



Maine Medical
Association



**TESTIMONY OF THE MAINE MEDICAL ASSOCIATION
AND
THE MAINE OSTEOPATHIC ASSOCIATION**

AGAINST

L.D. 2147, An Act to Remove the Requirement for Edible Cannabis Products to Be Stamped or Embossed on Each Serving with a Universal Symbol

Joint Standing Committee on Veterans and Legal Affairs
Room 437, State House, Augusta, Maine
Wednesday, January 24, 2023

Good morning Senator Hickman, Representative Supica, and Members of the Joint Standing Committee on Veterans and Legal Affairs. My name is Anne Sedlack, and I am the Director of Advocacy for the Maine Medical Association. I am submitting this testimony against LD 2147, An Act to Remove the Requirement for Edible Cannabis Products to Be Stamped or Embossed on Each Serving with a Universal Symbol on behalf of the Maine Medical Association and the Maine Osteopathic Association.

The Maine Medical Association (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. The Maine Osteopathic Association (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 in order to ensure the availability of quality osteopathic health care to the people of this State.

This year MMA and MOA's legislative committees have joined together to advocate from one voice. And our Committee has determined that it is important to testify against LD 2147 for a number of reasons.

We want to note that evidence based research of the benefits of cannabis has increased over the years and we have seen the beneficial effects of cannabis on some of our patients;

however, we are also concerned about the lack of guardrails on the adult use industry and medical program. MMA and MOA are dedicated to bringing the physician voice back into the discussion. For example, Maine is experiencing a major public health problem. For instance:

- **Youth.** About one-third of high school students report having used cannabis, with about one in five of them report having tried cannabis for the first time before the age of 13, and one in five of all students report having used cannabis at least one time during the last month
- **Young Adults.** National data from 2022 show that 44% all young adults (ages 19 – 30) use cannabis, and 11% use the drug daily.
- **Pregnancy.** About one in four Maine women in 2017 reported having used cannabis during pregnancy or in the three months before pregnancy.

These growing numbers are concerns for a number of reasons like:

- **Serious Mental Illness.** TCH (tetrahydrocannabinol) content in cannabis is primarily now high potency, meaning TCH is >15% of the product, compared with 2% 20 years ago. As a result, there is a 4-fold increased risk of cannabis triggering schizophrenia, a risk that is especially pronounced among youth and young adult users. About half of those go on to have a permanent serious mental illness. Indeed, Maine's psychiatrists report increases in youth and young adult schizophrenia associated with cannabis use.
- **Cognitive Changes.** Cannabis use among youth and young adults is associated with changes in memory, attention, and higher functioning that persist after they stop using the drug.
- **Fetal Development.** Cannabis use during pregnancy is associated with harmful effects on the baby, including low birth weight and abnormal neurological development.¹

Therefore, we believe it is important for the Legislature and the Office of Cannabis Policy to be wary of deregulation efforts. The specific needs/wants of individual businesses should never substantially outweigh consumer health and safety.

Our specific concerns about LD 2147 are as follows.

¹ 2023 Maine Youth Integrated Youth Health Survey: [Home | miyhs \(maine.gov\)](#); 2022 NIH National Drug Survey: [Marijuana and hallucinogen use, binge drinking reached historic highs among adults 35 to 50 | National Institute on Drug Abuse \(NIDA\) \(nih.gov\)](#); 2017 Maine Pregnancy Date: [prams-mj.pdf \(maine.gov\)](#); [Development Over Time of the Population-Attributable Risk Fraction for Cannabis Use Disorder in Schizophrenia in Denmark - PubMed \(nih.gov\)](#); [Rates and Predictors of Conversion to Schizophrenia or Bipolar Disorder Following Substance-Induced Psychosis | American Journal of Psychiatry \(psychiatryonline.org\)](#); [Adverse Health Effects of Marijuana Use | NEJM](#); [The Neurocognitive Effects of Cannabis Across the Lifespan - PMC \(nih.gov\)](#); [Pregnancy | Health Effects | Marijuana | CDC](#); [Health Effects of Marijuana | Health Effects | Marijuana | CDC](#).

First, universal symbols should be the standard for any product that could cause harm to the individual if they ingested the product. It is critical that adults know what they are ingesting or accidentally putting in the reach of children.

Second, we are concerned that this would be changing course on an established law which will cause even more of a risk to the public. Overturning law should only be done when critically necessary. We like to think that everyone is aware of all the laws that the Legislature passes, but that just simply isn't the case. The universal symbol is known and should not be changed simply because it is difficult for the business.

Thank you for considering the thoughts of Maine's physician community about L.D. 2147. We urge an "ought not to pass" vote on this bill. I would be happy to respond to any questions you may have.

Thank you,

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