



# UNIVERSITY OF HAWAII SYSTEM

## Legislative Testimony

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Testimony Presented Before the  
Senate Committee on Ways and Means  
Wednesday, February 24, 2021 at 10:00 a.m.

By  
Jerris Hedges, MD, Dean  
John A. Burns School of Medicine  
University of Hawai'i at Mānoa

SB 1024 – RELATING TO EDUCATION.

Chair Dela Cruz, Vice Chair Keith-Agaran, and members of the Committee:

My name is Jerris Hedges and I serve as the dean of the John A. Burns School of Medicine (JABSOM).

Thank you for the opportunity to provide written testimony in opposition to SB 1024 which seeks to establish a cannabinoid medicine program within the University of Hawai'i to be administered by JABSOM.

JABSOM already employs faculty with expertise in substance use, which includes marijuana, THC and cannabinoids. JABSOM has both an Addiction Psychiatry fellowship and a separate fellowship in Addiction Medicine. JABSOM has an existing curriculum throughout all four years of medical school, and its residency and fellowship programs, which addresses substance use, chronic pain management, management of side effects of chemotherapy, and medical cannabis. The curricular content includes cannabis and cannabinoid products. Continuing education offerings by JABSOM and other accredited continuing education providers in Hawai'i have been provided and will be modified as new evidence or policies which impact patient care in Hawai'i are forthcoming. Additionally, should this program in cannabinoid medicine extend beyond education and training into more promotional endeavors, JABSOM will be restricted in its curriculum due to marijuana remaining a Schedule 1 drug under federal law.

In light of the curriculum and other faculty activities already in existence, which provide education and training in cannabinoids, we believe that creating another separate course of study in cannabinoid medicine would duplicate JABSOM's current educational efforts in the field. Given ongoing financial and operational challenges during the pandemic, implementation of the current bill would needlessly consume additional resources. For these reasons, we respectfully oppose SB 1024.

Thank you for the opportunity to provide testimony on this measure.

**LATE**

To: COMMITTEE ON WAYS AND MEANS  
From: Wendy Gibson-Viviani RN/BSN

RE: **SB1024** – in **Support**

Hearing: Wednesday, February 24, 2021 at 10 AM Conference Room 211 & Videoconference

Aloha Senator Donovan M. Dela Cruz, Chair, Senator Gilbert S.C. Keith-Agaran, Vice Chair and Members of the Committee,

Thank you for this opportunity to testify in **SUPPORT OF SB1024** to establish a cannabinoid medicine program and pursue research and education related to the authorized use of cannabis for medical purposes. I believe it is long overdue and greatly needed. More cannabis research is ALWAYS needed--in addition to the more than 30,000 studies already done.

I am Wendy Gibson-Viviani, an active member of the American Cannabis Nurses Association and Cannabis Nurses Network, a Cannabis Nurse Educator and a medical cannabis patient advocate. I have worked as a healthcare professional in Hawaii for 28 years.

I was a member of the ACT 230 Medical Cannabis Oversight Working Group: Sub-Committee on Education in 2016-2017. The Working Group identified a great need for medical cannabis education, especially amongst healthcare professionals. We recommended that the Universities in the State of Hawaii should consider including the study of cannabis and cannabinoids in the curriculum of medical, nursing and pharmacy programs. We also recommended establishing and supporting (with funding), a Coalition for Medicinal Cannabis Research and Education.

In ACT 230, to the extent permitted by federal and state law . . .and certification by the DOH:

- The University of Hawaii may conduct research on the efficacy of medical marijuana use, its health outcomes and social impacts, and related safety issues
- The University of Hawaii may establish medical marijuana testing and research programs that qualify as commercial enterprises of the university under section 304A-113 that provide services to state-approved medical marijuana dispensaries, including assessment of marijuana plant cannabinoid content and concentration, purity of manufactured marijuana products, or additional tested requested by the department of health.
- It allows UH to charge and collect fees and establish new commercial enterprises.
- It does not require the university to engage in any activity that might jeopardize its eligibility to receive any form of state or federal assistance or benefit. [L 2016, c 230, §21; am L 2017, c 170, §2].

- The full text can be found in HRS 304A-1865:  
[https://www.capitol.hawaii.gov/hrscurrent/Vol05\\_Ch0261-0319/HRS0304A/HRS\\_0304A-1865.htm](https://www.capitol.hawaii.gov/hrscurrent/Vol05_Ch0261-0319/HRS0304A/HRS_0304A-1865.htm)

As noted in SB862 (In 1999), the legislature found that “allowing the medical use of marijuana could **promote Hawaii** as being an **international center for medical treatment and research**”. I share that vision.

**SB1024** could help fill many gaps in knowledge about the safety and efficacy of the many types of cannabinoid medicines found in this non-toxic plant. And, research done in Hawai'i could prove to be helpful to millions of medical cannabis patients nationwide, not just the 30,000 patients in Hawaii.

A program based at UH/JABSOM would be an ideal place to start. In November of 2017, JABSOM, held its first-ever, Continuing Medical Education (CME) session on Medical Cannabis. Thousands of studies on potential health benefits have been done since then and need to be included in current cannabis education in Hawai'i.

As the use of medical cannabis gains ever more credibility and accrues more evidence worldwide, it is vital that JABSOM continues and steps up a program to educate their constituencies with the latest information and research on this cutting-edge medicine—**including the medicinal value** instead of focusing primarily on possible harms.

In 2015, Dr. Alexander Stokes, assistant research professor in the Department of Cell and Molecular Biology at the UH John A. Burns School of Medicine, obtained a U.S. patent for his novel therapy. He claims that the TRPV1 cannabinoid receptor – a receptor involved in the progression of heart failure-- can be regulated therapeutically by plant-based cannabinoids. His discovery could lead to new drugs that can prevent or reverse the stages of cardiac disease and heart failure.

Not all studies have to be this complex and costly. Research could be as simple as surveying the more than 30,000 patients registered in the medical cannabis program or comparing the chemical composition of the dispensary products with the effects that patients are reporting.

Research and education administered through the UH System and JABSOM could help provide valuable, much needed **information to healthcare professionals and patients** regarding titrating doses, selecting products and avoiding the unwanted side effects.

Research and education could also help provide healthcare professionals with better guidelines for patient care in multiple healthcare settings, such as hospitals, nursing homes or assisted-living facilities-- where patients are routinely deprived of their medicines while in-house.

SB1024 could allow UH labs to help our dispensaries and patients with product testing. It could help **lighten the load on the Department of Health** by providing more labs for testing, a standardization of analytical testing methods and oversight of compliance.

One **essential part of SB1024** is the inclusion of a physician who is a certified cannabinoid medicine specialist. Please consider these ideas when making your decisions about passing SB1024.

Thank you for the opportunity to present my ideas,

Wendy Gibson-Viviani RN/BSN

Cannabis Nurse Educator

Member: American Cannabis Nurses Association and Cannabis Nurses Network

Kailua

[Wendygibson9@gmail.com](mailto:Wendygibson9@gmail.com)