



Vol. 8, Issue 5  
June 2016

# CANNABINOID CHRONICLES

## Medical Cannabis News and Information

### **City of Victoria Votes to Allow Sale of Oral Medical Cannabis Products**

Victoria city council has voted to allow the sale of edible cannabis products within the framework of the proposed regulations for medical cannabis businesses. (Thank you!) Pressed hard by many seniors during previous public meetings and a survey, city staff heard that many who use cannabis for medical purposes don't wish to smoke their medicine but wish to ingest it orally.

"Our staff and council were compelled," Mayor Lisa Helps said. "We heard loud and clear from many people who came to the town hall we held, particularly from seniors, and particularly from senior women, that they have chronic pain and they don't want to smoke marijuana. They want access to edibles."

Island Health, however, supports a ban on edible cannabis products because they feel that they are attractive to children and risk poisoning both children and adults. Ms. Helps said it's not her job to regulate the quality and safety of the cannabis brownies sold at the city's 35 medical pot dispensaries. Council voted to turn over the issue of monitoring the health and safety of the edible products to provincial health officials.

"Our position, my position is that it is not the city's responsibility to regulate food products," Ms. Helps said.

Interestingly, there hasn't been an edible crisis yet, so why do we expect to have one now with regulation upcoming? True that there have been more cases of oral cannabis ingestion issues of late in US states that have legalized cannabis. Whatever the reason for the increase, the real lesson learned, though, was not to stop use of edible cannabis but to make and label it properly, use it as directed (remember, ALWAYS start with a small amount and wait, especially if fat-based), and store it safely, just like other pharmaceuticals.

It's funny how we can have Oxycodone in our home

medicine chest but health authorities are worried about cannabis. Yes, one can overdo oral cannabis ingestion, and yes, it would not be a fun time for children (or adults) if they overdid it, but it won't kill them. To repeat, cannabis does not cause death.

If the product (in this case oral cannabis) reduces harm, if it is effective medicine for the user, if it can be processed, labelled and stored safely and properly, then why can't it be made available? Hopefully other cities follow Victoria's mature and open-minded approach.

**Sources:** [www.theglobeandmail.com/news/british-columbia/victoria-to-allow-sale-of-edibles-despite-medical-health-officers-concerns/article29909484/](http://www.theglobeandmail.com/news/british-columbia/victoria-to-allow-sale-of-edibles-despite-medical-health-officers-concerns/article29909484/)

<http://www.vicnews.com/news/378997101.html>

### **E-Petition Seeks to Stop Sales Tax on Medical Cannabis**

There is an online petition asking the federal and provincial governments to stop taxing medical cannabis. *No other prescription in Canada is subject to tax.*

The petition to the Minister of Finance seeks to:

"Amend tax legislation to ensure medical cannabis is treated consistently with other medical necessities and is zero-rated, exempt from sales tax; apply this retroactively; and ensure that policies on the taxation of medical cannabis are fair and just, and that they honour the spirit of our legislation, which clearly states medical necessities are exempt from sales tax."

Visit: <https://petitions.parl.gc.ca/en/Petition/Details?Petition=e-190>

The petition is open until June 14, 2016.



## **International Association for Cannabinoid Medicines (IACM) Bulletin**

### ***Animal: New function of the CB2 receptor in the brain***

In the brain, there is a delicate interplay of signalling substances and cellular activity. Scientists of the Neuroscience Research Centre and Centre for Neurodegenerative Diseases (DZNE) in Berlin, Germany, have now identified another key player within this ensemble. In a laboratory study they found that the cannabinoid 2 (CB2) receptor influences information processing inside the hippocampus. The research results might help advance our understanding of schizophrenia and Alzheimer's disease, say the authors.

"Until now, this receptor was considered part of the immune system without function in nerve cells. However, our study shows that it also plays an important role in the signal processing of the brain," explains Professor Dietmar Schmitz, Speaker for the DZNE-Site Berlin and Director of the Neuroscience Research Centre of the Charité. As the researchers demonstrated in an animal model, the CB2 receptor raises the excitation threshold of nerve cells in the hippocampus, a certain brain region. "Brain activity is disturbed in schizophrenia, depression, Alzheimer's disease and other neuro-psychiatric disorders. Pharmaceuticals that bind to the CB2 receptor could possibly influence the activity of brain cells and thus become part of a therapy," Professor Schmitz concludes.

**Sources:** <http://www.ncbi.nlm.nih.gov/pubmed/27133464>  
<https://www.sciencedaily.com/releases/2016/05/160502111228.htm>

### ***Human: Cannabis was not effective in Huntington's disease***

In a double-blind cross-over study 26 patients with Huntington's disease received the cannabis extract Sativex for 12 weeks and a placebo for another 12 weeks. No differences on motor, cognitive, behavioural and functional scores were detected during treatment with Sativex as compared to placebo.

**Source:** <http://www.ncbi.nlm.nih.gov/pubmed/27159993>

### ***Medical Cannabis Declaration (MCD) starts lectures on cannabis as medicine***

The first multi-lingual course on cannabis as medicine, which besides European languages includes Russian, Chinese (Mandarin), Arab and Hindi, has started on the MCD website. The first topic is "Medical effective cannabis compounds". The next topics will be "The endocannabinoid system: the body's own cannabinoids and cannabinoid receptors", "The history of the medical use of cannabis products", "The cannabis dilemma: a broad therapeutic potential, but limited clinical research", "The medical benefits of cannabis and THC", "Optimum decarboxylation of THC and CBD by heating".

**Source:** <http://medical-cannabis-declaration.org>

### ***Cells: Cannabinoids influenced the mechanical and migratory properties of brain cancer cells***

Three different glioblastoma cell lines (brain cancers) were treated with cannabinoids. Researchers found that cannabinoids are capable of influencing migratory and mechanical properties in a cell line specific manner. Authors wrote that they "could show that a "generalized stiffness" is a profound marker for the invasiveness of a tumor cell population in our model and thus might be of high clinical relevance for drug testing. Additionally cannabinoids were shown to be of potential use for therapeutic approaches of glioblastoma."

**Source:** <http://www.ncbi.nlm.nih.gov/pubmed/27149140>

### ***Human: Cannabis spray is beneficial in spasticity in multiple sclerosis***

A total of 1615 patients with multiple sclerosis, who received the cannabis spray Sativex against spasticity, were recruited from 30 centres across Italy. After one treatment month, researchers found 70.5% of patients reaching a  $\geq 20\%$  improvement and 28.2% reaching a  $\geq 30\%$  improvement.

**Source:** <http://www.ncbi.nlm.nih.gov/pubmed/27160523>

### ***Cells: Several cannabinoids may be useful in the treatment of acne***

In experiments with sebocytes, cells that secrete sebum, some cannabinoids increased sebum production, while others decreased. Researchers wrote that their "data suggest that CBG and CBGV may have potential in the treatment of dry-skin syndrome, whereas CBC, CBDV and especially THCV show promise to become highly efficient, novel anti-acne agents."

**Source:** <http://www.ncbi.nlm.nih.gov/pubmed/27094344>

### ***Human: Legalization of cannabis in Washington had no effect on access to the drug by adolescents***

A study to be presented at the Pediatric Academic Societies 2016 Meeting shows no change in proportion of adolescents who find it 'easy' to access cannabis after its recreational use was legalized for adults.

**Source:** [www.sciencedaily.com/releases/2016/04/160430100249.htm](http://www.sciencedaily.com/releases/2016/04/160430100249.htm)

### ***Human: Plant cannabis is preferred over synthetic cannabinoids***

In an online survey of 186 adults, who had used both synthetic cannabinoids and plant cannabis and 181 adults who had used plant cannabis but not synthetic cannabinoids, results show that plant cannabis "is more popular than synthetic cannabinoids." Bowling Green State University, USA.

**Source:** <http://www.ncbi.nlm.nih.gov/pubmed/26910181>

**For more info visit: [www.cannabis-med.org](http://www.cannabis-med.org)**

## **Latest Allard Motion to Amend Manson Order Fails**

A motion heard on May 3, 2016, that would have made changes to Judge Manson's order of Feb. 24, 2016 (finding the *Marihuana for Medical Purposes Regulations* unconstitutional) has been refused by Judge Phalen. According to John Conroy's website, "Judge Phalen has declined to expand the injunction terms to cover all medically approved patients and he has declined to allow anyone to change their addresses of any sites pending the new regulations, which should provide for such." There was also no change to the 150 gram limit.

Source: <http://www.johnconroy.com/mmar.htm>

## **Cannabidiol Shows Promise in Treating Schizophrenia**

A first-of-its-kind study has discovered that cannabidiol (CBD) affects the brain in a way that makes it an ideal treatment option for schizophrenia. Published in the *Journal of Neuroscience*, this research comes just months after the same lab found that adolescent exposure to THC may lead to the onset of schizophrenia in adulthood.

Using pre-clinical models in rodents, the team at Western University's Schulich School of Medicine & Dentistry, showed that CBD can normalize schizophrenia-like disturbances in the brain's dopamine system. By doing so, CBD alleviates schizophrenia-related symptoms linked to abnormal dopamine activity such as psychosis and cognitive problems. The researchers also demonstrated that the chemical is bypassing the molecular pathway in the brain that causes the negative side-effects typically seen in traditional antipsychotic medications.

While CBD has shown promise as a treatment for schizophrenia in previous studies, this research is the first to show exactly how it acts on the brain to have positive results in mitigating psychiatric symptoms without causing the fatigue, lack of motivation and other side-effects associated with traditional medications.

Source: <http://mediarelations.uwo.ca/2016/05/03/chemical-marijuana-shows-promise-treating-schizophrenia/>



## **Lawyer Offering Free Representation**

A lawyer in Amherst, Nova Scotia, is offering free legal representation to Cumberland County residents who have pleaded guilty and are facing sentencing for possession of cannabis for personal use. Jim O'Neil said he is offering the service through the remainder of 2016. O'Neil believes an injustice is occurring in the courts due to the federal government's announcement on April 20 that cannabis will be legalized in 2017.

"The minute that announcement was made, the moral underpinning for the criminal prosecution of simple possession vanished. While technically still the law, in a democracy, the law normally has some basis in common sense and morality"

The government has not told the Department of Justice to stop laying charges.

"This does not involve a change in the law, but the simple exercise of a discretion which the government does have to do the right thing in a broad sense," O'Neil said.

O'Neil said he will appear in court for free and will ask the judge to give either an absolute or criminal discharge.

Under the Criminal Code, when a person pleads guilty, the court, instead of convicting them, can discharge them on the spot or with conditions such as probation. In Canada, that means the person has no criminal record for having been convicted of a criminal offense.

Roughly 60,000 Canadians are charged with cannabis possession every year. It's time to stop laying charges.

Source: <http://www.mapinc.org/newstcl/v16/n316/a05.html?176>

## **Defining Dispensary Proximity**

The City of Vancouver's board of variance is busy these days dealing with appeals from numerous medical cannabis dispensaries trying to secure a business licence. To grant a variance, board members look at undue hardship related to the property and whether the bylaw is an unreasonable restraint on the use of the property.

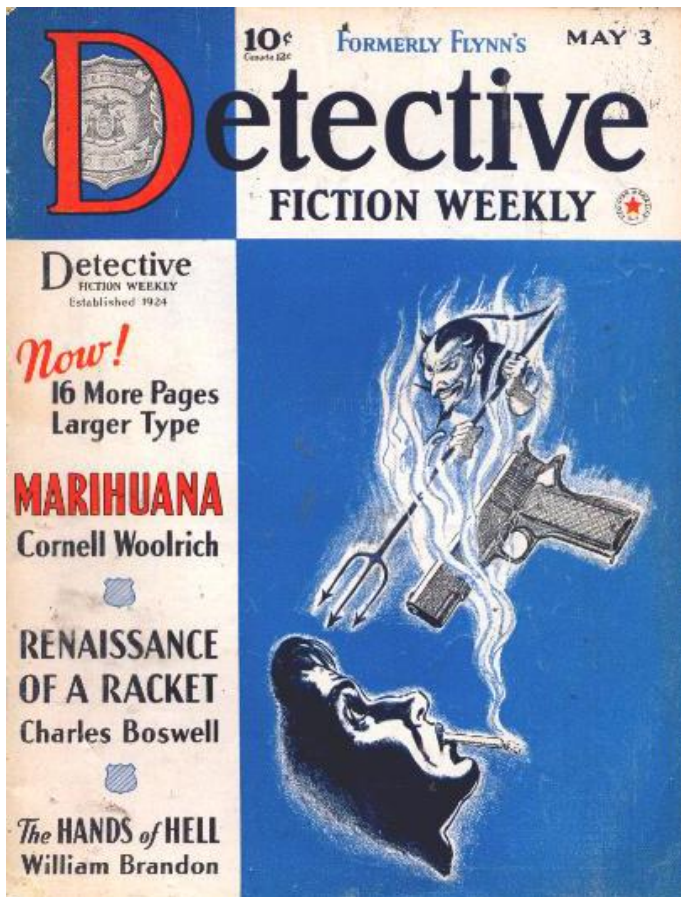
In a somewhat bizarre case, two dispensaries in the same building went up against the board of variance and only one succeeded. Both were within the 300 metre property line to property line distance from a school, yet Kirk Tousaw, on behalf of Sunrise, successfully argued that the true distance is much longer on foot.

Tousaw said city staff considered the layout of streets and the route a person would walk, something he saw as being fair in this case. As he put it, "school kids aren't leaping over skyscrapers to get to your dispensary."

This should be the rule until we learn to fly.

Source: <http://www.mapinc.org/drugnews/v16/n343/a01.html>

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## Vaporizing Cannabis Could Reduce Tobacco Smoking in Cannabis Users

Vaporizing cannabis, as opposed to smoking, has been used as a harm reduction technique for over twenty years. The advent of e-cigarettes has caused significant debate; however, the implications of their increasing availability and impact on cannabis use have been overlooked.

The authors of a research paper which suggests that vaporizing cannabis can reduce tobacco smoking, argue that one of the greatest harms associated with cannabis is its relationship with tobacco and that vaporizing has the potential to reduce both cannabis-related pulmonary harms and tobacco addiction. (A joint or blunt uses only cannabis, but the latter uses tobacco paper. A spliff is a joint rolled in paper with both cannabis and tobacco. In Europe, this vernacular is opposite such that joints have tobacco and spliffs don't.)

While not as common in N. America, co-ingesting cannabis and tobacco is fairly common in Europe, sometimes as high as 90% of users. Cannabis is called a reverse gateway drug as it has exposed people to tobacco by smoking cannabis and tobacco joints, leading to sustained tobacco use and dependence. Also, tobacco smoking mediates the relationship between cannabis use and cannabis dependence. Increased use of vaporizing could result in the disassociation of cannabis and tobacco.

A global survey of over 30,000 cannabis users pegged vaporizers being used by 8% of the population. Countries such as Canada and USA, where tobacco is used much less frequently in conjunction with cannabis, had higher rates of vaporizer use. As low as the number is, vaporizing was rated as the most important harm reduction strategy.

**Source:** Hindocha, Chandni, Tom Freeman, Adam Winstock, & Michael Lynskey (2015). *Vaping Cannabis (Marijuana) Has the Potential to Reduce Tobacco Smoking in Cannabis Users*. *Addiction*, 111, pp 373-377. Society for the Study of Addiction.

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948 View Street, Victoria  
250-383-4105

**MS Society of Canada**  
1004 North Park Street, Victoria  
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**HepC BC**  
2642 Quadra Street, Victoria  
250- 595-3892

**BC Cancer Agency**  
2410 Lee Ave, Victoria  
(250) 519-5500

**Canadians for Safe Access**  
[www.safeaccess.ca](http://www.safeaccess.ca)

**John W. Conroy, Q.C.**  
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[www.tousawlaw.ca](http://www.tousawlaw.ca)

**DrugSense**  
[www.drugsense.org](http://www.drugsense.org)

**BC Coalition of People With Disabilities**  
1-800-663-1278

**Health Canada**  
<http://www.hc-sc.gc.ca/dhp-mps/marihuana/index-eng.php>

**Drug Policy Alliance**  
[www.drugpolicy.org](http://www.drugpolicy.org)

**Media Awareness Project**  
[www.mapinc.org](http://www.mapinc.org)

**Together Against Poverty Society**  
302-895 Fort Street, Victoria  
250-361-3521

***"I'm an oncologist as well as an AIDS doctor and I don't think that a drug [cannabis] that creates euphoria in patients with terminal diseases is having an adverse effect."***

**-- Donald Abrams, M.D.**