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Senator Craig Hickman, Chair
Representative Laura D. Supica, Chair
Members, Joint Standing Committee on Veterans and Legal Affairs
100 State House Station
Augusta, ME 04333-0100

Re: LD 1819 - *An Act to Create the Maine Medical Cannabis Advisory Commission and the Medical Cannabis Alternative Health Board*

Senator Hickman, Representative Supica, and Members of the Committee on Veterans and Legal Affairs:

Thank you for the opportunity to provide information about LD 1819 - An Act to Create the Maine Medical Cannabis Advisory Commission and the Medical Cannabis Alternative Health Board, and the potential impact of the proposed legislation, if enacted.

This bill makes changes to the medical cannabis and adult use cannabis laws, including:

1. Creating the Maine Medical Cannabis Advisory Commission with membership consisting of stakeholders in the medical cannabis industry in the State to study, analyze and report findings about the administration and medical use of cannabis to the Legislature, make recommendations for improvement and nominate members to the Medical Cannabis Alternative Health Board;
2. Creating the Medical Cannabis Alternative Health Board to collect and provide information and administer grants to support objective scientific research on the efficacy of harvested cannabis as part of medical treatment and the health effects of harvested cannabis used as part of medical treatment. The board's staffing and activities are funded by the Medical Use of Cannabis Fund; and
3. Eliminating the Cannabis Advisory Commission under the adult use cannabis laws.

The Maine Center of Disease Control and Prevention (Maine CDC) has concerns about LD 1819 and offers the following comments for your consideration.

The existing Cannabis Advisory Commission under the Adult Use Cannabis Program (AUCP) consists of a broad membership from numerous sectors impacted by cannabis legalization, including cannabis industry stakeholders, State of Maine Leadership, professionals engaged in public health policy, law enforcement, attorneys, and representation to help focus on health equity. The benefit of a large, diverse membership of the commission is the ability to entertain unique perspectives and consider a variety of experiences in the development of recommendations related to the industry, public health, and public safety. Removal of the

Cannabis Advisory Commission under the AUCP and simultaneously developing a separate Medical Cannabis Advisory Commission with membership limited to industry stakeholders alone eliminates the ability to entertain these unique perspectives. Discussions around the cannabis industry often forgo the highly important conversations of upholding public health and safety.

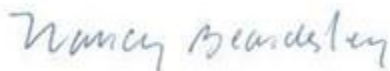
Regarding the proposed development of the Medical Cannabis Alternative Health Board, the Maine CDC has a few concerns to be considered by the Committee if this legislation is to be enacted. Similar to the Medical Cannabis Advisory Commission, the proposed membership of this board is limited largely to industry stakeholders and again eliminates the opportunity for diverse professional expertise and perspectives. These perspectives are especially essential when funding grant proposals to study efficacy and impacts of medical treatments, as they help ensure unbiased, ethical, and well-rounded study proposal and design. Maine CDC suggests including at least one professional from the public health field who is not directly tied to the cannabis industry, one health equity expert, one non-industry pediatrician, as well as no less than one non-industry mental health/psychiatry professional to ensure consideration of long-term impacts of cannabis in program design, especially where minor patients and/or high-potency products are concerned.

Historically, industry-funded research for tobacco and alcohol has not been a trusted source of information by governmental or health agencies and has been heavily disregarded in the field. As documented by the Campaign for Tobacco-Free Kids in 2017, several agencies across the world including the World Health Organization and the American Cancer Society, rejected tobacco research backed by tobacco industry funds due to conflicts of interest¹. This again speaks to the need for robust and diverse membership of the health board.

If the Committee moves forward with the bill, Maine CDC also proposes that language be added around procedure for following, documenting, and reporting these long-term impacts in addition to short-term outcomes in studies. As with any medical treatment, these data are important to have to inform long-term applications for the study findings, and can be useful in helping to develop thresholds for the lowest effective dosage and potency of recommended treatments for specific conditions.

Thank you for your consideration of this matter. The Maine CDC is available to provide additional details for the Committee's consideration.

Respectfully,



Nancy Beardsley, Acting Director
Maine Center for Disease Control and Prevention

¹ Public Health Groups and Leaders Worldwide Urge Rejection Of Philip Morris International's New Foundation; <https://www.tobaccofreekids.org/what-we-do/industry-watch/pmi-foundation/compilation>