

# VICS Newsletter



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## News and information on medical cannabis

### Medical Cannabis News:

#### Canada - Health Canada's Response to the Hitzig Decision

In response to the October 7 Ontario Appellate Court ruling that found Health Canada's (HC) Marihuana Medical Access Regulations (MMAR) unconstitutional, the Government of Canada announced on December 5 that it has amended the regulations, their way. Ignoring the court, the only changes are to remove the need for a second specialist to support applicants in the third group and to allow compensation for designated growers.

However, the limitations on production of marihuana by designated growers have been maintained. The HC press release stated "It was necessary to maintain these limitations **to minimize the risk of diversion and to allow Canada to continue to meet its international obligations.**" (emphasis added) Sounds like HC does not trust sick Canadians and that our neighbour's concerns are more important than a health policy for ill Canadians.

"The Government of Canada is committed to its program on marihuana for medical purposes," said Minister McLellan. "The amendments announced today will ensure that Canadians who suffer from serious medical conditions for whom conventional therapies have not been successful will have reasonable access to a legal source of marihuana."

Legal users are not happy with the announcement; by limiting grow operations that can produce quality medicine, they are forced to either obtain inferior government cannabis grown in Flin Flon or purchase from the black market.

HC defends its decision by stating that the "court clearly stated the Government of Canada could adopt an alternate remedy to address the issue of reasonable access to a legal source of marihuana for medical purposes. The Government of Canada believes its actions are consistent with the principles set out in the Court's decision, ensuring the constitutionality of the MMAR."

Alan Young, lawyer, said "... they're simply ignoring the court ruling. I will set the wheels in motion to take Health Canada to court for contempt of court." Further, it is our tax dollars that are being used by Health Canada to prolong the suffering of individuals that qualified physicians have deemed ill and have recommended cannabis as medicine.

Source: <http://www.mapinc.org/drugnews/v03.n1897.a04.html>

#### Justice Orders Guilty Verdict During Krieger Trial

Grant Krieger, an MS sufferer from Alberta and admitted cannabis user and grower, was found guilty of distribution of cannabis to other medical cannabis patients in a second trial.

During the course of the trial, Krieger's compassion and altruistic behavior were noted and it became clear to some that the jury would acquit him. However, showing little compassion himself,

Justice Paul Chrumka told the jury that they must convict Krieger ("I ask you to retire to the jury room to consider what I have said. Appoint a foreperson and return with a verdict of guilty.")

Seven hours later, however, two jurors requested to be excused from jury duty because they could not in good conscience convict Krieger. Justice Chrumka refused their requests and ordered them back. Three hours later the jury returned with a guilty verdict. While Justice Chrumka imposed no fine, no jail time and ordered the return of his grow equipment, Grant Krieger still gets a criminal record for something he still maintains was done out of necessity. What purpose does this serve?

Krieger was found innocent of the charges of possession and trafficking in his first trial in 2002 using a similar defense. The Crown appealed and successfully got another hearing for the charge of possession for the purpose of trafficking. Chrumka said Mr. Krieger admitted to running a grow operation, which meant guilt had been proven beyond a reasonable doubt. He also said that since nobody was in "imminent" peril and there were reasonable legal alternatives (such as what for MS?) for Mr. Krieger, the defence of necessity cannot apply.

Source: <http://www.mapinc.org/drugnews/v03.n1985.a10.html>

#### Kubby Denied Refugee Status

Not about to suffer the wrath of our good buddies to the south, the Canadian Immigration and Refugee Board denied refugee status to American medical cannabis exile Steve Kubby in early December. Refugee status was also denied to his family.

Steve Kubby fled to Canada in 2001 to escape a possibly fatal prison stay because he would not be allowed to consume medical cannabis for his adrenal cancer while serving a four month term - denial of this drug for an extended time could kill him. One Board member wrote that there was no evidence that depriving him of cannabis while incarcerated would kill him, despite testimony from Dr. J. Connors of the BC Cancer Agency who told the court during an April hearing that Kubby would die within four days if denied access. Are we going to gamble on his life? If indeed he would face "cruel and unusual punishment or risk to life" by returning (California officials have confirmed that he will not be allowed cannabis while in prison), does Steve Kubby not have a legitimate refugee claim?

[Note: there has never been a successful refugee claim between Canada and the US - that would be like saying our neighbours treat people inhumanely]

Source: <http://www.mapinc.org/drugnews/v03.n1985.a10.html>

Thanks to all the care givers, an often overlooked group of people who work hard with VICS members to improve their quality of life. This issue is dedicated to members we have lost in 2003.  
PEACE

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## US Medical Pot Users Win Key Ruling:

An appellate panel in San Francisco says the federal government cannot prosecute patients if physicians call cannabis their only relief and the drug is obtained at no charge. The 2-1 decision would protect many medical cannabis users from prosecution in Alaska, Arizona, California, Hawaii, Nevada, Oregon and Washington (states that have medical cannabis laws).

This is the second defeat for the feds in 2003. Earlier this year, the Supreme Court upheld a ruling that said federal officials could not threaten to revoke the prescription rights of doctors who approved marijuana use for their patients.

Despite passage of Proposition 215 in 1996 in California which legalized use of marijuana in that state, the federal government has pursued a number of cases against medical cannabis users, growers and distributors.

Routine law enforcement matters are normally handled by the states, but the feds claim that they can get involved because drugs are sold in interstate commerce and involves federal jurisdiction. Based on that rationale, they seized cannabis used by numerous individuals throughout California.

Two of these people sued Attorney General John Ashcroft in federal court, asking for a court order barring the government from confiscating their cannabis or taking any other action against them. They argued that since they used the drug solely for their own medical purposes, and no money changed hands, their actions did not involve interstate commerce. A federal district judge ruled against the argument but an appeals court sided with them. As Judge H. Pregerson put it, "The intrastate, non-commercial cultivation, possession and use of marijuana for personal medical purposes on the advice of a physician is, in fact, different from drug trafficking." Thank you judge.

Source: <http://www.mapinc.org/drugnews/v03.n1931.a07.html>

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## Cannabis and MS Study:

A cannabis pill appeared to relieve some of the symptoms of multiple sclerosis (MS) in the first scientifically rigorous study of the strongly debated drug.

The research, published November 2003 in the Lancet medical journal, found that even though improvements could not be detected by doctor's tests, a greater proportion of patients taking the drug reported reduced pain and muscle pain than those taking fake capsules. One study leader said the research raises questions about what is more important: a doctor's measurement or the patient's perspective.

Multiple sclerosis, a common neurological disease, is difficult to diagnose, unpredictable in its nature, and its symptoms are hard to measure. Orthodox treatments often provide little or no relief, so many search for alternatives.

The study involved 630 MS patients around Britain.

Source: <http://www.sfgate.com/article.cgi?file=/news/archive/2003/11/06/international0127EST0410.DTL>

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## Cannabis Crusader Dies:

Londoner Lynn Harichy, whose efforts helped to legalize medical marijuana use in Canada, died Dec. 25, 2003, after a lengthy battle with multiple sclerosis. She was a long time crusader for the legalization of cannabis for medical purposes.

Harichy ran the Cannabis Compassion Club which supplied pot to more than 600 people who suffer from MS, AIDS, cancer, epilepsy and chronic pain.

Source: <http://www.mapinc.org/drugnews/v03.n2000.a03.html>

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## Welcome Mr. Pierre Pettigrew:

As of mid-December 2003, and possibly until the next election in spring, we have a new federal Minister of Health: Mr. Pierre Pettigrew.

As you might recall, Mr. Pettigrew was the international trade minister who represented Canada (in a shabby manner) in softwood lumber talks with the US in 2003.

On behalf of everyone in search of equitable and fair health care, we hope Mr. Pettigrew can make a difference for all Canadians. We hope that he will work with the medical cannabis community and compassion clubs to address the dysfunctional, ineffective and unconstitutional medical cannabis program as soon as possible. We also hope that he can treat sick Canadians with more respect than his amoral predecessor.

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## *ED's 2003 LIST*

### *Thumbs Up*

**VICS members and care givers** - need we say more?

**Compassion clubs, societies, buyers clubs,..** - for filling the vacuum that Health Canada left by providing inferior medicine in their misguided attempts at horticulture.

**Vancouver's safe injection site** - finally, harm reduction measures instead of punitive action, and, like it or not, it is a success that saves lives.

**Netherlands** - became the first country in the world to make cannabis available as a prescription drug in pharmacies to treat chronically ill patients.

**The Volcano Vapourizer** - the best device (for now) to use for dried plant extraction without smoking.

**Burns Bog** - Four levels of government got together and actually did something for all of us (plants and critters too) by preserving Burns Bog in Delta, BC, a rare and large peat bog with a unique ecosystem.

### *Thumbs Down*

**Health Canada** - for continuing to treat sick Canadians in a condescending and shameful manner, and for spending our tax dollars to fight against their needs. We're not talking recreational cannabis use here, remember?

**BC Liberal government** - for continuing to govern, with impunity, based solely upon the 'bottom line' where people and resources are valued (or not) for the capital they can generate (or not), regardless of social, environmental or cultural issues.

**Salvation Army** - for firing workers at Sunset Lodge in Esquimalt and re-hiring at a cheaper wage. This comes from a multinational organization whose Canada-Bermuda division alone owns \$1.13 billion (yes, billion) in assets and which opened on the Nasdaq last summer.

**Greater Victoria** - repeat after me; amalgamation, amalgamation. And don't forget, we still send untreated 'sewage' (it ain't just pee and pooh) into the Juan de Fuca Strait.

**Bush Administration** - for starting a war based upon misinformation; after nine months of searching in Iraq, not a single item has been found so far from a long list of weapons of mass destruction.

**Mean, greedy people** - enough said.

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*"Happy New Year from the staff at the VICS"*

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## Racial Bias Evident in Drug Arrests:

The release of a recent report out of Seattle that confirms the existence of racial discrimination with drug-related crimes might sound like the same old news. However, the latest statistics are truly shocking, adding to the years of research that reveal rampant racial discrimination at every level on the war on drugs. Released in early December, 2003, the study was commissioned by Seattle public defenders and authored by U. of Washington sociologist Katherine Beckett.

The study shows that African-Americans who sell drugs in Seattle are much more likely to be arrested than Caucasian offenders. Although whites comprise a much higher proportion of those who actually sell drugs, between 1999 and 2001 blacks were 2 to 4 times more likely than white offenders to be arrested for selling cocaine; 22.6 times more likely to be arrested for selling heroin; and 31.6 times more likely to be arrested for selling methamphetamines. While blacks make up about 8% of the Seattle population (2000 census), 63% of those arrested by the Seattle Police Dept. for selling cocaine, heroin, methamphetamines and ecstasy were black while just 19% were white.

In 2000, Human Rights Watch reported that although whites and blacks use drugs at a similar rate, black men are admitted to state prison on drug charges at a rate that is 13.4 times greater than that of white men -- with rates up to 57 times greater in some states. Some of the factors that have been shown to contribute to the dramatic racial disparities in the arrest and conviction rates of drug users and sellers include:

**Systematic racial profiling** - a 1996 Maryland study of traffic stops showed that blacks constituted 72.9% of drivers stopped and searched by state police, though they made up only 17.5% of total drivers and were no more likely than their white counterparts to be violating the law.

**Law enforcement practices** - aggressive police tactics such as massive drug sweeps, "buy and bust" operations and other activities are heavily targeted at street level drug activity, as opposed to less visible drug activity in more affluent communities.

**Sentencing disparity** - federal mandatory minimum sentences make African-American drug offenders more likely to be incarcerated and for longer periods of time than whites. Under legislation passed by Congress in 1986, it takes 1/100 as much crack cocaine as powder cocaine to trigger equal mandatory minimum sentences. In 1985, although blacks did not make up the majority of crack users, they accounted for 88% of those sentenced for crack offenses.

Source: "New Report Finds Stark Racial Disparities in Arrests of Drug Sellers in Seattle", Drug Policy Alliance press release, Dec. 2, 2003 (<http://www.drugpolicy.org>)

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## Women Who Smoke Run Higher Risk of Cancer:

A recent study states that women who smoke tobacco are twice as likely to develop lung cancer as their male counterparts. Research presented in Chicago at the annual meeting of the Radiological Society of North America also confirmed some older assumptions: the risk of lung cancer increases with amount smoked and as a smoker ages.

Lung cancer is the leading cancer killer in both men and women in Canada; an estimated 10,900 men and 7,900 women will die from it. The researchers say they do not know why women are so much more vulnerable to tobacco smoke but others have speculated that smoking affects estrogen levels.

Women were long believed to have a lower susceptibility to lung cancer than men, but that erroneous assumption was likely based on their lower cigarette consumption.

The study was conducted on a group of roughly 3000 men and women aged 40 years or older with a history of smoking.

Source: "Women run double risk of lung cancer", by Andre Picard, Globe and Mail, Dec. 2003

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## Bend Over and Open Wide Canada:

Softwood lumber. Medical cannabis. What's the connection and why are we talking about them in this newsletter?

Both are resources that create conflict between Canada and the United States, resulting lately in court decisions that are unfavourable to Canadians and/or an insult to our goodwill and sense of fair play (there's that 'fair' word again, as in 'fair' trade). And the proposed softwood lumber deal was parlayed by none other than our ex-federal minister of International Trade and our new Minister of Health Mr. Pierre Pettigrew.

The proposed softwood lumber agreement meets the objectives of the influential US lumber lobby, whose goal has always been to restrict market access for lower-priced Canadian softwood.

The agreement would give Canadian lumber access to 31.5% of the US market, with stiff tariffs above that - that's a 10% drop in production that would result in more Canadian jobs lost. The quota would have to be split among provinces.

The main attraction of the deal, other than secure access to the US market, would be the immediate removal of duties averaging 27%. But, only roughly half of the \$1.6 billion of excess duties will be returned. The other half is to be confiscated on behalf of aggrieved US producers based on a controversial US law that has already been ruled illegal by the World Trade Organization.

What a bunch of bullies - sounds like robbery. Why give in when the US has just lost a case involving steel exported from Europe? As the Globe and Mail put it, "What happened to Minister Pierre Pettigrew's oft-repeated vow to fight to the bitter end as a matter of principle?" (What happened to finding other markets for our resource?)

And now Mr. Pettigrew is the minister of Health, overseeing the OCMA. Reflecting on how Mr. Pettigrew has mis-represented Canadian interests so far, some are apprehensive with the appointment. We hope he can truly embrace our health needs and make positive change for all.

Source: "A Poor Agreement On Softwood Lumber", Editorial, Globe and Mail, December 9, 2003



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***"It appears that some plants make some kind of evolutionary decision to become involved with our trip. Marijuana is very involved"*** -- Dr. Andrew Weil

***"Person who stand on toilet is high on pot"*** -- Anonymous

## **Cannabis News:**

### **Canada - Federal Cannabis Laws Upheld**

A Supreme Court of Canada ruling, voting 6 to 3, has upheld the federal government marijuana laws. It is now up to the federal government to deal with the issue through legislation. The majority said it would be going too far to expand the Charter of Rights to protect people based on lifestyle choices. "The Constitution cannot be stretched to afford protection for whatever activity an individual chooses to define as central to his or her lifestyle," the court said. "One individual chooses to smoke marijuana; another has an obsessive interest in golf; a third is addicted to gambling. A society that extends constitutional protection to any and all such lifestyles would be unworkable."

The majority said there is nothing unconstitutional about the government choosing to criminalize marijuana based on public health concerns even as it turns a blind eye to the greater dangers associated with alcohol or tobacco use. The majority also rejected arguments that the possibility of a jail sentence for possession amounts to unconstitutional overkill.

The dissenting judges said the government failed to prove that the risks of pot are serious and warrant the use of criminal sanctions.

The appellants -- David Malmo-Levine, Victor Caine and Christopher Clay -- challenged the government to show serious harm to the health of marijuana users in order to justify a law that deprives offenders of their liberty. They stressed that marijuana is a unique case, since a host of doctors and government-appointed inquiries have concluded that the drug is relatively safe.

As a result of this decision, the House of Commons will be allowed to respond to the call of PM Paul Martin for a debate on the issue of the decriminalization of small quantities of marijuana. Mr. Martin intimated that he will reintroduce a bill, like the now-dead Bill C-38, that will decriminalize possession of small amounts of cannabis. In giving a modest endorsement to decriminalization, Mr. Martin said it would have to involve "very, very, very small amounts." (exactly how much is "very, very, very small"?)

Chretien's cavalier attitude towards cannabis in the past has caused friction with the White House but John Walters of the Office of Drug Control Policy is obviously much happier with the new 'man' at the helm. Walters praised Martin for vowing to overhaul cannabis laws, especially tougher sentences for growers. This is coming from someone who earlier accused Canada of mishandling drug policy.

We should not forget that when the federal liberals were developing Bill C-38, then Justice Minister Martin Cauchon flew to Washington to 'discuss' the proposed bill with General Attorney

John Ashcroft before allowing the House of Commons a look over. Jack Layton, the new federal NDP leader, stated at the time, "There goes Canadian sovereignty up in smoke. Here's the American government advising on what Canadian policy will be before the House of Commons even has a look at it."

These kinds of actions are repugnant and insulting to all Canadians. Who is our drug policy intended to serve? Perhaps it's time to remind our elected officials.

Source:

"Pot Ban Is Constitutional, Supreme Court Says", The Globe and Mail, Dec. 23, 2003.  
"Pot Laws Upheld, US Elated", The Vancouver Sun, Dec. 24, 2003.  
"US Gets Its Way With Pot Decision", Victoria News, Dec. 31, 2003

### **Cannabis Possession Charges To Be Dropped**

The federal Justice Department announced last December that it intends to stay about 4,000 charges of possession as a result of legal battles over medical marijuana. The decision will apply to every person in Canada charged with possession of marijuana between July 31, 2001, and October 7, 2003.

The Justice Department intends to cease prosecutions on the cases because of an Ontario court ruling in 2000 that found medical cannabis users had the right to possess less than 30 grams. The judge delayed the ruling's effect for one year in the hope the federal government would introduce a medical cannabis law. The government balked. Instead, the Cabinet issued medical cannabis access regulations one day before the deadline. The Ontario ruling created a loophole, effectively invalidating possession law as unconstitutional because it failed to provide an exemption for medical use.

Source: <http://www.mapinc.org/drugnews/v03.n1847.a08.html>

## **Chronic Pain Study Begins in Montreal:**

A Canadian study on the value of cannabis as a pain reliever is finally underway at McGill University after years of delay.

Dr. Mark Ware's study aims to determine the therapeutic value of cannabis for patients that he treats for severe, chronic pain.

Health Canada had held up the study but has now given permission to a supplier (?) to release its product for the trial.

Dr. Ware has enrolled 32 patients with neuropathic pain who will smoke cannabis via a pipe three times a day for a five day period, for several weeks. Patients will rotate through a series of different strengths of cannabis and report back.

Early results are expected in 2005.

Source: <http://www.mapinc.org/drugnews/v03.n1985.a10.html>

### **RESOURCE DIRECTORY:**

**AIDS Vancouver Island**  
1601 Blanshard, 384-2366

**Hep-C Society of Canada**  
388-4311

**BC Health Services**  
953-3547

**Law Centre**  
388-4516

**City of Victoria**  
Crisis and Info: 386-6323

**Sacred Herb**  
106-561 Johnson, 384-0659  
<http://www.sacredherb.com>

**John W. Conroy, Q.C.**  
1-877-852-5110 (toll free)  
<http://www.johnconroy.com>

**BCCCS**  
Vancouver, 604-875-0448  
<http://thecompassionclub.org>  
**Action Committee of People with Disabilities**  
383-4105

**Canadians for Safe Access**  
<http://www.safeaccess.ca>

**Canadian Cannabis Coalition**  
<http://www.cannabiscoalition.ca>

**Canada Medical Marijuana**  
<http://www.medicalmarihuana.ca>

**Media Awareness Project**  
<http://www.mapinc.org>

**DrugSense**  
<http://www.drugsense.org>

**Health Canada**  
<http://www.hc-sc.gc.ca/hecs-sesc/ocma/>  
1-866-337-7705

**Norml Canada**  
<http://www.normlcanada.org>

**Cannabis Health**  
<http://www.cannabishealth.com>

**Cannabis Research Institute**  
<http://www.cannabisresearchinstituteinc.com>

**"All we are is light made solid"**

-- Anonymous