

TESTIMONY SUBMITTED BY

CHRIS GOLDSTEIN

**OF PENNSYLVANIANS FOR MEDICAL MARIJUANA AND
PHILLYNORML**

TO

HOUSE HEALTH AND HUMAN SERVICES COMMITTEE

HOUSE BILL 1393

STATE CAPITOL, HARRISBURG

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Thank you Chairmen Oliver and Baker and to all of the honorable members of this committee for considering our testimony today on House Bill 1393, legislation that would legalize access to marijuana by seriously ill PA residents.

My name is Chris Goldstein. I am a public radio broadcaster, writer and marijuana reform advocate. I volunteer on the Board of Directors at several area non-profits that promote common sense cannabis laws: PhillyNORML, the Philadelphia chapter of the National Organization for the Reform of Marijuana Laws and the group supporting HB 1393 Pennsylvanians for Medical Marijuana or PA4MMJ. It is a privilege and honor for me to represent the existing, underground medical cannabis consumers in the Commonwealth, those who may one day benefit from this bill and the medical professionals who wish to explore this therapy.

We are here today to share information about a topic that has seen a decided shift in 2009. Medical marijuana is mainstream. Thirteen states offer legal cannabis access. Hundreds of thousands of Americans find relief and a better life through cannabis therapy every single day. In October, the Department of Justice directed US Attorneys to not spend valuable resources prosecuting state authorized medical marijuana patients and providers in a memo that was widely publicized. The American Medical Association is now asking for the reclassification of cannabis in a report issued just a few weeks ago. Our neighbors in New Jersey are on the verge of passing a medical marijuana bill this very month.

We come here to this committee today with a tremendous amount of public and official support for HB1393. Here in this room are patients who have also submitted written testimony to this committee. FORTY-SEVEN WRITTEN TESTOMIES HAVE BEEN SUBMITTED TODAY BY PA4MMJ. Over 70% of PA voters have polled in favor of medical marijuana; newspaper editorial boards such as the Philadelphia Inquirer, Pocono

Record and the Daily Review of Towanda have endorsed the bill. The AIDS Law Project, National Lawyers Guild and ACLU all support the bill.

While it may be seen a noble legislative exercise to completely re-consider the entire topic of medical marijuana, the honorable members of this committee and your colleagues in both houses of this legislature do not need to explore this issue in a vacuum. Although this is the very first time there is a bill to consider here in PA, over two dozen US states have held hearings, there is a federal medical marijuana program and, again, 13 states operate a program. There are many resources for you to draw upon to carefully weigh this matter.

Marijuana is non-toxic, non lethal and has been rigorously researched. Marijuana is medicine by any standard and is used as medicine above ground and underground by many Americans. The most detrimental side effect of medical cannabis is running afoul of prohibition laws. This bill is called a Compassionate Use Act for a reason; we want to stop arresting and persecuting patients for choosing a medical therapy that works!

Sitting with me today are two local medical marijuana patients, one is facing prison and both have allowed the media into their very personal experience using marijuana therapy. John Wilson lives with Multiple Sclerosis in New Jersey; next week he is facing the first-degree felony charge of Operating a Drug Manufacturing facility for growing 17 marijuana plants. He has been ordered not to tell the jury he has MS. Two state Senators, Nicholas Scutari and Raymond Lesniak have asked the Governor Corzine to pardon John on those first-degree charges.

Also with me today is Bradley Walter, he lives with HIV. I'm going to let him briefly tell his story:

You will hear passionate entreaties by both sides today. But remember, as nuanced as this issue is – it comes back to one simple point – Stop Arresting suffering people for pot.

PA has this peculiar relationship with the history of marijuana prohibition.

Harry Anslinger Jr was a racist; a prohibitionist and the man behind the film Reefer Madness. Seventy-two years ago Anslinger helped to rush through the first federal prohibition of cannabis – the 1937 Marijuana Tax Stamp Act. He relied on fear tactics to promote the new concept with numerous claims that marijuana would cause a number of health detriments, that children use it and that (the worst part to Anslinger) it promoted interracial relationships. Reefer Madness may seem like a cliché, but Anslinger's racist and fantastical demonization of marijuana, none of it based in fact, continue to have a negative impact on this country.

There was only one group stood up to officially oppose the 1937 Marijuana Tax Stamp Act, and they did so on very realistic grounds. It was the American Medical Association, then and now, the largest physician group in the nation. In 1937 medicine was in the hands of the "country doctors" who employed a variety of methods to bring relief to their

patients. Cannabis tinctures, creams, teas, poultices, edibles and the smoke itself had long been in the American physicians' tool chest of solutions. They were used for a wide variety of ailments including nausea, but were especially used for pain relief. The AMA observed the politics of Anslinger and prophetically saw what the future would be for cannabis therapies should the prohibitionist machinations move ahead.

The AMA's Legislative Council, William Woodward, offered compelling testimony before Congress in 1937 begging them not to pass the bill. Woodward's testimony is a tribute to the AMA

“As remedial agents, they are used to an inconsiderable extent, and the obvious purpose and effect of this bill is to impose so many restrictions on their use as to prevent such use altogether. Since the medicinal use of cannabis has not caused and is not causing addiction, the prevention of the use of the drug for medicinal purposes can accomplish no good end whatsoever. How far it may serve to deprive the public of the benefits of a drug that on further research may prove to be of substantial value, it is impossible to foresee.”

The racist marijuana prohibitionist Harry Anslinger Jr., who invented this misguided policy, is a son of the Commonwealth of Pennsylvania: raised in Altoona and buried in Hollidaysburg. Woodward's full 1937 testimony is included in my written submission to this committee. For anyone considering the issue of medical marijuana it is essential reading. There has been a history of medical experts and patient advocates trying to make sure the non-toxic therapeutic agent of cannabis was protected in its availability from the first hints of prohibition.

The next major milestone for marijuana policy also featured a prominent Pennsylvanian. In 1969 a supreme court ruling, *Leary vs. State*, found that the 1937 Marijuana Tax Stamp was an unconstitutional tax and struck down the federal prohibition of marijuana.

The following year the United States rolled out the Controlled Substances Act. President Nixon appointed a blue-ribbon commission chaired by a former Republican Governor of Pennsylvania Robert Schaffer. In 1972 The Presidential Commission on Marihuana recommended that cannabis be removed from Schedule I in the CSA and be decriminalized for personal use. Nixon ignored his own Commission's recommendations...and here we are today. Governor Shaffer passed away in 2007 and was honored here in Harrisburg.

As a journalist I have covered the topic of medical marijuana for over a decade. It has been a privilege for me to interview dozens of patients, advocates, doctors, scientists and state legislators who have considered this issue around the country. I have also interviewed several US Congressmen on the topic in including Barney Frank of Massachusetts and Ron Paul of Texas. Both have appeared on my radio program numerous times to discuss their federal reform legislation. So as you consider the topic of medical marijuana today, know that hundreds of our state legislative peers have one so before you and the federal government has active legislation to protect states rights to produce safe access to their residents.

Every member of this committee has received emails with information from our groups Pennsylvanians for Medical Marijuana including copies of those federal bills such as the Medical Marijuana Patient Protection Act. We have also directed our supporters to contact all of you directly. As you know, many have reached out to you on this issue.

Today you will hear from the opposition. They will try and bring up issues that are not related to medicine. The opposition today will draw on the same Reefer Madness scare tactics of seventy years ago. Somehow they will try and bring up the recreational marijuana market in relation to our talk today about medical cannabis. That is wrong. Medical marijuana and recreational marijuana are separate. That is the whole point of this legislation. We want patients out of the underground market. We want to create a safe consistent and inexpensive marijuana supply of cannabis for patients. Recreational consumers do not need to access the medical marijuana program nor could they do so with the checks and balances already within HB1393.

When we consider medication we weigh the risks against the benefits. The moniker of medicine is to 'do no harm.' Compare cannabis to even over the counter cold medications or ibuprofen. We can all walk about of a local convenience store with a single bottle of ibuprofen with enough of the drug to kill human. No patient can ever walk away from a medical marijuana dispensary with a lethal dose.

People also wonder if it is OK to sell and tax medical marijuana. Well we all know that the healthcare industry is run FOR a profit. The revenue generated on everything from a bottle of Aspirin to chemotherapy represents a significant portion of our economy. In this atmosphere I think it is perfectly acceptable for therapeutic marijuana to be sold and taxed. But, because of the unique and localized agricultural aspect, costs on this product can be kept to a bare minimum.

It is fitting that we are here to discuss this important issue – because while you will hear today about science, medicine, policy and politic there is one thing that HB 1393 comes down to and that is freedom. Freedom: To seek relief from pain or other conditions. Freedom: To discuss medicine with our doctor. Freedom from the persecution of the state for choosing a medical therapy available to other US citizens. JAIL IS NOT MEDICINE – MARIJUANA IS MEDICINE. This hearing today is a step towards greater freedom for Pennsylvania residents. Read about and hear from the patients today about the fear that they live under – the freedom we are addressing today is a tangible one. It is my sincere hope that this committee and other arms of this legislature will hold public hearings across the Commonwealth so that this issue can be fully explored beyond our limited time today.

I sincerely thank this Committee for your consideration today and I now welcome any questions you have about HB 1393 or the topic of medical marijuana.

Medical Marijuana in PA:

Stop the arrest of suffering Pennsylvanians

Allow the sick and dying to have a well-documented therapy

Gain back Public Safety Budget funds

Tax revenue for the state and counties

Important points of modern medical marijuana:

Domestic and Home Cultivation allow patients the safest access and lowest costs

Compassion Centers allow for patient access and education

Vaporization is a new method of utilizing cannabis therapy, it is **not smoked** in this process

Edible preparations in foods are used widely for medical purposes and require larger amounts of raw plant material to create

Smoked marijuana in itself is not a detriment to health and does not cause lung cancer

Marijuana is non-toxic and non-lethal

ATTACHMENTS:

Supporting Medical Organizations: Cannabis

A Civil Right to Marijuana the John Ray Wilson Case

American Medical Assn Report 11/2009

Department of Justice memo 10/2009