

AMA 2020 MEDICAL STUDENT ADVOCACY AND REGION CONFERENCE

ISSUE BRIEF: MEDICAL MARIJUANA

Definitions of Cannabis and Marijuana

Cannabis is a plant of the Cannabaceae family and contains more than eighty biologically active chemical compounds. The most commonly known compounds are delta-9-tetrahydrocannabinol (THC) and cannabidiol (CBD). Parts of the Cannabis sativa plant have been controlled under the Controlled Substances Act (CSA) since 1970 under the drug class "Marijuana" (commonly referred to as "marijuana") [21 U.S.C. 802(16)].

A Brief Overview of Federal Regulation of Marijuana

Comprehensive Drug Abuse Prevention and Control Act (Controlled Substances Act) of 1970

Marijuana is currently classified by the [Drug Enforcement Agency \(DEA\)](#) as a Schedule I controlled substance, defined as having a high potential for abuse, no currently accepted medicinal use in treatment in the United States, and a lack of accepted safety data for use of the treatment under medical supervision. Beyond criminalization, these [legislative actions contributed to creating limitations on research](#) by restricting procurement of cannabis for academic purposes.

Agriculture Improvement Act of 2018, Pub. L. 115-334, (the 2018 Farm Bill)

Removed hemp from the Controlled Substances Act, which means that cannabis plants and derivatives that contain no more than 0.3 percent THC on a dry weight basis are no longer controlled substances under federal law.

Preserved U.S. Food and Drug Administration (FDA) authority to regulate products containing cannabis or cannabis-derived compounds, including CBD.

Generally, what does [FDA approval](#) of a drug mean?

That a new drug was proven safe and effective to FDA's satisfaction and may be marketed in interstate commerce by a company.

Has the FDA approved any medical products containing cannabis or cannabis-derived compounds?

FDA has approved one cannabis-derived and three cannabis-related drugs for certain conditions.

Epidiolex

- contains purified form of CBD
- treats seizures associated with Lennox-Gastaut syndrome or Dravet syndrome in patients ≥ 2 years old

Marinol and Syndros

- contain active ingredient dronabinol, a synthetic THC (the psychoactive component of cannabis)
- treat anorexia associated with weight loss in AIDS patients
- treat persistent, chemotherapy-induced nausea and vomiting

Cesamet

- contains active ingredient nabilone, synthetically derived and similar to THC
- treats persistent, chemotherapy-induced nausea and vomiting

These are only dispensed by prescription and may have adverse effects, as with any other medication.

FDA has not approved a marketing application for cannabis itself to treat any disease or condition.

In 2017, The National Academies of Science, Engineering, and Medicine published a review of articles published since 1999, “[The Health Effects of Cannabis and Cannabinoids](#),” which outlines nearly 100 different research conclusions related to cannabis or cannabinoid use. The NASEM expert committee recommendations include “[addressing] current research gaps” and “[proposing] strategies for addressing the current barriers to the advancement of the cannabis research agenda.” Learn more about cannabis’s serious risks from [CDC and NIH](#).

Current Status

Marijuana is the most commonly used illegal drug in the US, with nearly [32 million users](#) each month.

Marijuana is the [most frequently used illicit drug among teenagers in the US](#), with [significant increases](#) among 8th and 10th grades from 2018-19, according to [NIH's Monitoring the Future Survey](#).

According to the [Centers for Disease Control and Prevention \(CDC\)](#), about 1 in 10 marijuana users will become addicted. For people who begin using before the age of 18, that number rises to 1 in 6.

Yet, according to the [National Conference of State Legislatures](#), eleven states and the District of Columbia (DC) now have legalized small amounts of marijuana for adult recreational use.

33 states and DC have approved publicly available [medical marijuana/cannabis programs](#).

It is currently [illegal to market CBD](#) (a nearly \$13 billion industry) by adding it to a food or labeling it as a dietary supplement, as demonstrated by FDA warning [letters](#) to [noncompliant companies](#) and [efforts to create pathways for lawful marketing](#).

Still only [one lab](#) holds a federal contract for producing research cannabis, a botanical for which [ingredients vary plant to plant](#).

Based on [strong AMA policy](#) on cannabis, [AMA applauded Vice Adm. Jerome Adams, MD](#) for issuing an [advisory](#) on the “harmful health effects of cannabis use by pregnant women and youth.”

Bipartisan medical marijuana legislation: “Cannabidiol and Marihuana Research Expansion Act”

The “Cannabidiol and Marihuana Research Expansion Act” ([S. 2032](#)), introduced by Senators Dianne Feinstein (D-CA), Charles Grassley (R-IA) and Brian Schatz (D-HI), would improve the process for conducting scientific and clinical research on cannabidiol (CBD) and marijuana, and streamline the development of safe and effective cannabinoid-based drugs approved by the U.S. Food and Drug Administration (FDA).

The AMA believes that scientifically valid and well-controlled clinical trials conducted under federal [investigational new drug applications](#) are necessary to assess the safety and effectiveness of all new drugs, including potential cannabis products for medical use. Cannabis and its compounds, in particular CBD, have been found to have some therapeutic benefits. However, legal and regulatory barriers to cannabis and cannabinoid research [have left physicians](#) and patients without the [evidence needed to understand the health effects of these products](#) and make sound clinical decisions regarding their use. Our federal laws today are standing in the way of this needed research. The AMA strongly supports the “Cannabidiol and Marihuana Research Expansion Act” to enable legitimate research evaluating the potential efficacy and safety of medicines derived from cannabis.

Urge your senator to cosponsor S. 2032, the “Cannabidiol and Marihuana Research Expansion Act,” to enable medical marijuana research, and ask your representative to introduce a companion bill in the House of Representatives.