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### **Testimony in SUPPORT of:**

- □ LD 104, An Act to Protect the Health of Medical Cannabis Patients and Streamline the Mandatory Testing of Cannabis
- □ LD 1847, An Act to Institute Testing and Tracking of Medical Use Cannabis and Cannabis Products Similar to Adult Use Cannabis and Cannabis Products, Dedicate a Portion of the Adult Use Cannabis Sales and Excise Tax to Medical Use Cannabis Programs and Create a Study Group

# Committee on Veteran and Legal Affairs May 5, 2025

Senator Hickman, Representative Supica, and honorable members of the Committee on Veteran and Legal Affairs,

My name is Dr. Anne Coates, and I'm a pediatric pulmonologist and the Vice President of the Maine Chapter of the American Academy of Pediatrics. The Maine AAP is a membership organization of 300 pediatricians and pediatric subspecialists dedicated to protecting the health of Maine children and adolescents.

I'm submitting this testimony in support of LD 1847 and LD 104, which seek to improve safety and transparency in Maine's Medical Cannabis Program and aim to reduce youth cannabis use.

There are 110,500 people in Maine that access cannabis through the Medical Program, including pediatric patients (1). When patients and caregivers access cannabis products from the Medical Program, they expect that these products are properly regulated and tested to ensure patient safety. However, many patients are surprised to learn that these products are not consistently tested across the medical program, and the products they're using medicinally may contain unsafe molds, heavy metals, pesticides, and other contaminants. A report from the Office of Cannabis Policy revealed that 42% of medical cannabis tested had at least one contaminant that would have failed testing in the Adult Use Cannabis Program. For a program serving patients, including pediatric patients and those who may be immunocompromised, this is unacceptable.

As a pediatric pulmonologist, I specialize in respiratory and lung-related issues in children. The possibility of a patient, adult or pediatric, inhaling contaminants such as mold, is extremely concerning. One mold found to grow on cannabis, Aspergillus, has been shown to cause lung disorders when smoked by an individual with a compromised immune system (2, 3, 4). Patients using medical cannabis to treat their conditions or relieve their symptoms should not have to worry about getting sicker or developing new conditions.

In addition to a lack of testing, the absence of potency caps in the medical program is also problematic and dangerous. Especially for adolescents whose brains are still developing, higher potency cannabis can increase the risk of adverse reactions. Requiring potency caps on medical cannabis products is essential to ensuring patient safety.

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LD 1847 also takes an important step in addressing youth cannabis use. Nearly 1 in 5 Maine high schoolers currently use cannabis, a concerning rate when considering the health risks of cannabis use among adolescents. In addition to altering brain development, cannabis use can increase an adolescent's risk of anxiety, depression and other mental illnesses like schizophrenia. In addition, youth who regularly use cannabis are more likely to attempt suicide compared with their peers (5). More research is needed to understand youth cannabis use in Maine and how we can effectively prevent and reduce high-risk use, and this bill seeks to do exactly that.

Please ensure that Maine patients have access to safer, tested cannabis products, and help to prevent and reduce youth cannabis use by voting "Ought to Pass" on LD 104 and LD 1847.

Thank you for your time and consideration.

Anne Coates, MD Vice President, Maine AAP

## References:

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