MEDICAL MARIJUANA FAST FACTS

PROGRAM IMPLEMENTATION

Arizona Department of Health Services regulates the Arizona Medical Marijuana Act (AMMA). The ADHS reports:

- Qualifying patients (QPs) 37,598
- Caregivers (CGs) 654
- Minors 36
- Dispensary agents 458
- Dispensaries statewide: 62 licensed, 21 inspections pending as of 7/25/13
- Maricopa County: 22
- Cardholders living within 25 miles of a dispensary 90% (no longer eligible to cultivate when card is renewed)

As of October 2, 2013

Patient Age groups

Minors:	**43**	
18 to 30 years	**10,093**	**25.4%**
31 to 40 years	**7,800**	**20.13%**
41 to 50 years	**6,628**	**17.16%**
51 to 60 years	**8,276**	**21.65%**
61 to 70 years	**4,882**	**13.10%**
71 to 80 years	**720**	**2.06%**
81 and older	**126**	**0.39%**
Male:	**28,579**	**70.79%**
Female:	**11,792**	**29.21%**

ADHS CUMLATIVE REPORT

BAD PUBLIC POLICY: THE RISKS/COST TO SOCIETY

All marijuana is illegal under federal law. FDA approves medicine and has approved the medical use of isolated components of the marijuana plant and charted synthetic compounds.

- Collateral health damage from ingesting 400 addition chemicals in marijuana requiring costly medical attention/impacting brain development
- Driving hazards
- Addiction/increased crime to support it
- Lack of standards and reliable quality control.

CONDITIONS QUALIFYING A PATIENT		
Cancer	909	2.25%
Hepatitis C	644	1.60%
Cachexia	39	0.10%
Seizures	295	0.73%
Glaucoma	395	0.89%
Sclerosis	14	0.03%
Alzheimer's	12	0.02%
Chronic Pain	**29,464**	**72.98%**
Muscle Spasms	464	1.15%
HIV/AIDS	217	0.54%
Crohn's Disease	204	0.51%
Nausea	368	0.91%
Two + conditions	7,383	18.29%
ADHS Cumulative Report as of October 2, 2013		

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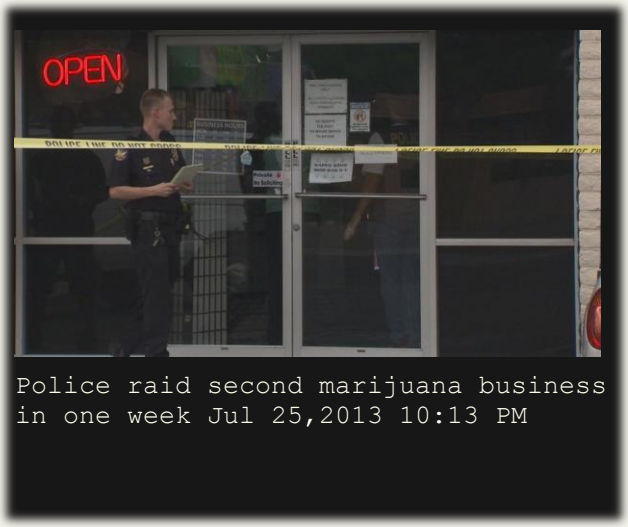
WHAT WE KNOW:

As of July 2012, just 24 physicians have handed out three-fourths of Arizona's recommendations. Even though the AMMA includes certain ailments, it may not be applicable; for example, the Glaucoma Treatment Foundation states that:

"[t]he high dose of marijuana necessary to produce a clinically relevant effect on IOP in the short term requires constant inhalation, as much as every three hours. The number of significant side effects generated by long-term oral use of marijuana or long-term inhalation of marijuana smoke makes marijuana a poor choice in the treatment of glaucoma…"
(Medical Marijuana.com)



KPHO CBS 5 PHOENIX

On one hand, the state is sanctioning loosely controlled access to marijuana and on the other; the state is funding programs, such as drug courts, to address addictions. The costs to society are dispersed and enormous.
(See Marijuana Fast Facts, APAAC August 2013)

SEE STUDY @ DRUGFREE.ORG

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"Is there conflict between state and federal law when it comes to marijuana?

Absolutely, no question about that. However, we are operating under a program that was approved by the Arizona voters. We are complying with and honoring the Arizona voters' request by setting up a dispensary system that was outlined in the initiative that they approved. .Having said that, the feds don't like dispensaries." Will Humble, ADHS Director.

AZ CAPITOL TIMES MAY 7, 2013

CHALLENGES FOR LAW ENFORCEMENT AND PUBLIC HEALTH

- Taking marijuana across state lines is illegal trafficking, but Arizona's medical marijuana law honor's medical marijuana cards from other jurisdictions provided certain requirements are met.
- One out of 8 youths get their marijuana from a cardholder according to the ACJC 2012 Youth Survey.
- Health issues in young children and adults who accidently ingest, especially edibles.
- **State v. Okun:** Arizona Supreme Court declines to review the, Appellate decision upholding the trial court order to return marijuana seized from Okun, a California cardholder, when she entered Arizona without her card. The Yuma County Sheriff seeks to appeal to the U.S. Supreme Court based on the conflict with federal law by the order to return federal contraband.
- **State v. White Mountain:** Appeal pending in Arizona Court of Appeals. The appeal challenges trial court finding that the federal conflict notwithstanding, the County must act on a zoning application for a potential medical marijuana dispensary.
- AMMA necessitates adding investigation and prosecution of **compassion clubs** to the to-do list.
- 2.5 ounces every two weeks must be assessed in the field.
- Cannabis Standards Institute told the AZ legislature that to treat medical marijuana as we do all medicine would require compliance with federal poison control standards for pesticides and mold, third party testing, packaging and labeling.

Current FDA- approved medications made from marijuana producers:

Marinol, Cesamet: synthetic, pill form, relieves nausea and vomiting; used to reverse weight loss in AIDS patients.

Sativex: Combines 2 ingredients of THC & cannabidiol; approved in Canada, UK; undergoing FDA approval in U.S.

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"Having a medical marijuana card does not entitle you to drive impaired." Jon Eliason, KPHO CBS 5 May 2013.

MEDICAL MARIJUANA AND DUI

Exclusion of the medical marijuana card as evidence and/or an affirmative defense is being litigated.

DUI impairment is on the rise in Mesa since AMMA was enacted.

A recent Liberty Mutual survey found that 59% of teenagers believe they drive better or at least no worse while high on marijuana.

--CNN's Dr. Sanjay Gupta advocated for the study of cannabinoid in the marijuana plant under the same FDA process for any drug. He did not investigate systems like, the AMMA, nor advocate for self-dosing marijuana.

SOURCES

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