

VICS Newsletter



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News and information on medical cannabis

Medical Cannabis News:

Canada - Medical Cannabis Activists Won't Face Prosecution

The federal government will refrain from pursuing a prosecution against two men who operated a Toronto compassion club. Warren Hitzig and Zach Naftolin were charged in 2002 after the Toronto Compassion Centre they helped to operate was robbed and investigating police discovered large amounts of cannabis on the premises.

"By not convicting me, you're basically opening the door for others to operate," said Hitzig. Mr. Hitzig said he was informed last week that the charges would not go ahead. However, sources were unclear whether they would be withdrawn or stayed (a stayed charge means that the police have up to one year to proceed).

The Medical Marihuana Access Regulations (MMAR) that permit legal access to cannabis for sick Canadians are very onerous and time consuming, necessitating the need for compassion clubs. Hilary Black, co-director of the BC Compassion Club Society, said "I think it's another note of recognition of the service we are providing."

Federal justice officials would not comment on the matter.

Source: "Ottawa won't prosecute medical marijuana activists", by Brian Laghi, The Globe and Mail, Jan. 28, 2004.

Health Canada Strongly Requests Information

In a letter to all legal medical cannabis licensees under the MMAR, Health Canada is "strongly encouraging" licensed users to give the agency permission to pass on information to the police. The letter dated Jan. 20, 2004, also mentions that Health Canada (HC) is considering making disclosure of information to police mandatory. Medical cannabis users claim it is an invasion of privacy and are concerned that the information could be misused or abused. Currently, legal cannabis users and growers are given the option to consent to such disclosure. Roughly 70% of the exemptees have already given consent.

Health Canada claims the information is used to confirm or deny if someone is authorized to possess or grow marijuana. Philippe Lucas of Canadians for Safe Access, a legal user, said "...I absolutely object to mandatory disclosure." There are many concerns, he stated, and among them is the lack of discretion it would give to AIDS patients and those suffering from other illnesses in terms of dealing with insurance and general prejudice. "Making it mandatory breaks all the rules of privacy," Mr. Lucas added.

The consent form asks for information that is already listed on the wallet-sized cards that all legal users and growers are issued. A spokesperson for HC had no comment when asked why consent to release information already available to the police on the

licensing card was being demanded. A legal exemptee in Ottawa discovered that the local police were not familiar with the program when the card was shown. Perhaps our tax dollars would be better spent on education.

Source: "Cannabis users balk at sharing medical data", Kirsten Endemann, The Ottawa Citizen, Jan. 26, 2004

Krieger Busted Again

Grant Krieger, who is appealing a trafficking conviction in Dec. 2003 (see Issue #5), was pulled over by RCMP near Headingley, Manitoba on Jan. 6 and found to be in possession of a couple of kilos of cannabis and about \$4000 in cash. Krieger claims that the cannabis was for himself and a cancer patient in Selkirk, Man., both legal exemptees under the Health Canada medical cannabis program. Police, however, seized both items but left four or five grams of cannabis for him to deal with his multiple sclerosis (Krieger claims he needs up to 14 grams/day). The cash was the proceeds from cannabis delivered to chapters of Krieger's foundation in Saskatoon and Regina.

"It's a really heavy hit," Krieger said. "(But) the people who are really penalized are the people who are sick and on a fixed income."

Krieger is head of the Krieger Foundation, a group that supplies cannabis to chronically ill people who are not necessarily legally entitled to smoke it. Winnipeg is one of nine communities where the foundation operates from. He will be formally charged with trafficking at his court appearance on March 19.

Source: <http://www.mapinc.org/drugnews/v04..n054.a02.html> and .../v04.n054.a05.html

It's only the second meeting in the history of the Office of Cannabis Medical Access (OCMA) that has included a wide range of stakeholders and it is taking place in Ottawa on Feb. 18, 2004.

Philippe Lucas from Canadians for Safe Access, Hilary Black from the BC Compassion Club Society, Eric Nash from the Medusers Group, and Brian Taylor from the Canadian Cannabis Coalition will be seeking to engage the assembled group in discussions over decentralization, subsidized medicine costs through health care programs, and the licensing and regulation of compassion clubs.

In addition to the regular attendees from the medical, pharmaceutical and law enforcement sectors, representatives from AIDS, MS and cancer groups have been invited.

Health Canada is seeking feedback on their reaction to the Hitzig decision, and they will be outlining their proposed vision of the future of the Medical Marihuana Access Regulations.



Welfare Time Limit Crunch:

It may not affect some of us directly, but it most likely will affect somebody we know in BC. And it will affect the rest of us indirectly, whether we are aware of it or not.

We're speaking about the two year time limit for welfare in BC that will be put to the test on April 1, 2004 unless the government rescinds the law. Since April 1, 2002, all people on income assistance who are considered 'employable' are limited to 2 years of income assistance out of every 5 years. Singles, couples and families who reach the time limit will be affected as follows:

- no eligibility for singles
- no eligibility for couples who have both reached their time limit
- \$300 reduction for employable couples with one adult over the time limit
- \$100 reduction for single parents
- \$100 reduction for two-parent families where one parent is over the limit
- \$200 reduction where both parents are over the limit

This policy has its roots in the 1996 US welfare reform laws yet there are key differences. Training and transition support mechanisms were put in place by the US programs when the welfare time limit was reached; in BC the government has eliminated earning exemptions and cut back child care subsidies. If you reach the limit in US, you are still eligible for food stamp programs; BC has no such programs. The US implemented time limits during a period of economic strength; our economy is still in recovery and unemployment rates have risen.

Welfare time limits are based upon the premise that welfare provides such a comfortable existence that recipients won't work unless forced to. However, the vast majority of welfare recipients leave income assistance within a year. Undoubtedly welfare abuse occurs but the numbers are small -- is a time limit the best mechanism to catch these individuals? Done in isolation without support mechanisms, it might prove disastrous and ill-timed for those who genuinely need more help to get back on their feet. (our guess is that children will be the real losers).

Time limits violate the Universal Declaration of Human Rights, which recognize that everyone has a right to an adequate standard of living. They also violate the Canadian Charter of Human Rights and Freedoms, particularly Sections 7 and 15, which guarantees security and equality of the person. Time limits will also affect landlords (e.g. unpaid rent), business owners (e.g. more people on street), workers (e.g. flooded labour market), taxpayers (e.g. costs for policing, court, shelter for street people) and those involved with public schools (e.g. hungry kids).

Many levels are protesting the cuts, from poverty activists to the municipalities of Victoria and Saanich to the Greater Victoria

School District to the Anglican Church. The city of Victoria has been asking for a copy of the Ministry's internal report about the projected affects of the welfare cuts since November because municipalities need to know how many people may be affected so plans can be made. So far they've heard nothing, and as of Friday, Jan. 30, the government has missed their self-imposed deadline to release that information. As well, according to Ministry of Human Resources spokesperson Richard Chambers, people facing their last cheque or a reduced cheque have not been notified yet. Contact our new Minister of Human Resources, Stan Hagen, if you wish to see the end of welfare time limits and/or have an alternative to dealing with poverty and joblessness.

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IACM Summaries:

The International Association for Cannabis as Medicine (IACM) is a scientific society advocating the improvement of the legal situation for the use of the hemp plant (*Cannabis sativa* L.) and its pharmacologically most important active compounds, the cannabinoids, for therapeutic applications through promotion of research and dissemination of information. The IACM declares that it is the right of doctors to be able to discuss the medicinal use of cannabis with their patients. Their newsletters are available on-line at: <http://www.cannabis-med.org/>

UK - Effective Jan. 29, 2004, cannabis has been downgraded to the same status as anabolic steroids and anti-depressants in Britain. Cannabis possession, in most cases, will not be an arrestable offence. Instead, police will usually give a warning and confiscate the cannabis. If caught smoking in public or anywhere near the presence of children, however, an arrest will likely follow. The British Medical Association is "extremely concerned that the public might think that reclassification equals safe." But, Sir Michael Rawlins, chairman of the Advisory Council on the Misuse of Drugs, said that it was time to consider whether to go further and that his members were investigating new ways of measuring the relative harmfulness of all drugs.

Migraine -

A new study looked at the possible role of the CB1 receptor in the regulation of the tenseness of certain blood vessels in the brain. The endocannabinoid anandamide was able to inhibit dilation of blood vessels in the dura mater (tough outer membrane enveloping brain and spinal cord) caused by several agents (e.g. nitric oxide). Researchers concluded that CB1 receptors appear to be involved in processes that cause headache and dilation of blood vessels in the dura mater.

DOONESBURY by G.B. Trudeau



Insite Almost at Capacity:

Several months after opening Canada's first safe injection site, called Insite, the Vancouver facility is nearly at capacity. Site staff are supervising an average of 450 injections daily, with capacity at 600 per day.

Mark Townsend of the Portland Hotel Society, which runs Insite with the Vancouver Coastal Health Authority, says that initial fears that patrolling police officers and security cameras would deter drug users have proved unfounded. He also attributes the high usage to the experienced staff and extensive street-level and word-of-mouth publicity prior to the Sept. 15, 2003, opening.

There are an estimated 4000 injection drug users in Vancouver's downtown Eastside, and statistics show that more than 30% of the addicts are infected with HIV or have AIDS. The World Health Organization has singled out Vancouver due to the high HIV infection rate in a wealthy Western city.

Heroin Brain Disorder:

People who smoke heroin burned on aluminum foil run the risk of developing a sometimes fatal brain disorder called toxic leukoencephalopathy. A UBC study has shed light on this disorder by compiling data on 14 victims, most less than 30 years old, dating back two years.

A 1982 study published in the British medical journal estimated that heroin-induced leukoencephalopathy had a 23% mortality rate. Half of the UBC study group died, suggesting that the mortality rate could be higher than predicted.

"The prognosis is very poor", said UBC neurologist Sian Spacey, noting that there is no treatment. Researchers believe that the toxin might be caused by something cut into the heroin, or a combination of the heroin, aluminum foil and any other diluting agents.

Once exposed to the toxin, patients suffer structural changes to their brains causing slurred speech, uncoordinated movement, and unsteadiness, making one appear as if drunk. If left unattended, the brain begins swelling over several months, sometimes causing death. Survivors often can't carry on a conversation and end up requiring care for the rest of their lives.

"Most physicians don't know what it is and what to expect from the condition," said Spacey.

Last November, the Vancouver Coastal Health Authority reported that 17 people in BC developed toxic leukoencephalopathy in the first six months of 2003. The BC Coroners Service reported 6 deaths from heroin-induced leukoencephalopathy over the whole year.

Source: "Baffling Brain Ailment Hits Heroin Smokers", by Charlie Smith, The Georgia Straight, Jan. 22 to 28, 2003.

Burns Bog Update:

In the last issue (Jan. 2004) we mentioned that the 2,200 hectare Burns Bog had been preserved by the efforts of four levels of government at a cost of \$78.7 million.

Unfortunately we were a bit hasty because a B.C. Supreme Court has recently allowed the owners an extension to receive further offers, and one company (Castlepoint USA Patrone Ontario Inc.) has already offered \$90 million.

The owners have until March 12, 2004 to consider other proposals. For the long term health of the region, we hope that this estuarine bog, home to a unique ecosystem of plants and animals, gets preserved forever.

BC Civil Liberties Association Awards:

The B.C. Civil Liberties Association awarded brickbats and bouquets in a year (2003) that reminded us not to take civil rights for granted. And among some of the not so nice stories are a few people that made a positive difference.

Such as rookie Vancouver cop Troy Peters who blew the whistle on the sometimes severe beatings inflicted by six police officers on three suspected drug dealers in Stanley Park last year. If Mr. Peters hadn't come forward, it would have gone unreported (like how many other times?). The officers received light sentences for their part in the affair, considering that they are professional law officers and not vigilantes - house arrest and 6 months probation was the most severe punishment passed out by Judge Herb Weitzel, who, earlier, stated that a mob mentality was the driving force behind the beatings (?). The Vancouver police force then fired two of the six accused and suspended the other four for twenty days without pay and demoted them one rank each. Given that their actions were an enormous breach of trust and completely unprofessional, we wonder why all six have not been fired.

Another surprise was a decision made between Vancouver police chief Jamie Graham, mayor Larry Campbell and Inspector Ken Frail to put into place a "do not respond rule" that assures drug users only medical personnel -- not police -- will respond to drug overdose emergencies. This is the first policy of its kind in Canada and it's another way to help with harm reduction.

Source: <http://www.mapinc.org/drugnews/v04..n065.a08.html>

This just in from BC in the 21st century -- nearly four out of every ten homeless people in the Lower Mainland are mentally ill (!!). Many are in the Downtown Eastside of Vancouver, many have drug addictions and, as a result, many have hepatitis C and/or HIV. In a wealthy and supposedly compassionate society as ours, abandoning the mentally ill is truly detestable and shameful.

This community needs our support, shelters, detox and rehabilitation programs, and properly trained people to deal with the challenge of being mentally ill. Research has shown that it is less expensive to society to provide shelter for mentally ill patients because they spend less time in places such as hospitals.

Lack of supportive housing needs to be addressed but NIMBYism is seen as a huge roadblock. The NIMBY award goes to Surrey, BC's second largest city, which does not contain a single year-round emergency shelter even though a Jan. 2002 survey revealed 160 homeless with 109 of them living on the street.

Source: "B.C. Has Abandoned the Mentally Ill", by Daphne Bramham, The Vancouver Sun, Jan.29, 2004.

Definitions:

irony¹ n. expression of one's meaning of language of opposite or different tendency, especially simulated adoption of another's point of view or laudatory tone for purpose of ridicule; ill-timed or perverse arrival of event or circumstances in itself desirable, as if in mockery of the fitness of things; use of language that has an inner meaning for the privileged audience and an outer meaning for the persons addressed or concerned (occasionally including speaker; compare TRAGIC irony); SOCRATIC irony. [from Latin from Greek *eironeia* simulated ignorance (*eirōn* dissembler)] (The Concise Oxford Dictionary, 7th ed., 1983)

oxymoron n. (Rhetoric etc.) figure of speech with pointed conjunction of seemingly contradictory expressions (e.g. faith unfaithful kept him falsely true). [from Greek *oxumoron* neuter (as noun) of *oxumoros* pointedly foolish (*oxus* sharp, *motos* foolish)] (ibid.)

Cannabis News:

Canada - "I Am Canadian Cannabinadian"

The irony is almost perfect.

An abandoned brewery beside a major highway, where a product that was once prohibited and later produced in vast quantities for the general public, was found to be housing the largest known marijuana growing operation in Canada's history.

Acting on a tip, police raided the brewery south of Barrie, Ontario in early January and busted the huge operation. More than 25,000 plants were found throughout the cavernous building -- some were even found inside the beer brewing vats (further irony). Operating 24/7, the brewery had living quarters for up to 50 people at once. Nine people were caught at the site and charged.

Authorities acknowledge that this particular operation, while large, is almost certainly not the only one of its scale in Canada. It was suggested by some that Health Canada should have moved right in and continued the operation to produce medical cannabis for their legal exemptees. At the very least, they probably could have learned a thing or two.

Cheers.

Source: "Massive Pot Crop Valued At \$30M",
<http://www.mapinc.org/drugnews/v04.n077.a09.html>

Pot Cafe Survives Opening Day

Chez Marijane, a cafe in Montreal where cannabis can be smoked (but not purchased) on the premises, survived opening day even with the arrest of two individuals caught holding joints when police visited from a station less than a block away. One of the arrested is an MS patient.

Opening day was more like a rave than a cafe. Through the thick smoke, patrons sipped coffee and passed around joints. Some were there to make a statement that cannabis needs to be out in the open, talked about, transparent. Hugo St-Onge, president of the Bloc Pot party, commented, "Above all this is a place to meet and exchange ideas."

The police are keeping it under surveillance and an officer stated that "... the cafe will be visited in a regular fashion in order to enforce the law." The presence of two children drew attention and Quebec's child protection agency were informed. Neighbouring businesses are not worried about the presence of Chez Marijane, but are concerned about the local bar crowds and associated noise and mess.

The cafe is open to 'members' for a nominal daily or annual fee.

[Ed. Sounds great, but put a properly sized ventilation system into that cafe pronto]

Source: <http://www.mapinc.org/drugnews/v03.n1907.a09.html>

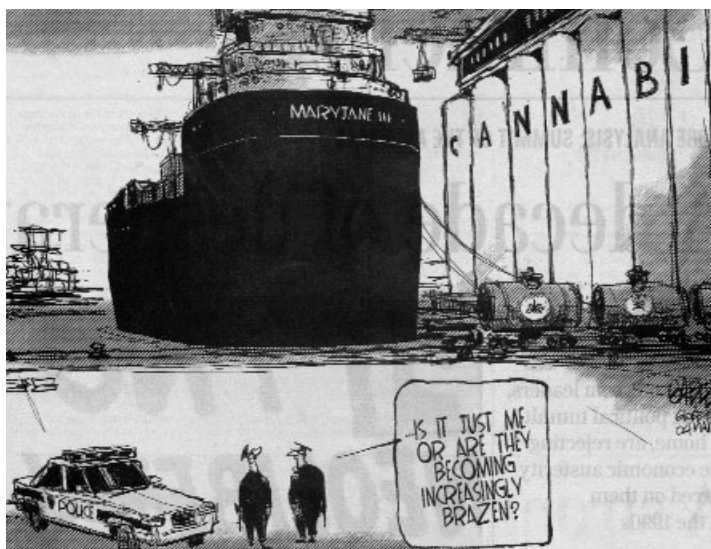
US - Wisconsin Introduces Drugged Driving Law

The State of Wisconsin is introducing a driving law which basically states that if someone is caught driving while under the influence of an illegal drug, they will be charged just like a driver under the influence of alcohol.

As of Dec. 19, 2003, penalties for drugged driving are as severe as those for drunk driving. Motorists who exhibit behavior or symptoms indicative of drug use will have to submit to a blood test that determines the presence of controlled substances. Refusal to take a test, whether for alcohol or other drugs, results in automatic revocation of the driver's license.

Asked whether this means that law enforcement officers can pull over anyone and demand a drug test, Wisconsin State Patrol Lt. Tim Carnahan stated that an officer has to have reasonable suspicion that a law has been broken before requesting a test.

Source: <http://www.mapinc.org/drugnews/v03.n2012.a02.html>



Thanks to Gable at The Globe and Mail

**The VICS is pleased to announce that
our newsletters are also available at our website
<http://www.thevics.com>**

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)
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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 Marihuana
<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>

"What is a weed? A plant whose virtues have not yet been discovered."

-- Ralph Waldo Emerson

