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**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Tuesday, February 14, 2012 10:44 PM  
**To:** PGM Testimony  
**Cc:** thehakaman@msn.com  
**Subject:** Testimony for SB2262 on 2/15/2012 2:45:00 PM

LATE

Testimony for PGM/HTH 2/15/2012 2:45:00 PM SB2262

Conference room: 229  
Testifier position: Support  
Testifier will be present: Yes  
Submitted by: Joseph LaRocco  
Organization: Individual  
E-mail: [thehakaman@msn.com](mailto:thehakaman@msn.com)  
Submitted on: 2/14/2012

Comments:

I have cronic Fibroses and muscle scar tissue from a 25 yr. old work accident at Kona Reef, Kailua Kona. A 24ft. beam 500-600 lbs dropped on my neck and shoulders,, I have tried ALL perscription drugs,, in the last 4 yrs. I have been to the Hospital several times from nerve attack and fibroses cramping nerves&lt;&gt; My health started improving, when I got off of meds and Ibproffens,, and started eating cannabis and rubbing the oil on my neck&lt;&gt; I am telling the GOD'S Truth,, I would stand up in court any day, to tell my work history accident story, I am a family man, took care of my Mother & Father, I am a responsible man, and I have medical proof, Thank you,& Aloha, Joseph LaRocco



the  
**Drug Policy  
Forum**  
of hawaii

LATE

*Dedicated to safe, responsible, humane and effective drug policies since 1993*

February 15, 2012

To: Senator Will Espero, Chair  
Senator Michelle Kidani, Vice Chair and  
Members of the Committee on Public Safety, Government Operations, and Military Affairs

To: Senator Josh Green, Chair  
Senator Clarence Nishihara, Vice Chair and  
Members of the Committee on Health

From: Jeanne Y. Ohta, Executive Director

RE: SB 2262 Relating to the Pain Patients Bill of Rights  
Hearing: February 15, 2012, 2:45 p.m., Room 229

The Drug Policy Forum of Hawai'i writes in support of SB 2262 Relating to the Pain Patients Bill of Rights. This measure adds medical use of marijuana patients into the bill of rights.

The reason this measure is necessary is because efforts are underway to eliminate severe pain as a qualifying condition for the medical marijuana program. This is unfortunate because there exists more "gold standard" clinical data (double-blind, placebo controlled cross-over trials) regarding the use of inhaled cannabis or organic cannabis extracts for pain than there is evidence for arguably any other condition.

Further, many of the usual pain medications that cannabis may replace are far more potentially habit forming and are associated with increased overdose deaths and have more severe side effects. In fact, one recent published review of the subject recommended cannabis as an alternative to opioids for this very reason.<sup>1</sup>

The Institute of Medicine in "Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education, and Research"<sup>2</sup> writes that chronic pain can be a disease in itself and is a public health problem. Chronic pain affects at least 116 million U.S. adults; and large numbers of patients receive inadequate treatment.

There are also negative and ill-informed attitudes about people with pain, and stereotyping and biases that contribute to barriers both medical and legal for effective pain treatment.

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<sup>1</sup>Collen, Mark. "Prescribing Cannabis for Harm Reduction," *Harm Reduction Journal*, 2012, 9:1.

<sup>2</sup> Institute of Medicine. 2011. *Relieving Pain in America: A Blueprint for Transforming Prevention, Care, Education, and Research*. Washington, DC: The National Academies

In explaining the increase in pain for younger people, the report cites the progress in saving the lives of people with catastrophic injuries related to work, sports, vehicle crashes, or military combat that in previous times would have died, has created a group of relatively young people at high risk of lifelong chronic pain.

The report emphasized that **“the majority of people with pain use their prescription drugs properly, are not a source of misuse, and should not be stigmatized or denied access because of the misdeeds or carelessness of others.”** This is also true of the medical marijuana program. Patients register with the program because they are law abiding citizens and want to remain law abiding.

The Narcotics Enforcement Division of the Department of Public Safety charged with administering the program, claims that the program is being abused. Abuse by a few should not eliminate medical marijuana for those patients who are law abiding. Because the program is being administered by a law enforcement agency, more attention is being given to the few abusers than to the vast majority of patients whose have benefitted from the program.

Many medical marijuana patients come to the program after having tried the usual or commonly prescribed medications. Many have experienced negative side-effects or can no longer tolerate those medications. Medical marijuana is an alternative that works for them. Pain treatment should be individualized. Patients and their doctors should be allowed to determine their individual treatment. Law enforcement and government should not interfere with their right to determine what is best for them.

We encourage the committee to preserve the right of pain patients to access to medical marijuana for their pain. Thank you for the opportunity to testify.

LATE

**From:** mailinglist@capitol.hawaii.gov  
**Sent:** Tuesday, February 14, 2012 7:37 PM  
**To:** PGM Testimony  
**Cc:** mwalkercook@aol.com  
**Subject:** Testimony for SB2262 on 2/15/2012 2:45:00 PM

Testimony for PGM/HTH 2/15/2012 2:45:00 PM SB2262

Conference room: 229  
Testifier position: Support  
Testifier will be present: No  
Submitted by: Michelle Jan Walker-Cook  
Organization: Individual  
E-mail: mwalkercook@aol.com  
Submitted on: 2/14/2012

**Comments:**

Good Afternoon Honorable Chairpersons, Committee Members Thank you for allowing me online amended testimony in support of SB2262. This is a good amendment to the Medical Marijuana Act 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 support of SB2262 which further clarifies and formally establishes the Hawaiian Patients' Bill of Rights with regards to medical marijuana legality and registration for terminally and/or chronically ill patients.

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 via PDF attachment to these Honorable PGM/HTH committee members as Testifier Michelle Walker-Cook'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 monitor any and all legislation proposed medical marijuana by this legislatures.

In furtherance of my formal support of SB2262 I had prepared for oral testimony to be heard by you on 2-15-2012 @2:45 PM in Room 229 a lawful, respectful and well-researched speech but my 95 year old mother who suffers from leukemia, acute stenosis, COPD, stroke syndrome and other ongoing diseases is being hospitalized because she is dying so I remain caring for her at her constant side.

Therefore as these exigent circumstances exist, I ask permission from this Honorable Committee to amend my previous testimony by this submission and request if possible it be included in the public record ASAP. At this juncture perspective is essential. To all Legislators know that by voting YES to SB2262 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.

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. Passage of SB2262 will lend aid, compassion, comfort and immediate reassurance to many terminally ill and/or chronically medical marijuana patients who sit in like circumstances to me.

I offer the following verified scientific studies that corroborate that your passage of SB2262 is not only compassionate and timely but it is in conformity with the other states who recognize that medical marijuana patients deserve dignity, privacy, good care and suffer no fear from stigmatism and/or bias by those who do not understand what we are experiencing (the imminently dying and/or chronic debilitating process of dying over time.)

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 cannabinoids 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).
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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 program 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 pot's 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.

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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 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.

If you act accordingly today you will join me and vote YES in favor of passage of SB2262. (I have attached the referenced Catherine Cruz, KITV News Anchor Interview of June 2011 which shows my TV interview on this subject matter and the need for all medical marijuana patients in Hawaii to possess a comprehensive Patients' Bill of Rights.



LATE

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**KITV.com**

**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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