Good evening, I am Dr. Joseph Sellers and I am an internist and pediatrician at Bassett Healthcare in Cobleskill, as well as treasurer for the Medical Society of the State of NY. Thank you for organizing these forums to obtain public input regarding the possible legalization of the recreational use of marijuana. As physicians, we are dedicated to helping our patients recover from and manage illness and injury, as well as promoting public health.

While MSSNY has adopted policy that supports drug treatment to those arrested or fined for marijuana related offenses rather than criminalization, we remain opposed to legalizing its use. We are very concerned about the long-term effects of marijuana use, and are very concerned with legalizing its use without adequate study and authorization by the US FDA. As such, we are very concerned with the ever expanding list of medical conditions for which marijuana has been authorized by regulation to treat, where there has not been adequate clinical justification to support such use. Recognizing that there could be potential benefits, we very much support additional research into the use of cannabinoid products in the treatment of illness and the relief of pain.

The American Medical Association (AMA)’s Council on Science and Public Health recently developed a lengthy policy paper regarding the use of marijuana. It noted that studies had found substantial evidence that cannabis or cannabinoids have some therapeutic benefits, while also finding substantial evidence of a statistical association between cannabis smoking and health harms. For example, data from jurisdictions that legalized cannabis demonstrates concerns particularly around unintentional pediatric exposures resulting in increased calls to poison control centers and ED visits as well as an increase in traffic deaths due to cannabis-related impaired driving.

As a result of this report, the AMA adopted a position that: (1) cannabis is a dangerous drug and a serious public health concern; (2) the sale of cannabis for recreational use should not be legalized; (3) cannabis use should be discouraged, especially by persons vulnerable to the drug's effects and in high-risk populations such as youth, pregnant women, and women who are breastfeeding; (4) states that have already legalized cannabis should be required to take steps to regulate the product effectively in order to protect public health and safety and that laws that legalize cannabis use should consistently be evaluated to determine their effectiveness; (5) local, state, and federal public health agencies improve surveillance efforts to ensure data is available on the short- and long-term health effects of cannabis use; (6) support public health based strategies, rather than incarceration, for individuals possessing cannabis for personal use.

I will further note that, while the American Society of Addictive Medicine (ASAM) supports the “decriminalization” of marijuana, by reducing penalties for marijuana possession to civil offenses linked to contingencies, such as mandated referral to clinical assessment, educational activities, and, when indicated, formal treatment for addiction, ASAM does not support the legalization of marijuana. Instead, it recommends that jurisdictions that have not acted to legalize marijuana not do so until more can be learned from the jurisdictions that have legalized marijuana. They also recommend numerous limitations, including prohibiting sale to those under 25, prohibiting marketing and advertising to youth, assure that non-FDA approved products contain appropriate warning labels, and limit purchase to state operated outlets.

Again, thank you for the opportunity to present our concerns.