

VICS Newsletter



Volume #1
Issue #9
May 2004

News and information on medical cannabis

Medical Cannabis News:

Canada - Poor Quality PPS Pot Returned, Not Paid For

Roughly 30% of legal medical cannabis users that ordered cannabis from Health Canada (HC) have returned the product.

According to HC statistics, of the 93 legal exemptees who have ordered cannabis through the government so far, 29 have returned it due to its poor quality. Of the 93 persons in total who have ordered the pot, 67 persons have not paid (e.g. partial payment or recent invoice not paid). This further confirms individual exemptee complaints regarding the poor quality of the cannabis.

HC spokesperson Catherine Saunders stated that she did not know the reason for the returns. Saunders insisted that the marijuana is as potent as claimed with a THC content of 10% plus or minus 1.5%. "It's tested, it's research grade, it's fully characterized and it's documented according to good manufacturing practices and guidelines."

"We have conducted 3 rounds of THC testing on the Health Canada/Prairie Plant Systems (PPS) product, with the latest results coming in at 5.1% THC; nowhere near the 10.2% THC suggested by the government," said Philippe Lucas, a legal user and Director of Canadians for Safe Access.

In addition, CSA has learned that as of March 31st, the Office of Cannabis Medical Access has only sent out 295 ounces of cannabis product. With Prairie Plant Systems 5-year, \$5.5 million contract coming to an end early next year, that means that this cannabis has cost Canadian taxpayers roughly \$48,000 per exemptee, or over \$15,000 per ounce (based on an estimated \$4.5 million spent on/by PPS thus far).

By comparison, the going rate for illegal cannabis currently sits at about \$150-200 per ounce for so called 'triple-A', making the PPS cannabis undoubtedly the most expensive pot ever produced in Canada.

Canada's compassion clubs and societies, meanwhile, supply over 7000 ill Canadians with a safe and affordable source of cannabis (including over half of the federal exemptees), all at no cost to the taxpayer.

"This is a scandal without an end in sight", stated Lucas. "Health Canada and the Office of Cannabis Medical Access cannot continue to sacrifice the health and welfare of sick Canadians while squandering taxpayer money on this failed program. How many more complaints, lawsuits and court orders will it take before Health Canada finally acts with care and compassion in this important health matter?"

Source: "30% of Health Canada's Medicinal Cannabis Customers are Sending Back the Government Pot", CSA press release, April 29, 2004, and "Government pot not worth lighting up, says activist", Times Colonist, April 30, 2004

US - Feds Ordered Away From Medical Cannabis Center

U.S. District Judge Jeremy Fogel in San Jose, CA, ordered the federal government not to raid or prosecute the Wo/Men's Alliance for Medical Marijuana in Santa Cruz that grows and distributes medical cannabis for its members. This marks the first time in the US that a court has granted a medical cannabis organization the right to grow the plant without interference from federal authorities. This decision has been hailed as a victory for patient's rights and state's rights when dealing with the federal Drug Enforcement Agency.

The Wo/Men's Alliance for Medical Marijuana was raided in Sept. 2002 by the DEA, seizing 167 plants and detaining some of the members. At the time of the raid, the collective had been operating for several years with the explicit support of the Santa Cruz city and county officials, including local law enforcement. Made up of roughly 250 members suffering from various illnesses, the group collectively grew cannabis and distributed it to its members free of charge.

The raid was denounced by local officials and was even protested by Attorney General Bill Lockyer who called the DEA's actions "a provocative and intrusive incident of harassment."

The feds claim authority to pre-empt state law under provisions of the Commerce Clause of the US Constitution, arguing that marijuana use of any kind constitutes interstate commerce. However, a 2 - 1 ruling by a San Francisco-based appellate court in December 2003 stated that prosecuting these medical cannabis users under a 1970 federal law is unconstitutional if the product isn't sold, transported across state lines or used for non-medical purposes. As Judge H. Pregerson wrote in that decision, "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."

Judge Fogel cited the above decision as critical to his conclusions regarding the Santa Cruz cooperative. He wrote that the Controlled Substances Act, as applied to the Santa Cruz cooperative, "is an unconstitutional exercise" of federal intervention.

The Justice Department has appealed the decision to the Supreme Court. A civil lawsuit against the federal government by the Wo/Men's Alliance for Medical Marijuana is pending.

Source: "Santa Cruz Group Wins Court OK To Grow Pot", <http://www.mapinc.org/drugnews/v04.n612.a09.html>, and "Judge Tells Feds To Back Off Medical Pot Group", [mapinc.org/drugnews/v04.n609.a01.html](http://www.mapinc.org/drugnews/v04.n609.a01.html)



Effective May 1, 2004, Stage 1 water restrictions are in place in greater Victoria. Please do your part by conserving water wherever and whenever possible.

IACM News: (<http://www.cannabis-med.org/>)

Netherlands: Medical cannabis from pharmacies not more expensive for patients

Due to several reasons, medical cannabis, which has been available in Dutch pharmacies since September 2003, is cheaper for patients than cannabis bought in coffee shops. Around 70 per cent of health insurance companies reimburse the costs of the pharmacy cannabis in one form or another, sometimes partially, a survey of the Health Ministry conducted in March 2004 found. Also, the costs can be deducted from income reported for income tax. Therefore, though the selling price of the official cannabis is higher, patients usually pay less. Two medical strengths are available, 13 % THC and 18% THC. Among the reasons for the higher selling price of medical cannabis from the pharmacies are taxes paid by licensed growers, 24 hours delivery service, costs of laboratory controls, costs of information to patients and doctors, and 6 per cent taxes on the sold cannabis.

Spain: Catalanian pharmacists want pilot study on cannabis in pharmacies

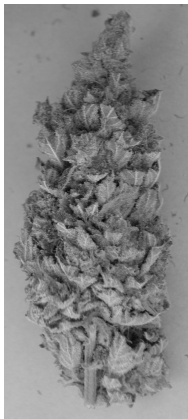
The president of the Pharmacists Association of Barcelona, Joan Duran, proposed to the regional government of Catalonia to conduct a pilot study in the Catalanian pharmacies to make cannabis available for therapeutic purposes. The initiative is based on the Dutch model. Three years ago the Catalanian parliament unanimously asked the central government in Madrid to legalize the medical use of cannabis. The initiator of this decision was Agata, a Catalanian organization of women with breast cancer. The president of the Federation of Spanish Pharmacists, Isabel Vallejo, expressed her support of the pilot project. She said that whenever there is a substance that can be used with therapeutic aims and produces benefits for the health of patients, this "must be investigated". Vallejo said that the pilot project "cannot be rejected because there are people that can benefit from it".

USA: Misapprehension may contribute to restraints of legislators on medical cannabis issue

Despite overwhelming public support for legal medical use of cannabis most politicians remain skeptical to translate the demand of voters into legislation. A new telephone poll conducted by Zogby in Vermont and Rhode Island, released March 29, sheds some light on this mystery. The poll asked 502 randomly selected Vermont and 501 Rhode Island citizens if they support legal access to medical marijuana for seriously ill patients, which resulted in 71 percent yes in Vermont and 69 percent yes in Rhode Island and is accordance with other state and national poll results consistently showing support levels ranging from 60 to 80 percent.

The new poll added a question that has not often been asked: "Regardless of your own opinion, do you think the majority of people in [Vermont or Rhode Island] support making marijuana medically available, or do you think the majority opposes making marijuana medically available?"

In Vermont 38 percent thought the majority supports legal access, while 37 percent thought the majority opposes it and 25 percent was not sure. The correspondent figures for Rhode Island were 26 percent (majority in support), 56 percent (majority against) and 18 percent (not sure). Citizens supported the medical use of cannabis by a clear margin, yet they think they are in the minority. There is reason to believe that legislators are under the same misapprehension and think that supporting the medical use of cannabis is a radical move, while most voters would welcome this move.



Inflammation of the large intestine -

Many patients with chronic bowel inflammation (e.g. Crohn's disease) report that their condition improves with cannabis. Basic research of scientists of the Max Planck Institute of Psychiatry in Munich, Germany, supports this experience. It demonstrates that the cannabinoid system plays an important role in inflammation of the large intestine (colon). A synthetic cannabinoid and endocannabinoids prevented experimental inflammation of the colon in mice. Authors write that "the endogenous cannabinoid system represents a promising therapeutic target for the treatment of intestinal disease conditions characterized by excessive inflammatory responses."

(Source: Massa F, et al. J Clin Invest 2004;113(8):1202-9.)

Science: Pain

The results of 34 single case studies in patients with chronic pain and associated symptoms who received standardized cannabis extracts were presented. Three extracts (rich in THC, rich in Cannabidiol (CBD) and a 1 : 1 mixture of them both) were given over a 12-week period. Extracts which contained THC proved most effective in relieving symptoms. They were generally well tolerated. (Notcutt W, et al. Anaesthesia 2004 May;59(5):440-52)

Science: Metastatic spreading

Researchers of the Witten/Herdecke University, Germany, found that the endocannabinoid anandamide has an inhibitory effect on the migration of tumour cells and lymphocytes. The effects on tumour cells were mediated by the CB1 receptor and the effects on CD8(+) T lymphocytes were mediated by CB2 receptors. Thus, cannabinoids that bind to the CB1 receptor would inhibit metastatic spreading. Researchers conclude that "specific inhibition of tumour cell migration via CB(1)-R engagement might be a selective tool to prevent metastasis formation without deprecatory effects on the immune system of cancer patients." (Source: Joseph J, et al. Cancer Immunol Immunother 2004 Mar 18 [Electronic publication ahead of print])

Science: Amyotrophic lateral sclerosis

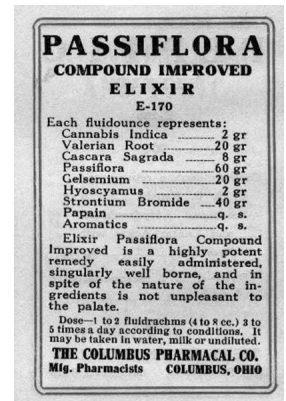
A survey among people suffering from amyotrophic lateral sclerosis (ALS) was conducted by researchers of the University of Washington. There were 131 respondents, 13 of whom reported using cannabis in the last 12 months. Researchers write that "results indicate that cannabis may be moderately effective at reducing symptoms of appetite loss, depression, pain, spasticity, and drooling. Cannabis was reported ineffective in reducing difficulties with speech and swallowing, and sexual dysfunction." (Source: Amtmann D, et al. Am J Hosp Palliat Care. 2004 Mar-Apr;21(2):95-104.)

Science: Inhalation of THC aerosol

The pharmacokinetic properties of pulmonic THC administered as a liquid aerosol were compared to intravenous THC in eight healthy subjects. The bioavailability of the inhaled THC was 29 percent on average (standard deviation: 8 percent). (Source: Naef M, et al. J Pharm Sci 2004;93(5):1176-84.)

Science: Skin patch

Results of a study carried out in order to develop a therapeutic skin patch for delta-8-THC were presented. In permeability studies of THC in human skin a mean steady-state level of 4.4 ng/ml in blood plasma was reached within 1.4 hours and was maintained for at least 48 hours. (Source: Valiveti S, et al. J Pharm Sci 2004;93(5):1154-64.)



Tattoo Parlours in Prison:

Correctional Services of Canada is planning to put 'official' tattoo parlours in prisons for the inmates. The initiative is the first of its kind in the world in an effort to stem the spread through penitentiaries of hepatitis C and other communicable diseases.

The plan, which will cost \$100,000, is to set up pilot projects at five unidentified men's prisons and one women's facility later this year. If the experiment succeeds, more tattoo parlours will be introduced.

Dr. Francoise Bouchard of the Correctional Services stated, "It's been more and more recognized that tattooing poses a risk in terms of transmission of infectious disease, not only in prison but in the community."

Officials are convinced that 'non-official' tattoo parlours, using equipment salvaged from numerous sources, is helping to transmit hepatitis C. Statistics show that 3,176 inmates (26% of prison population) are infected with hepatitis C, a rate 30 times higher than outside prison.

Inmates will be trained to operate the parlours and customers will pay from their own funds. Corrections Canada plans to impose some restrictions as to what image(s) may be tattooed; gang emblems and violent images are to be prohibited under the premise that they could make integration back into society harder.

Source: "Prisons plan tattoo parlours to cut hep C", Times Colonist, April 24, 2004



Blunt Brothers Burns, Arson Suspected:

Vancouver's infamous 'pot-block' on W. Hastings was engulfed in smoke Sunday, April 25, as a fire, started in a dumpster in a back lane, destroyed a heritage building that housed the Blunt Brothers cafe, a second-hand clothing store and a long-standing left-wing bookstore. Artist Ken Gerberick, with a studio on the second floor, lost over 200 pieces of his work. The B.C. Marijuana Party headquarters and bookstore, plus other pot-oriented businesses, next door to the destroyed building suffered water and smoke damage.

Arson is strongly suspected as the fire quickly jumped from the first dumpster to two others and then spread up the rear of the building. The structure was originally built in 1898.

Source: "Vancouver 'Pot-Block' Goes Up In Smoke", <http://www.mapinc.org/drugnews/v04.n635.a01.html>

The three regions of the world that consume over two-thirds of the world's oil (Asia 26.2%, USA 25.5%, W. Europe 19.2%) have less than 6% of the oil reserves left in the world.

Infrared Searches May Violate Privacy:

The Supreme Court has heard arguments for and against imposing limits on infrared aerial surveillance and a ruling is not expected for months. The police warned that they would be hampered by "investigative gridlock" if the judge decides it is unconstitutional for police to employ heat-sensing cameras.

On the other side of the court room, Walter Tessling's lawyer cautioned against granting licence to the state to use technology to spy on people in the place where they most expect privacy. An Ontario Court of Appeal ruling that stated police had violated Mr. Tessling's Charter of Rights protection against unreasonable search and seizure by unlawfully using an infrared camera to detect excess heat in his home. The police later seized 120 cannabis plants.

Police sometimes use infrared technology to detect 'hot spots' within homes. The Ontario Court of Appeal ruled last year that police have to obtain search warrants for aerial surveillance using infrared cameras since the heat may come from innocent activities, such as a bath.

"The nature of the intrusion is subtle, but almost Orwellian in its theoretical capacity," wrote Ontario Justice Rosalie Abella.

Federal lawyer James Leising told the Supreme Court that Canadians could not care less about aerial cameras searching for heat sources on the outside of their homes. "This doesn't reveal anything personal of any sort. This is something Canadians just don't care about. It's really impossible to imagine who cares, other than marijuana growers." (Yikes!)

Several judges were skeptical about whether privacy issues were at stake, with one judge wondering whether Canadians should be more concerned about police searching their garbage, something for which they do not need a warrant. (true, but garbage is typically kept outside the house where privacy is not guaranteed, while people tend to live inside their homes, a big difference)

The US Supreme Court has already found that it is unconstitutional for police to use thermal cameras without a search warrant. Mr. Miller said that the threat in this case is more serious because it involves the burgeoning and virtually unchecked field of technology.

Source: "Banning Infrared Searches Would Handcuff Police, Top Court Told", <http://www.mapinc.org/drugnews/v04.n591.a02.html>

Definitions:

abreaction n. (Psychology) free expression and release of a previously repressed emotion; hence ~IVE [from AB- + REACTION, after German *abreagierung*]
(The Concise Oxford Dictionary, 7th ed., 1983)

catharsis n. 1. (Medical) purgation. 2. outlet to emotion afforded by drama etc. or (Psychology) by abreaction. [modern Latin, from Greek *katharsis* (*kathairo* cleanse); sense 2 from Aristotle's *Poetics*] (ibid.)

liable pred. a. legally bound, answerable *for*, subject or amenable *to* tax or penalty, under obligation *to* do; exposed or open *to*, apt *to* do or suffer something undesirable (*difficulties are liable to occur*). [Middle English, perhaps from Anglo French liable that may be bound, from Old French *lier* from Latin *ligare* bind] (ibid.)

metastasis n. (Physiology) transference of bodily function, disease, etc., from one part or organ to another, transformation of chemical compounds into others in process of assimilation by an organism; hence ~IZE [Late Latin from Greek (*methistemi* change)] (ibid.)

Cannabis News:

Canada - Federal Bill Tabled To Detect Drugged Driving

On April 26, the federal Martin government tabled one of its first new pieces of legislation, a bill to give law enforcement officers the power to conduct tests and demand a saliva, urine or blood sample from those drivers who are suspected of being under the influence of drugs. The legislation will effectively make voluntary measures mandatory, and that refusal to comply would be a criminal offence. Presently, police in BC are trained to administer roadside tests but there is no law forcing drivers to comply.

The initiative, which could die quickly if a spring federal election is called, is considered necessary in light of the proposed cannabis decriminalization bill (Bill C-10). While it is illegal to be driving while under the influence of drugs, there are no reliable and simple tests for measuring drug impairment. While there is a measurable link between blood alcohol levels, measured by a breathalyser, and driving ability, research is lacking to equate drug quantity and impairment.

Under the proposal, police officers across Canada would receive training by the government to become experts in recognizing physiological symptoms of impairment and then allow them to conduct roadside physical tests. If a subject fails, and is not impaired by alcohol, the next stage kicks in with a saliva test. Further testing could take place at a police station, where blood and urine samples could be required.

Lawyers say the new federal proposals are overly intrusive, and will virtually guarantee a barrage of Charter of Rights court challenges.

The legislation doesn't back up the new bill with any money, suggesting that the provinces will be responsible for the funding.

Source: "Federal legislation takes aim at drivers high on drugs", Times Colonist, April 24, 2004

Netherlands -

'Netherweed' Too Strong, Dutch Government Fears

The Dutch government is considering banning the sale of highly potent strains of cannabis in the Netherlands. It says Dutch growers have been steadily increasing the strength of cannabis, forcing a review of liberal Dutch laws. The increase in strength can be directly linked to refined cultivation techniques.

Cannabis and hashish are sold and consumed in hundreds of government-regulated coffee shops. Many varieties of cannabis from around the world are offered up, but more Dutch-grown cannabis is showing up on the menu. Known as "Nederwiet" (Netherweed),

the Dutch cannabis is very high in THC. This has prompted the government to consider whether "Nederwiet" should be reclassified as a 'hard' rather than 'soft' drug, and whether supervision of coffee shops needs to be tightened.

Experts, however, question the health risks involved. Roel Kerssemakers, spokesperson for the Jellinek Clinic in Amsterdam, the main authority on addiction in the Netherlands, says that there's no scientific evidence to support claims that higher THC levels increase the risk of addiction.

"Our research shows that people using cannabis with a high amount of THC smoke a little bit less. They like the effect, but don't need anymore THC and therefore smoke less, which is one of the positive sides of high levels of the substance. Research on animals shows that when given strong cannabis, they also tend to take less."

"Every year, we treat around 3,500 people with cannabis addiction, and this number has been quite stable. So, I'm not sure whether you should regard cannabis with these higher THC levels as a hard drug."

One risk associated with stronger cannabis involves beginners who may not dose properly and not know when they've had enough.

The Jellinek Clinic has no major objections to the current coffee shop system, but would like to see two conditions added: reliable product information which also warns of the risks of cannabis use, and adequate training for shop staff so they can provide information and recognize potential problems.

The clinic also feels that attitudes to cannabis are changing and that some adjustments to Dutch law may be needed. "Cannabis consumption involves certain risks," stresses Mr. Kerssemakers. "People should realize that cannabis is a drug that should be used with care. All in all, we believe a tolerant attitude towards cannabis is better than forbidding it, as long as there's good information."

Source: Potent and cheap - should 'Nederwiet' be classified as a 'hard drug?', <http://www.rnw.nl/hotspots/html/dut040408.html>

Afterword: VICS members attest to the value of stronger cannabis for the simple reason that one uses less medicine to achieve the same effects. This cascades down to less physical stress on the body, less cost (and less stress), less time involved,... Poll any compassion club or society and the answer will be the same: Stronger cannabis is better, more effective medicine. Period.

MAY IS HEP C MONTH - LEND YOUR SUPPORT

RESOURCE DIRECTORY:

AIDS Vancouver Island
1601 Blanshard, 384-2366

Hep-C Society of Canada
219-2750 Quadra, 388-4311

MS Society
1004 N.Park, 388-6496

V.P.W.A.
330-1105 Pandora, 382-7927
Law Centre
388-4516

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 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>

"There is nothing more dangerous than to build a society with a large segment of people in that society who feel that they have nothing to lose. People who have a stake in their society, protect that society, but when they don't have it, they unconsciously want to destroy it.

-- Martin Luther King Jr.