

COMMUNITY ALLIANCE ON PRISONS

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COMMITTEE ON JUDICIARY

Rep. Gil Keith-Agaran, Chair

Rep. Karl Rhoads, Vice Chair

Tuesday, February 14, 2012

2:05 p.m.

Room 325

**STRONG OPPOSITION to AMENDING SECTION 329-32 in SECTITON 4. HB 2600**

Aloha Chair Keith-Agaran, Vice Chair Rhoads and Members of the Committee!

My name is Kat Brady and I am the Coordinator Community Alliance on Prisons, a community initiative promoting smart justice policies for more than a decade. This testimony is respectfully offered, always being mindful that 6,000 Hawai'i individuals are living behind bars, including 1,800 men who are serving their sentences abroad, thousands of miles from their loved ones, their homes and, for the disproportionate number of incarcerated Native Hawaiians, far from their ancestral lands.

HB2600 updates chapter 329, Hawaii Revised Statutes, to make it consistent with federal laws on controlled substances; and amends section 329-32 relating to the registration requirements for physicians who utilize Hawaii's Medical Use of Marijuana Program.

Community Alliance on Prisons strongly opposes this sneaky move to amend Section 329-32 in relation to Hawai'i's LEGAL medical marijuana program in the controlled substances bill. This is a housekeeping bill that is submitted each year to conform to the federal standards.

This year, however, the administration added a provision that was again aimed at destroying Hawai'i's medical marijuana program.

We, therefore, respectfully ask the committee to strike Section 4 of this bill.

Mahalo for the opportunity to offer our mana`o on this measure.

# LATE TESTIMONY

**Larry Geller**  
Honolulu, HI 96817

HB2600  
JUD  
Tuesday, February 14, 2012  
2:05 p.m.  
Room 325

COMMITTEE ON JUDICIARY  
Rep. Gilbert S.C. Keith-Agaran, Chair  
Rep. Karl Rhoads, Vice Chair

February 14, 2012

**Re: HB2600—Relating controlled substances**

**In Opposition- Section 4**

Dear Rep. Keith-Agaran, Rep. Karl Rhoads, and members of the Committee:

Section 4 of this bill appears unconstitutional in that it **regulates speech**:

A separate registration shall be required at each principal place of business or professional practice where the applicant ... prescribes ... or recommends the medical use of marijuana ...

Recommending anything is protected under the US Constitution, and speech may take place at any location.

The ACLU will have no trouble taking this apart should it become law. Why not save taxpayers the cost of legal expenses by taking this section out of the bill.

Larry Geller

**Testimony for HB2600 on 2/14/2012 2:05:00 PM**

mailinglist@capitol.hawaii.gov [mailinglist@capitol.hawaii.gov]

**Sent:** Tuesday, February 14, 2012 12:29 PM

**To:** JUDtestimony

**Cc:** michaelbecker1970@gmail.com

**Attachments:** Opposition of HB 2600.docx (11 KB)

LATE TESTIMONY

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Testimony for JUD 2/14/2012 2:05:00 PM HB2600

Conference room: 325

Testifier position: Oppose

Testifier will be present: No

Submitted by: michael becker

Organization: Individual

E-mail: michaelbecker1970@gmail.com

Submitted on: 2/14/2012

Comments:

## **Opposition of HB 2600**

To whom this may concern,

I am in strict opposition to HB 2600. I am a medical marijuana patient for chronic pain. I am retired military and combat veteran, and have chronic pain in my back, knee and foot from injuries sustained while on active duty.

I have been prescribed narcotics on a normal basis, and frankly, I'm tired of abusing my liver and body from these harsh drugs. I believe the State of Hawaii should not limit the patients and Doctor's of this state by enforcing strict laws for medical marijuana.

I oppose this measure.

Good Afternoon Honorable Chairpersons, Committee Members

## LATE TESTIMONY

Thank you for allowing me oral testimony in opposition to proposed Bill HB2600, which is a further medical marijuana criminalization companion bill to proposed bill HB1962HB1. Both of these bills seek in common to end legal medical marijuana status for any patients in the State of Hawaii, which has existed by The Medical Marijuana statute enacted by this Legislature in 2000. I am a terminally ill liver cancer and cirrhosis patient who is a permanent resident of Hawaii and is registered with the State of Hawaii's medical marijuana program. I wish to submit my ongoing opposition to HB2600 including Section 4 and any proposed Amendments to it that seek to 1) criminalize; 2) roll back; 3) cause criminal penalties regarding medical marijuana patients' status and criminalizing physicians who give aid and comfort to medical marijuana patients.

Make no mistake distinguished Legislators this proposed legislation is ideologically driven by conservative and fearful elements of our Island State who make specious assertions about the public health being endangered by medical marijuana and any crime statistics going up. In opposition I present the following evidence that supports opposition and voting NO to HB2600 by this Committee.

On June 17, 2011 I was interviewed by Investigative Reporter and Anchorwoman Catherine Cruz of KITV TV News about the importance of Medical Marijuana being legal and available for Hawaiian patients and the online copy of the TV interview is attached to my formal written testimony given here today, courtesy copies of which I have provided to committee members as Testifier's Exhibit "1". I promised KITV to keep them fully apprised of any and all developments with regards to the efforts of certain members of our Hawaiian community to recriminalize medical marijuana by this legislature should HB2600 become law, and in particular to keep Reporter Cruz abreast of any and all ongoing activities regarding the State of Hawaii's now multiple ongoing aggressive attempts to (what I believe) is fully criminalize marijuana possession for all Hawaiian patients and their doctors.

In furtherance of my formal opposition to HB2600 I have a lawful, respectful and well-researched speech I wish to give now and request the right to read it live into the RECORD today February 14, 2012. At this juncture perspective is essential. To all you Legislators before you contemplate passage of HB 2600 which criminalizes medical marijuana, know that each of you will be responsible for causing profound suffering, for causing increasing pain, and for promoting the medical marijuana patient's ongoing inability to take in nutrition, to combat nausea, to lessen diarrhea and to combat certain cancers that might extend/save their lives.

Proposed HB 2600 shows all the signs of potentially being rubber stamped through the House and Senate unless hard facts, standing law of Hawaii, medical scientific studies showing the importance of medical marijuana. \ Certain conservative elements within the Hawaiian law enforcement Agencies, led by the Narcotics Enforcement Division (NED) of the Department of Public Safety are urging you and the public to "be afraid" of medical marijuana patients and their doctors by passing HB2600. These same law

enforcement agencies provide no published data of crime increase and public safety being at risk in any way from the continued legal use of medical marijuana by registered patients. As a law abiding permanent citizen of Ewa Beach, my interest is personal, immediate and ongoing. I am registered with the State of Hawaii, Department of Public Safety, Narcotics Enforcement Division, Medical Marijuana Registry, and my registration number is MJ24737. I have been awaiting a liver transplant since 2007 and my health deteriorates constantly. At present I am undergoing my third regimen of chemotherapy to stave off this hepatic cancer of the liver and using medical marijuana allows me to take nutrition, alleviates pain without the addiction and side effects of opiates, and also clinical studies attached to my testimony today from noted medical institutions including NIH show medical marijuana may in all probably be extending and/or saving my life.

For the Committee's immediate attention and in whole rebuttal to Hawaii Law Enforcement's contentions that medical marijuana laws need to be limited for reasons of public safety, studies in HI and elsewhere-including California show that there is no increase in crime statistics where medical marijuana is legal through doctor's prescribing it as medicine. UCLA's Luskin School of Public Affairs and Criminal Justice reports in its December 2011 Journal of Public Safety on whether crime rates are higher or lower where medical marijuana is legal. The study was conducted and finding reported by Bridget Freisthler, Professor of Social Welfare at UCLA Luskin. Dr. Freisthler reports that there is no substantive evidence of any kind from within or without the law enforcement community or substantive crime statistics to support police and law enforcement calls to toughen medical marijuana laws to the point of re-criminalizing marijuana for seriously ill and dying patients.

The study went on to report that as cities across California struggled with how to handle medical marijuana dispensaries and police agencies blamed the dispensaries and the legality of medical marijuana them for falsely averred increases in lawlessness, the facts and crime statistics do not back law enforcement claims here in Hawaii or elsewhere that medical marijuana use increases crime. Instead academics from 2000 to date and continuing including Freisthler and other notable academics including those at the University of Washington, Seattle, George Washington University, Washington DC, and others including the University of Delaware delved into data to address whether medical marijuana had any negative influence on neighborhood crimes and the answer from all these studies is a resounding NO. Therefore, distinguished Hawaiian House Committee members whether the academics were studying the legalization of medical marijuana and the existence of dispensary stores which is not a factor here in Hawaii at this time, no crime increases directly or indirectly attributable to medical marijuana legality, prescribed as medicine by physicians or the like mandates the need to limit the Medical Marijuana Law of 2000.

Bridget Freisthler, an associate professor of social welfare at UCLA's Luskin School of Public Affairs, has turned up some surprising findings. In her research, she's found that the hundreds of pot dispensaries operating in the city of Los Angeles are clustered in better-off places, like beachside Venice, Hollywood and Westwood, but are notably

sparse in more poor areas like South Los Angeles so the medical marijuana patients, the community-at-large and the public at greater large do not bear any negative outcomes from the existence of legal medical marijuana. So I earnestly urge this Honorable Committee to keep medical marijuana and its physicians who prescribe it as medicine in the same status as that which was designated to them under the Medical Marijuana Act of 2000 and therefore do not vote for passage of HB 2600.

I offer the following medical and scientific studies with verified data over 40 years time that supports you voting against passage on HB2600 on grounds of 1) you observing the Hippocratic Oath of physicians, do no harm to patients than when they come to be treated; 2) observing Hawaii's longstanding tradition of respecting its existing laws since statehood and previous to statehood. This legislature passed the Medical Marijuana Act of 2000 and the law has withstood all judicial scrutiny of it for over 12 years and the following medical evidence further supports you voting no to HB2600.

1. **Study One.** The National Cancer Society has verified what researchers at the New England Journal of Medicine, the National Institutes of Health (oncology and viral born diseases) and other noted scholarly medical journals have reported -- that use of cannaboids including cannabis is effective in aggressively treating some forms of carcinoma including breast cancer and it is hoped liver cancer (hepatoma) which is what I suffer from. Much of the research on marijuana has been centered on cannabinoids, the best-known active ingredients in marijuana, and THC, the cannabinoid thought to be the most potent. Marijuana and its extracts have been studied for their effects on nausea and vomiting related to chemotherapy, appetite, glaucoma, neuropathic pain, and spasticity in patients with multiple sclerosis. Research findings have been mixed. One review of studies published between 1975 and 1996 concluded that oral THC is as effective, or more effective, than commonly used prescription drugs for reducing nausea associated with chemotherapy. The reviewers also concluded that cannabinoids may be useful at low doses to improve appetite in patients with AIDS. They found that THC reduces eye pressure in people who have glaucoma. Further research into marijuana's benefit for nausea and vomiting has had good sound results and supports federal and state full legalization and access of medical marijuana with no punitive measures indicated for prescribing physicians.

**2. Fact Two.** In the past seven years, five scientific journals published prominent articles trumpeting cannabinoids (compounds in marijuana) as potential anti-cancer agents including the National Institutes of Health Oncology Journal, the New England Journal of Medicine, the Harvard Journal of Medicine, the Virginia Medical Society Journal of Medicine and the National Cancer Society 2011 Yearly Journal. I include some key historic and recent extracts for your immediate review -- These include:

- Clinical trial data published in January 2003 issue of the Journal of the American Society of Clinical Investigation that found cannabinoids significantly inhibit skin tumor growth in mice. Investigators of the study concluded, The present data indicate that local cannabinoids administration may constitute an alternative therapeutic approach for the

treatment of non-melanoma skin cancer.

- Clinical trial data published in the March 2003 issue of The FASEB Journal that found that the local administration of a non-psychoactive cannabinoid inhibits angiogenesis (tissue growth) of malignant gliomas (brain tumors).
- A clinical review in the October 2003 issue of the prestigious journal Nature Reviews Cancer that concluded that cannabinoids' favorable drug safety profile and proven ability to inhibit tumor growth make them desirable agents in the treatment of cancer. According to the review's author, tumors inhibited by cannabinoids include: lung carcinoma, glioma, thyroid epithelioma, lymphoma/leukemia, skin carcinoma, uterus carcinoma, breast carcinoma, prostate carcinoma, and neuroblastoma (a malignant tumor originating in the autonomic nervous system or the adrenal medulla and occurring chiefly in infants and young children).
- Clinical trial data published in the November 2003 issue of the Journal of Pharmacology and Experimental Therapeutics that found the administration of the cannabinoid cannabidiol (CBD) inhibits the growth of human glioma cells both in vitro (e.g., a petri dish) and in animals in a dose-dependent manner. Investigators concluded, &Non-psychoactive CBD produce[s] a significant antitumor activity both in vitro and in vivo, thus suggesting a possible application of CBD as an antineoplastic agent (something which prevents the growth of malignant cells.)
- And finally, a clinical review in the December 2003 issue of the journal Expert Opinion on Therapeutic Targets that summarized the demonstrated antitumor actions of cannabinoids, and elaborated on possible avenues for the future development of cannabinoids as antitumor agents.
- In 2011 after nearly 13 years of clinical trials, researchers at Madrid, Spain's Complutense University, School of Biology have not only generously picked up where U.S. researchers so abruptly left off but also continued necessary clinical trials that show efficacy of cannabinoids over lymphoma and other cancers. In 1998, the research team – led by investigator Manuel Guzman – discovered that THC can selectively induce programmed cell death in brain tumor cells without negatively impacting the surrounding healthy cells. Then in 2000, Guzman's team reported in the journal Nature Medicine that injections of synthetic THC eradicated malignant gliomas (brain tumors) in one-third of treated rats, and prolonged life in another third by six weeks. A commentary to the study noted that the results were the first to convincingly demonstrate that cannabis-based treatments may successfully combat cancer.
- Today, Guzman believes that enough favorable clinical evidence exists supporting cannabis' anti-cancer properties to warrant clinical trials in humans. The scientific community has gained substantial knowledge of the palliative and anti-tumor actions of cannabinoids during the past few years, Guzman wrote in the October 2003 issue of Nature Reviews Cancer. Anti-tumor compounds should selectively affect tumor cells [and] it seems that cannabinoids can do this, as they kill [malignant] tumor cells but do



not affect their non-transformed counterparts and might even protect them from cell death. As cannabinoids are relatively safe compounds, it would be desirable that clinical trials using cannabinoids could accompany [ongoing] laboratory studies to allow us to use these compounds in the treatment of cancer. Guzman concludes the article by noting that the Spanish Ministry of Health recently approved a human clinical trial – the first ever – aimed at investigating the effects of intracranial administered THC on the life expectancy of volunteers suffering from malignant brain tumors.

- Cannabinoid research continues to show tremendous potential in the treatment of cancer, summarizes University of Southern California professor Mitch Earleywine, author of the book *Understanding Marijuana: A New Look at the Scientific Evidence*. However, he laments that the vast majority of this work originates outside the United States, often in countries that lack our economic and scientific advantages. Let's hope that this current trend of misplaced criminalizing medical marijuana drug policy won't stymie the battle against the second leading cause of death in America which is cancer and cancer-related deaths & diseases.
- Indeed. Let's not add a potential treatment for cancer to the ever-growing list of victims of medical marijuana prohibition, let us be the solution to cancer patients' most sincere hopes -- to extend and benefit their lives beyond a debilitating disease that steals everything from the patient including their physicality, their mental prowess, their dignity, their independence, sometimes their very voices and other senses.

**Fact. Formal Study Two.** An updated review study suggested that cannabinoids work better than standard treatment when used with chemotherapy known to produce severe vomiting which I personally can report is true because I am now taking four chemotherapy drugs including Interferon in combination with medical marijuana to control the negative symptomology especially nausea, lack of appetite and the ability to even walk around my neighborhood or swim for a short period in a pool.

**Fact. Formal Study 3.** A 2005 study in New York compared dronabinol and marijuana in people with HIV who had smoked marijuana previously. The researchers noted that both improved food intake in people who had severe weight loss due to their illness.

**Fact. Formal Study 4.** A 2004 study looked at people with multiple sclerosis (MS) using cannabis-based liquid extract. This liquid extract contained both THC and cannabidiol, which has different activity from THC. The patients receiving the extract reported less spasticity than those on placebo. In contrast, a small study that looked at arm tremors in people with MS compared the liquid marijuana extract with placebo. It found measurable difference in tremor between people getting the extract and those on placebo.

**Fact. Formal Study 5.** A small early study of CT-3, a substance related to delta-9-THC, looked at people with neuropathic pain (pain related to the nerves of the body). It tested CT-3 against a placebo, and found that patients reported lower pain levels 3 hours after receiving the CT-3 compared with placebo.

**Fact. Formal Study 6.** The most in-depth investigation into the medical use of marijuana was authorized by the U.S. Government in 1997. The Office of National Drug Control Policy commissioned the Institute of Medicine (IOM) to assess the potential health benefits and risks of marijuana. The IOM is an independent research body affiliated with the National Academy of Sciences. The IOM issued its final report in 1999 and offered several conclusions regarding marijuana's usefulness. First, it found that scientific data indicate that cannabinoids, particularly THC, have great potential to relieve pain, control nausea and vomiting, and stimulate appetite. Cannabinoids also affect control of movement and memory, and their effects on the immune system are also notable. It found that some of the effects of cannabinoids, such as reduced anxiety, sedation, and euphoria, may be helpful for certain patients and situations. Based on the many studies reviewed, researchers also found that smoking marijuana delivers health relieving substances and may be an important lesser risk factor in the development of lung diseases and certain types of cancer than patients in like circumstances on traditional opiates and pain killers. The IOM stated that because marijuana contains a number of active compounds, it cannot be expected to provide precise effects unless the individual components are isolated.

**Fact. Formal Study 7.** More recently, scientists reported that cannabidiol, one of the chemicals found in marijuana, slows growth of breast cancer cells growing in laboratory dishes. However, this substance has not been tested in humans or even in animals that have cancer yet. Cannabidiol levels in marijuana are low, so benefits from this compound require use of a purified and concentrated form which is created by a prescription medication as prescribed by physicians and prepared by pharmacies – in other words like traditional medicines that are all legal despite some being controlled substances such as opiates, sleeping pills, pain killers and tranquilizers.

Besides the obvious cancer fighting agents, cannabis helps those of us on lifetime pharmaceutical medications including, but not limited to, chemotherapy and immunotherapy agents to ease nausea, increase appetite, allow for nutrition to be taken in including hydration, etc.

I offer myself humbly before you distinguished legislators, I beg you on behalf of all medical marijuana patients to understand the negative trend that is ongoing with regards to criminalizing medical marijuana in Hawaii. I beg you distinguished legislators to VOTE NO ON HB2600.

I ask each and every committee member today to recall the remarkable day in 2000, the TV and Newspapers headlines throughout Hawaii and the nation read “Hawaii today became the first state to use legislation to approve the possession and use of marijuana for medical purposes.” While signing the bill into law, then Governor Benjamin J. Cayetano said it was one aspect of his effort to make Hawaii the health care center of the Pacific. Where is that compassion in this Legislature today I ask you distinguished Committee House Members?

'Continuing then Governor Cayetano's statements, "I'm glad to see this bill before me," Gov. Cayetano said. "My own feeling is, more states are going to come on and join us in this compassionate care system of herbal medication delivery." I remind this Legislative Committee today that Hawaii was the eighth state to decriminalize the use of medical marijuana, but the previous seven states did so through ballot measures and only you distinguished Assembly codified the Medical Marijuana Act of 2000 into law by your important votes of Yes in favor of its passage.

Lastly, I would introduce the fact that because I am a verified medical marijuana patient by virtue of my having documented liver cancer and being treated by various transplant centers here and on the Mainland in California including Scripps Medical Center and Cedar Sinai Medical Center, I formally give notice to this Committee that I possess the requisite standing that were HB2600 to become law, that I will immediately bring a Hawaiian state lawsuit on constitutional and statutory grounds as well as ritual and customs of Hawaii that predate statehood to seek an expedited injunction against the implementation of this law. I hope that this Committee understands that this would be the choice of last resort for if this legislative governing body decides to criminalize my right to obtain my medical marijuana lawfully and without arbitrary and capricious obstructionism by criminalizing my physicians, that I would have significant and substantive grounds for a civil rights lawsuit including the Right to Life, the Right to Die With Dignity, the Right to Privacy and the standing laws of Hawaii including, but not limited to, the Hawaiian Constitution. I hope with all due respect to this Committee that my having to file such lawsuit does not become necessary but know this, I am a retired government attorney of many years who was a poverty lawyer at her core specialization so I possess the requisite knowledge, training, networking, intent and desire to leave a positive legacy for all medical marijuana patients in Hawaii today and in its future. Thank you for hearing my remarks in opposition to HB2600.

**Groups Rally To Mark 40th Anniversary Of War On Drugs**

**ACLU, Drug Reform Advocates Call Policy A Failure**

*Catherine Cruz KITV4 News Reporter*

POSTED: 9:09 pm HST June 17, 2011

UPDATED: 1:17 am HST June 18, 2011

**HONOLULU** — Drug policy reform advocates in Hawaii joined 15 other states in marking the 40th anniversary of the federal government's war on drugs.

Michelle Cook, who recently moved to Hawaii joined signwavers at the state capitol to draw attention to her plight and that of her ailing mother.

"Hawaii was the first state to pass the medical marijuana law. I thought there would be a method of access for medical marijuana. I have found out that is not the case from other patients here," said Michelle Walker -Cook.

Walker-Cook suffers from liver cancer and is awaiting a transplant.

She said her 95-year-old mother, Genevieve Walker, suffers from leukemia and other blood cancers and is on chemotherapy. Medical marijuana has been helping with her nutrition.

"She only weighs 84.2 pounds right now. She is a very small lady, very fragile, very advanced stage. It allows her to have any quality of life," said Walker-Cook.

Medical marijuana is just one of the issues that rally organizers want addressed. The way they see it, the war on drugs has failed in many ways.

"It has cost a trillion dollars It has perpetrated massive racial injustice. It has made the United States the largest jailer," said Scott Michaelman.

They groups are pushing for more money to go for drug treatment programs, instead of prisons.

"Treatment over incarceration is a core part of our message. Low level non-violent users should not be a part of the criminal justice system," Michaelman said.

The changes may not come soon enough for Walker-Cook and her mother, but for two hours the 55 year old cancer patient musters the energy to wave signs.

"I may not live to see this happen. But I would like to leave it for other patients," Walker -Cook said.

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