

# Maine Chapter

INCORPORATED IN MAINE

American Academy of Pediatrics

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## Testimony in Opposition:

**LD 40, "An Act to Protect Liberty and Advance Justice in the Implementation, Administration and Enforcement of the Cannabis Legalization Act and To Implement Certain Recommendations of the Subcommittee on Non-substantive Changes to the Maine Medical Use of Cannabis Act."**

**March 4, 2024**

**Joint Standing Committee on Veterans and Legal Affairs**

Senator Hickman, Representative Supica and members of the Joint Standing Committee on Veterans and Legal Affairs, I am Deborah Hagler MD, MPH. I reside in Harpswell. I have practiced general pediatrics in Brunswick for almost 27 years.

The Maine Chapter of the American Academy of Pediatrics opposes LD 40. We ask you, why is this bill being given emergency consideration when it is regulating a plant containing psychoactive compounds that are known to have serious consequences for youth and young adults who are exposed? In addition, while the title suggests "non-substantive" changes are being made, a lengthy amendment with one week's notice has been proposed, making a host of changes including among many others:

- Confidentiality provisions around caregivers and notification to the caregiver if a qualifying disorder continues to exist.
- Adding an onsite use provision for medical cannabis users.
- Adding an entire portion around civil penalties for minors.
- Changing some of the rules around manufacturing of edibles.
- Removing training requirements for age verification for deliveries; and
- Striking language around marketing materials and additives that may appeal to those less than 21.

We know youth are using cannabis and we know they underestimate the risk associated with it. 61% of Maine high school students see little or no risk in using cannabis one or two times a week.<sup>1</sup> Furthermore, over half of teens suggest having little difficulty obtaining it. What youth and many adults do not appreciate is that regular use during adolescence changes their adolescent brains; diminishing their memory; costing them IQ points; increasing the risk they will not finish school; increasing the risk of depression; and increasing the odds by 3.5 times of making a suicide attempt versus their peers who are not regular users of cannabis. Use of cannabis for youth is most strongly associated with the risk of developing severe mental illness such as schizophrenia or bipolar disorder- with those ages 16-25 at highest risk because the brain is still developing.<sup>2,3</sup> Any marketing, let alone *any changes* to Maine's current statute, should carefully consider this.

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In re-reading the introduction to LD 40 the issuing of monetary penalties by the Office of Cannabis Policy has been deemed a threat to the viability of small businesses and thus an emergency. We all want Maine's economy to thrive - but not at the expense of youth or others developing a severe mental illness or making a suicide attempt because risks have not been appreciated or adequate mitigation strategies have not been put in place. While we think about business, we forget the costs to individuals, families, and friends living with these illnesses; the tremendous cost to the healthcare system - direct care in the U.S for schizophrenia was estimated in 2019 to be 62.3 billion dollars with a total cost to the economy of 343 billion dollars.<sup>4</sup>

**In closing, this is not an emergency. We have much to consider. Please vote "ought not pass."**

1.[MIYHS](#)

2.Beckmann D, Lowman KL, Nargiso J, McKowen J, Watt L, Yule AM. Substance-induced Psychosis in Youth. Child Adolesc Psychiatr Clin N Am. 2020 Jan;29(1):131-143. doi: 10.1016/j.chc.2019.08.006. Epub 2019 Sep 23. PMID: 31708042; PMCID: PMC8961695.

3.Gobbi G, Atkin T, Zytynski T, Wang S, Askari S, Boruff J, Ware M, Marmorstein N, Cipriani A, Dendukuri N, Mayo N. Association of Cannabis Use in Adolescence and Risk of Depression, Anxiety, and Suicidality in Young Adulthood: A Systematic Review and Meta-analysis. JAMA Psychiatry. 2019 Apr 1;76(4):426-434. doi: 10.1001/jamapsychiatry.2018.4500. Erratum in: JAMA Psychiatry. 2019 Apr 1;76(4):447. PMID: 30758486; PMCID: PMC6450286.

4.Kadakia A, Catillon M, Fan Q, Williams GR, Marden JR, Anderson A, Kirson N, Dembek C. The Economic Burden of Schizophrenia in the United States. J Clin Psychiatry. 2022 Oct 10;83(6):22m14458. doi: 10.4088/JCP.22m14458. PMID: 36244006.