prohibit paid cannabis ads, they allow brands to post unpaid cannabis ads (e.g., organic posts on brand pages) that are easily accessible to underage youth. Given that 95% of adolescents aged 13–17 and 93% of young adults aged 18–29 use social media (Gottfried, 2024; Sidoti & Faverio, 2024), it is unsurprising that exposure to cannabis ads on social media is more common than in traditional media (Krauss et al., 2017; Rup et al., 2020).” March, 2025, International Journal of Drug Policy

ADVERTISING REGULATION

Constitutionality?



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ADVERTISING TO CHILDREN AND THE
COMMERCIAL SPEECH DOCTRINE:
POLITICAL AND CONSTITUTIONAL
LIMITATIONS

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Keep in mind that currently under VT State Dept. of Liquor Control Advertising Regulations that any point-of-sale alcohol advertising requires DLC to approve the advertising beforehand. "6.Any malt or vinous beverage point of sale advertising shall be submitted to the Liquor Control Board for approval prior to its use by manufacturers, holders of certificate of approval, wholesale dealers, or retailers in Vermont."

Case: 24-60086 Document: 53-1 Page: 1 Date Filed: 11/22/2024

United States Court of Appeals
for the Fifth Circuit

United States Court of Appeals
Fifth Circuit
FILED
November 22, 2024
Lyle W. Cayce
Clerk

No. 24-60086

CLARENCE COCROFT; TRU SOURCE MEDICAL CANNABIS,
L.L.C.,

Plaintiffs—Appellants,

versus

CHRIS GRAHAM, in his official capacity as the Commissioner of the
Mississippi Department of Revenue; RILEY NELSON, in his official capacity
as the Chief of Enforcement of the Mississippi Alcoholic Beverage Control
Bureau; DOCTOR DANIEL P. EDNEY, in his official capacity as
State Health Officer for the State of Mississippi Department of Health,

Defendants—Appellees.

Appeal from the United States District Court

“As a threshold matter, commercial speech receives no First Amendment protection if the underlying commercial conduct is illegal. The Controlled Substances Act (“CSA”), 21 U.S.C. § 801 et seq., prohibits activities involving marihuana—including activities involveing medical marihuana—nationwide. And the Supremacy Clause means that the CSA is the law in Mississippi regardless of what state law might say. Marihuana is therefore illegal in Mississippi, and the state faces no constitutional obstacle to restricting commercial speech relating to unlawful transactions. Accordingly, we affirm the judgment of dismissal.”

POTENCY OF EDIBLES

Kids accidentally ingesting cannabis edibles at increased rate

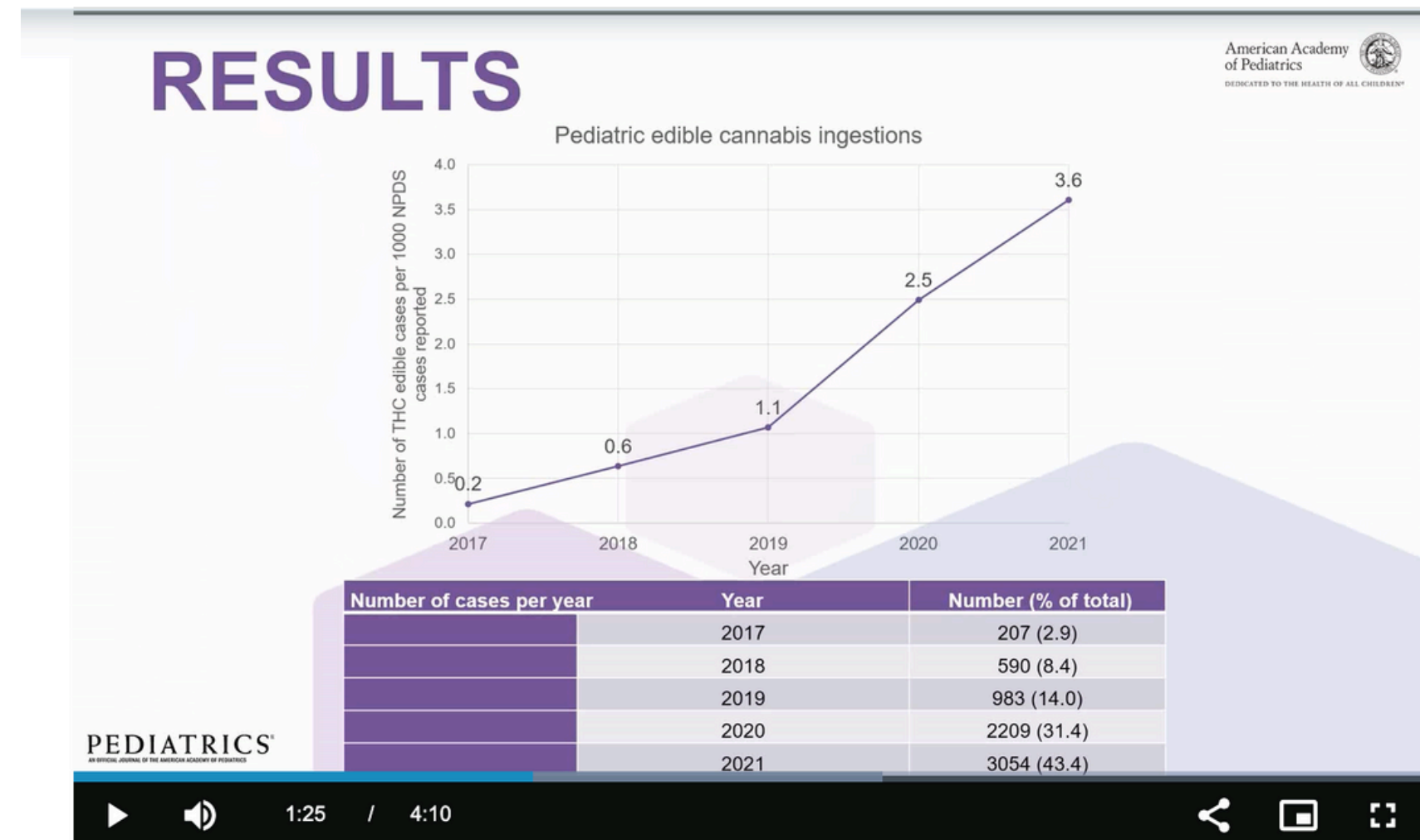


With the recent reports of increased incidents of child poisoning due to cannabis ingestion, there is no justification to increase the single cannabis edible potency. Nationally, regionally, and locally, unintentional pediatric cannabis edible ingestions for kids under the age of 6 has increased exponentially. A 2021, American Academy of Pediatrics study reported an increase in cases of 1375% between 2017 and 2021, with 22% of those patients admitted to the hospital. January 11, 2023, WCAX reported that the Northern New England Poison Control released data showing a spike in those under the age of 5 ingesting cannabis. Dr. Jill Rinehart, an associate professor of pediatrics at UVM Larner College of Medicine, said “Even a two-and-a-half or five milligram cannabis chewy, if they take more than one or even one, that’s a really large amount for a small body to handle.”



The CCB’s own Point of Sale flyer states that “People that choose to consume edibles should start with small amounts, usually 1 to 2.5 mgs.” The Committee should reject the proposal to increase the potency of individual edibles to 10mg. The risk to the general consumer and to kids should outweigh the push for less packaging.

POTENCY OF EDIBLES



VT is seeing an increase in incidents of accidental edible THC ingestion by toddlers and children. Symptoms may include altered mental status, unresponsiveness, respiratory suppression and even respiratory failure requiring intubation and mechanical ventilation. When symptoms are severe, children often need to undergo intensive emergency work-up to rule out other causes. These tests include CT or MRI of brain, lumbar puncture, and EEG. There is no reversal or antidote to THC toxicity and some children require hospitalization or intensive care for supportive care. National studies have shown that severity of symptoms is correlated with dose ingested. Limiting the dose per body weight (mg/kg) available to toddlers and children reduces the risk of severe toxicity.



THANK YOU!

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