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Senator Hickman, Representative Supica, and honorable members of the Joint Standing Committee on Veterans and Legal Affairs,

My name is Alyssa Goodwin, MD, and I live in Brunswick. I have been a pediatrician in Maine for over 20 years. I serve on the board of the Maine Chapter of the American Academy of Pediatrics (MeAAP) and chair MeAAP's School Health Committee. I am testifying today in support of **LD 1847** and **LD 104**, which would strengthen Maine's Medical Cannabis Program by requiring product testing and tracking, and by prioritizing efforts to reduce youth cannabis use.

Since Maine legalized medical cannabis by referendum in 2009—and later legalized adult recreational use in 2016—we've seen increases in both youth cannabis use and unintentional pediatric exposures. Nearly **1 in 5 Maine high school students** currently use cannabis. This is particularly alarming given that today's cannabis products can contain **THC concentrations as high as 90%**, compared to the **2–3%** typically found in cannabis in the 1970s.

Maine's Medical Cannabis Program lags far behind national standards for safety and transparency. Of the more than 30 states with medical cannabis programs, Maine is the **only one that does not require testing** for contaminants such as heavy metals, pesticides, or mold. According to the 2023 *Maine Office of Cannabis Policy Report* on **Harmful Contaminants in Maine's Medical Cannabis Program**, **42% of medical cannabis samples** tested contained at least one contaminant that would have failed testing in the Adult Use program. This lack of oversight is unacceptable—and unfair to the thousands of people who rely on medical cannabis for treatment.

High-potency cannabis can disrupt adolescent brain development and **increase the risk of anxiety, depression**, and serious mental illnesses such as **schizophrenia** (CDC, 2024; *The New York Times*, "As America's Marijuana Use Grows, So Do the Harms"). Yet more than **60% of Maine high school students**—including many I have cared for—believe there is **little to no risk** in using cannabis once or twice a week (2023 Maine Integrated Youth Health Survey).

We need policies that **reduce high-risk cannabis use among youth** so our children can thrive. **LD 1847** would help do that by:

- Establishing a **maximum THC potency** for edibles in the Medical Cannabis Program, consistent with limits already in place in the Adult Use Program.

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- Forming a **study group** to examine youth cannabis use and identify evidence-based prevention strategies.
- Redirecting a portion of Adult Use cannabis tax revenue to **public health education and awareness efforts**.
- Requiring that **unstamped or unembossed edible gummies** sold in the Adult Use Program be sold in **blister packaging**, to reduce the risk of accidental ingestion.

Research consistently shows that higher-potency cannabis increases the risk of negative mental health outcomes, especially for adolescents. Despite this, the Medical Cannabis Program currently **has no cap on THC content** in edibles—putting patients, especially youth, at increased risk of overconsumption and adverse effects.

I respectfully urge you to vote “**Ought to Pass**” on LD 1847 and LD 104. These are long-overdue steps to bring greater **safety, transparency, and public health accountability** to Maine’s Medical Cannabis Program.

Thank you for your time and your commitment to the health and well-being of Maine’s youth.

Thank you.

Alyssa Goodwin, MD