MMA not supportive of medical marijuana legislation

After 15 years without a policy on the controversial topic of medical marijuana, the MMA now has a position that calls for more research to be conducted before it would consider supporting legislation to make the drug available to patients.

Since the late 1990s, the MMA has taken a nonposition on the issue. Even when the 2009 Legislature voted to approve the use of medical marijuana (only to be vetoed by then Gov. Tim Pawlenty), MMA leadership remained neutral.

However, this year, legislation has gained momentum partly because of the growing number of families with heart-wrenching stories of children suffering from seizures who could benefit from legalizing the substance.

“Although we’ve discussed this in the past, we have not passed a policy that would guide us on legislative action,” says Robert Meiches, M.D., MMA CEO. “We decided that with the pending legislation at the Capitol, it’s time again to hear from members and discuss the pros and cons of taking a position.”

The pros and cons came through several avenues: a March 4 policy forum in Eagan; an email survey to all members on March 7; a discussion by the MMA’s public health committee on March 11; and then a formal vote by the board of trustees on March 15. Each time, the majority voted not to support the current legislation.

“We don’t have the evidence and the science to really say where it works well and where it doesn’t, and we don’t have a way of knowing at this point in time what the availability of the drug is and the product that’s being used,” Board Chair Dave Thorson, M.D., told Minnesota Public Radio after the board’s decision.

No. 1 topic
Medical marijuana has certainly been a hot topic this spring (see Viewpoint on page 34).

The March 7 email survey generated the largest response from members in MMA history. Nearly 900 physician members weighed in on the topic with 46 percent asking the MMA to oppose legalizing medical marijuana. Thirty-three percent wanted the MMA to support it, 9 percent said the MMA should not take a position and 10 percent said they didn’t know. The results of this large survey mirrored the sentiments of participants at the March 4 forum.

The press has closely monitored each step the MMA has taken on the issue, featuring stories on each metro-area television network, multiple articles in the dailies and numerous updates on the radio.

The MMA’s position is based on the fact that there is a lack of research on the drug in the United States. As part of its policy, the MMA’s board voted to call “for further adequate and well-controlled studies of marijuana and related cannabinoids in patients who have serious conditions for which preclinical, anecdotal, or controlled evidence suggests possible efficacy and the application of such results to the understanding and treatment of disease.”

In addition, the MMA “urges that marijuana’s status as a federal Schedule I controlled substance be reviewed with the goal of facilitating the conduct of clinical and public health research and development of cannabinoid-based medicines, and alternate delivery methods.”

Until marijuana is FDA-approved and is no longer classified in Schedule I by the Drug Enforcement Administration, the MMA’s leaders say they cannot support legislation intended to involve physicians in certifying, authorizing or directing people toward medicinal marijuana outside of scientific clinical trials.

As this issue went to press, the Legislature continued the debate the topic. It had passed through only one committee and appeared to be stalled for the session.