

Recommendations for the OCMA Stakeholders Advisory Committee

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1. Inclusiveness and Transparency

In order to address the needs of medical cannabis users and to meet the criteria set forth by the courts, the OCMA Stakeholders Committee must have permanent inclusion of medical user representatives and compassion club representatives.

The regulations have been unable to meet the needs of Canadian medical cannabis users, both those with and without licenses. As a result the program has been considered unconstitutional in the courts. The committee must address these problems and can only do so with the permanent inclusion on their committee of medical user and compassion club representatives.

2. Decentralization

We recommend that like other natural health products and pharmaceutical medications, the lawful possession of medicinal cannabis should not require authorization from a centralized federal body, the Office of Medical Cannabis Access (OCMA).

If cannabis is to be regulated within the healthcare system and require the input of a healthcare practitioner, the choice as to its use must be a health care decision made by both the patient and the health care practitioners. It is inappropriate for the government to interfere in this decision by limiting its use.

3. Practitioner Authorization

We recommend that regardless of the condition in question, a recommendation from a general practitioner or certified alternative healthcare provider, such as a Naturopathic Dr., or a Dr. of Traditional Chinese Medicine, should be sufficient authorization to legitimize use or to access to Health Canada's medicinal cannabis program.

The current application process is far too onerous especially for non-terminal patients who must seek the support of one or two specialists. The specialist requirement also places an unnecessary burden on the healthcare system.

British Columbia Compassion Club Society

Recommendations to the Office of
Cannabis Medical Access
Stakeholders' Advisory Committee

Vancouver Island Compassion Society

4. Costs

The costs of medicinal cannabis must be subsidized by our healthcare system.

It is essential that people be able to access their medicine of choice regardless of their level of income. The sickest people also tend to be those living in the most poverty. People who have obtained their doctor's recommendation for the use of cannabis have substantiated their medical need. This should be sufficient for cost coverage as is given for other prescription drugs.

5. Amnesty

Medicinal cannabis users, distributors and their suppliers must be given amnesty immediately.

Many users, distributors and suppliers of medical cannabis have been and will continue be tied up in lengthy and expensive legal proceedings. These resources should be spent on providing suffering Canadians with access to medicinal cannabis, instead of fighting criminal charges. While the regulations regarding the supply and distribution of medicinal cannabis are being developed, prosecution of those doing this valuable work must end now.

6. Legitimize Community Based Distribution Centers

All non-profit, registered Compassion Clubs should be licensed and accepted by all levels of government.

The Compassion Club model has been recognized by the Senate and many provincial judges as providing the services the government has thus far failed to provide.

Registered non-profit compassion societies provide a wealth of services, knowledge and experience the pharmacy model cannot recreate. The pharmacy model for the distribution of cannabis will not meet the needs of all medical cannabis users. Licensing non-profit distribution centers will provide those in need with access to valuable services and knowledge, save the government a significant amount of money, and will prevent commercialization of and profiteering off medicinal cannabis distribution.

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Vancouver Island Compassion Society

7. Whole Plant Cannabis vs Synthetic Pharmaceutical Products and Extracts

It is crucial that medicinal users of cannabis continue to have the choice to use the whole plant medicine.

Our members have reported tremendously negative side effects from synthetic versions of the isolated active ingredients of cannabis. Were pharmaceutical companies able to replicate the exact ratios of all the active ingredients in cannabis, many people would still prefer to use natural healthcare products. This right to choose natural health care products must be defended as an essential health care choice.

The regulations repeatedly mention pharmaceutical products and apply the language of pharmaceutical drugs to cannabis. While it is evident that synthetic cannabis is of great interest to the pharmaceutical industry, those interests should not supercede the interests of the already existing and flourishing natural medicine industry.

8. Monopoly of Supply

The plethora of experience and expertise regarding production within the medical cannabis community must be legitimized, valued and protected.

The medicinal cannabis community is concerned that the only legal supply will continue to be limited to one or a few approved producers. Competition, in a free market, on the other hand will increase the quality, broaden the selection, and decrease the end cost of the medicine.

9. Natural Health Product

Cannabis is a natural health care product and should be regulated as such.

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