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Compelled by Compassion.

Statement of the Connecticut Medical Cannabis Council
House Bill 5442
Public Health Committee
February 11, 2019

Senator Abrams, Representative Steinberg, Senator Somers, Representative Petit and members of the committee:

The Connecticut Medical Cannabis Council (CMCC) would like to offer brief comments in support of House Bill 5442, *An Act Adding Chronic Pain as a Debilitating Medical Condition for the Palliative Use of Marijuana by a Qualifying Patient*.

CMCC is comprised of the four licensed medical marijuana producers in the state. We not only produce the medical marijuana that patients purchase from medical dispensaries, but we also formulate specific extracted ratios from the many medical properties of the cannabis plant. Our products are verified and validated by independent third party laboratory testing; our pharmaceutical grade medicines have helped Connecticut patients treat a variety of serious and debilitating ailments.

According to the National Conference of State Legislatures, 33 states, the District of Columbia, Guam and Puerto Rico, have comprehensive medical marijuana programs. The vast majority of these include some form of pain as a qualifying condition. Many states specify that the pain needs to be “chronic” or “severe” or “intractable,” while a number of states leave that decision up to the patient’s medical professional. These laws were enacted after years of discussion and review of the available medical literature and studies. Thus, in many states a patient can address their pain through a medical marijuana program.

This is not the case in Connecticut, however. Our program does not include “pain” as a qualifying condition, unlike every other New England state.

This month, Health Affairs, a peer-reviewed healthcare journal, published an article that showed chronic pain is the most frequent reason patients entered the medical marijuana program in 15 states that were studied. This next prevailing conditions were stiffness from multiple sclerosis and chemotherapy-related nausea.

While there may be a reluctance to move forward on this issue because of the role of the Board of Physicians in vetting and recommending additional qualifying conditions, there is also clear

precedent for the General Assembly to add qualifying conditions in statute on their own. These have included cystic fibrosis, terminal illness, cerebral palsy, as well as eligibility for minors with certain conditions such as epileptic seizures, and several other medical conditions for adults, through Public Act 16-23. The decision was made then to move quickly to help sick patients.

We respect and laud the good work done by the Board of Physicians. Enacting this bill would in no way be an “end run” around them. By all means, they should be part of the discussion on this issue, and we hope the board members and the committee leadership can meet to discuss a mutually acceptable way of moving forward with it. CMCC has always supported the need for additional research into the cannabis plant and will continue to do so.

House Bill 5442 will help address the fact that chronic pain is a major driver of opioid prescriptions. We could see patients diverting away from opioids once they have access to Connecticut’s medical marijuana program. This bill could very well save lives.

Over 30,000 Connecticut residents are registered as participants in Connecticut’s medical marijuana program. We believe the program is one of the best, if not the best, in the nation.

House Bill 5442 represents a modest update and enhancement to this program, consistent with the vetting and research that has occurred. It will provide a new avenue of relief for adult Connecticut residents whose lives are being derailed by constant, excruciating or chronic pain.

Thank you for considering the views of the Connecticut Medical Cannabis Council. Please contact me if you have any questions on the important work our four licensed medical marijuana producers do.

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