





TESTIMONY OF MAINE MEDICAL ASSOCIATION, MAINE OSTEOPATHIC ASSOCIATION, MAINE PUBLIC HEALTH ASSOCIATION In OPPOSITION TO:

LD 1365: An Act to Allow Consumption of Adult Use Cannabis in Locally Approved Hospitality Lounges

Joint Standing Committee on Veterans and Legal Affairs State House, Room 437 Thursday, May 8, 2025

Good morning, Senator Hickman, Representative Supica, and distinguished members of the Joint Standing Committee on Veterans and Legal Affairs. On behalf of Maine Medical Association (MMA), Maine Osteopathic Association (MOA), and Maine Public Health Association (MPHA), we write in opposition to LD 1365: "An Act to Allow Consumption of Adult Use Cannabis in Locally Approved Hospitality Lounges." This bill would allow for the consumption of cannabis and cannabis products in the venue where the products were purchased.

MMA is a professional organization representing more than 4,000 physicians, residents, and medical students in Maine. MMA's mission is to support Maine physicians, advance the quality of medicine in Maine, and promote the health of all Maine people. MOA is a professional organization representing more than 1,200 osteopathic physicians, residents, and medical students in Maine whose mission is to serve the Osteopathic profession of the State of Maine through a coordinated effort of professional education, advocacy, and member services to ensure the availability of quality osteopathic health care to the people of this State. MPHA is the state's oldest, largest, and most diverse association for public health professionals. MPHA represents more than 850 individuals and 70 organizational members across the state. MPHA's mission is to advance the health of all people and places in Maine.

We first want to thank Representative Boyer for incorporating health considerations into this latest version of the bill, including responsible server training and public education. We can see that concerns we've raised in the past were attempted to be addressed in this legislation; thank you.

With that said, we still have remaining concerns about intoxication and air ventilation. As we've shared before, there is variability in the time it takes to feel the effects of cannabis; as such, we are concerned about consumers leaving the venue "under the influence" without realizing it. Cannabis, unlike alcohol use, has no established standard for minimum allowable consumption, which can lead to impaired driving.

Furthermore, as we stated previously, at a fundamental level, we also have concerns about the health impacts of smoking cannabis and second-hand cannabis smoke exposure. Indeed, there are carcinogens in cannabis smoke, which pose health risks to the person smoking and to others in proximity. According to the U.S. CDC, "Smoked cannabis delivers THC and other cannabinoids to the body, but it also delivers harmful substances, including many of the same toxins and carcinogens (cancer-causing chemicals) found in tobacco smoke, which are harmful to the lungs and cardiovascular system. More research is needed to understand the effects cannabis might have on lung and other respiratory cancers. However, limited evidence of an association between current, frequent, or chronic cannabis smoking and testicular cancer (non-seminoma-type) has been documented." Toxins in cannabis smoke include mercury, ammonia, cyanide, lead, and formaldehyde, as well as hazardous fine particles. If smoking were to be allowed, then servers and other non-smoking customers would be exposed to these substances.

Several leading public health organizations have documented for decades that ventilation is ineffective at preventing smoke from moving between indoor spaces. For example, the American Society of Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE) 2023 Report on Indoor Air Quality states, "At present, the only means of effectively eliminating health risks associated with indoor exposure is to ban smoking activity... No other engineering approaches, including current and advanced dilution ventilation or air cleaning technologies, have demonstrated or should be relied upon to control health risks from ETS [environmental tobacco smoke] exposure in spaces where smoking occurs... Because of ASHRAE's mission to act for the benefit of the public, it encourages elimination of smoking in the indoor environment as the optimal way to minimize ETS exposure."

Given these remaining public health concerns, we are still in opposition to this bill. What it comes down to is that opening up Maine's strong indoor smoke-free laws, which have protected generations of Mainers from harmful secondhand smoke for decades, is a slippery slope. In 2003, Maine became the fifth state in the country to pass comprehensive smoke-free laws, including prohibiting smoking in bars and lounges; that was the right decision then, and continues to be now. We believe this bill poses a risk to public health and safety and respectfully request you to vote LD 1365 "ought not to pass." Thank you for your consideration.

1

¹ Moir D, Rickert WS, Levasseur G, et al. A comparison of mainstream and sidestream marijuana and tobacco cigarette smoke produced under two machine smoking conditions. *Chem Res Toxicol*. 2008;21(2):494-502.

² Lushniak BD, Samet JM, Pechacek TF. et al. The health consequences of smoking—50 years of progress. A report of the Surgeon General. Atlanta, GA. 2014.

³ National Academies of Sciences, Engineering, and Medicine. <u>The health effects of cannabis and cannabinoids: the current state of evidence and recommendations for research</u>. Washington, DC: The National Academies Press; 2017.

⁴ Gurney C, Shaw J, Stanley V, et al. Cannabis exposure and risk of testicular cancer: a systematic review and meta-analysis. *BMC Cancer*. 2015;15:897.

⁵ See 2006 U.S. Surgeon General's Report: <u>The health consequences of involuntary exposure to secondhand smoke</u>; 2010 U.S. Surgeon General's Report: <u>How tobacco smoke causes disease</u>; European Commission Joint Research Centre 2003 Report: <u>Indoor air pollution</u>: <u>New EU research reveals higher risks than previously thought</u>.

Joint Standing Committee on Veterans and Legal Affairs C/O Legislative Information Office 100 State House Station Augusta, ME 04333

May 8, 2025

Re: LD 1365 - An Act to Allow Consumption of Adult Use Cannabis in Locally Approved Hospitality Lounges

On behalf of the medical, environmental, and public health organizations listed below, we want to express our opposition to LD 1365, *An Act to Allow Consumption of Adult Use Cannabis in Locally Approved Hospitality Lounges, and the proposed amendment.* We are specifically concerned with section one of the bill, which would amend current law and allow consumers to smoke indoors.

For decades, we have worked diligently to protect clean air. There are carcinogens in cannabis smoke, which pose health risks to the person smoking and to others in proximity. According to the U.S. CDC, "Smoked cannabis delivers THC and other cannabinoids to the body, but it also delivers harmful substances, including many of the same toxins and carcinogens (cancer-causing chemicals) found in tobacco smoke, which are harmful to the lungs and cardiovascular system. More research is needed to understand the effects cannabis might have on lung and other respiratory cancers. However, limited evidence of an association between current, frequent, or chronic cannabis smoking and testicular cancer (non-seminoma-type) has been documented."^{3,4}

These toxins include mercury, ammonia, cyanide, lead, and formaldehyde, as well as hazardous fine particles. If smoking were to be allowed, then servers and other consumers would be exposed to these substances.

In 2003, Maine became the fifth state in the country to pass comprehensive smoke-free laws, including prohibiting smoking in bars and lounges; that was the right decision then, and continues to be now.

By signing this petition, our organizations call for action to protect our smoke-free laws. We urge the Joint Standing Committee on Veterans and Legal Affairs to oppose LD 1365. Thank you.

American Academy of Pediatrics, Maine Chapter Campaign for Tobacco-Free Kids Maine Academy of Physician Associates Maine Indoor Air Quality Council Maine Osteopathic Association Maine Public Health Association Students Empowered to End Dependency American Lung Association Defend Our Health

Maine Conservation Voters
Maine Medical Association
Maine Primary Care Association

Physicians for Social Responsibility Maine

Third Act Maine

¹ Moir D, Rickert WS, Levasseur G, et al. A comparison of mainstream and sidestream marijuana and tobacco cigarette smoke produced under two machine smoking conditions. *Chem Res Toxicol*. 2008;21(2):494-502.

² Lushniak BD, Samet JM, Pechacek TF. et al. The health consequences of smoking—50 years of progress. A report of the Surgeon General. Atlanta, GA. 2014.

³ National Academies of Sciences, Engineering, and Medicine. The health effects of cannabis and cannabinoids: the current state of evidence and recommendations for research. Washington, DC: The National Academies Press; 2017. https://nap.nationalacademies.org/catalog/24625/the-health-effects-of-cannabis-and-cannabinoids-the-current-state.

⁴ Gurney C, Shaw J, Stanley V, et al. Cannabis exposure and risk of testicular cancer: a systematic review and meta-analysis. *BMC Cancer*. 2015;15:897.