

6 December 2021

Hon. Dr Brian Walker MLC  
Chair, Cannabis and Hemp Select Committee  
C/- Legislative Council Committee Office  
18-32 Parliament Place  
West Perth WA 6005

Dear Dr Walker

### **Cannabis and Hemp Select Committee**

The Royal Australian College of General Practitioners (RACGP) thanks the Cannabis and Hemp Standing Committee for the opportunity to provide input into this inquiry.

The RACGP is Australia's largest general practice organisation, representing over 90% of Australia's general practitioners (GPs). We advocate for affordable and equitable access to high-quality health services and improved health outcomes for all Australians. GPs work with patients on a wide range of issues and understand the complex interaction between health, social issues, workforce participation and the ability to access education.

The RACGP has highlighted the need for further high-quality research into the safety and effectiveness of medicinal cannabis products, and does not recommend nor encourage the use of medicinal cannabis products.

However, RACGP recognises that as specialists, GPs may offer to prescribe medicinal cannabis products to a very limited number of patients with specific conditions in consultation with them and their care team. Importantly,

“...medicinal cannabis products should only be considered when all first-line, conventional, evidence-based treatment options have been exhausted, and after detailed discussions of the potential benefits and harms of medicinal cannabis products with the patient.”<sup>1</sup>

With regard to the terms of reference for this Inquiry, our submission will only be in reference to part 2(b) “medicinal cannabis, its prescription, availability and affordability”.

---

<sup>1</sup> RACGP. [Medicinal Cannabis](#). Melbourne, RACGP, 2019 [Accessed November 2021]

The following comments are consistent with the RACGP position on 'The regulatory framework for medicinal use of cannabis products' (2019).<sup>2</sup>

## Approval process

It is the view of RACGP that the process of prescribing medicinal cannabis products in Australia is highly bureaucratic, time consuming and expensive for patients.

Specialist GPs should be treated like any other specialist and have the autonomy to determine when it is appropriate to prescribe to eligible patients.

One of the barriers to the prescription of medicinal cannabis is its status as a controlled drug. RACGP would support the removal of medicinal cannabis as a Schedule 8 medicine for patients who are not drug-dependent. Medicinal cannabis is probably a safer medication than opiates and benzodiazepines in terms of abuse.

Removing a level of regulation would make it easier to prescribe, and easier for patients to access; particularly those with chronic and debilitating conditions for whom easing of pain in a timely manner is essential.

The administrative requirements of accessing medicinal cannabis products should not be unnecessarily duplicated. The introduction of a user-friendly, single-step approval process that acts as a submission portal to all relevant authorities (ie federal and state/territory regulators) would help to facilitate this goal.

## Education

GPs who consider prescribing medicinal cannabis need ready access to evidenced-based information and educational material. Such resources are essential for patient safety and uptake. While Australian and international guidelines are available<sup>3,4,5</sup>, there is a need for the ongoing development of best practice guidelines in state contexts. In addition to legislative and clinical resources, guidance on clear and proper governance processes on prescribing medicinal cannabis products should be developed.

Of course, patient education is also crucial.

---

<sup>2</sup> RACGP. [Regulatory Framework for medicinal use of cannabis products](#), Melbourne, RACGP, 2019. [Accessed December 2021]

<sup>3</sup> Therapeutic Goods Administration. [Access to medicinal cannabis products](#). Canberra: TGA, 2017. [Accessed Nov 2021]

<sup>4</sup> Queensland Health. [Clinical guidance for the use of medicinal cannabis products in Queensland](#). Brisbane: Queensland Health, 2017. [Accessed Nov 2021]

<sup>5</sup> The National Academies of Sciences, Engineering and Medicine. The health effects of cannabis and cannabinoids: [The current state of evidence and recommendations for research](#). Washington, DC: NASEM, 2017. [Accessed Nov 2021]



## Real-time prescribing

An effective real-time prescribing system has the ability to save lives and protect the community by identifying patients who are at risk of misusing prescription medicine. The RACGP believes that as real-time prescribing systems continue to be rolled out across states and territories, they have the potential to be used to reduce and mitigate the risk of misuse or diversion of medicinal cannabis products.

We look forward to the implementation of real-time prescription monitoring via the Health Practitioner Portal in Western Australia in early 2022.

The following comment is an observation from GPs on the ground in Western Australia.

## Legislation related to the driving of motor vehicles

There is currently an asymmetry between medicinal cannabis-based products and other prescribed drugs that have an impairment value when considering their effects on driving tasks.

This is challenging to explain to patients who feel surprised at the absolute zero detection status of THC when they may also be taking large doses of other potentially impairing drugs such as opiates and benzodiazepines (or consume some alcohol), yet can legally drive despite the hazardous and unproven long-term health effects of those drugs and substances.

Across the country there is disparity in the messaging between states, which adds to prescriber confusion. Victoria's State Government advises that "Patients taking cannabidiol-only medicines can lawfully drive"<sup>6</sup>. In Queensland, it is "illegal for any patient being treated with medicinal cannabis containing THC to drive while undergoing treatment"<sup>7</sup>.

The WA Health department simply advises "It is recommended that patients do not drive whilst being treated with medicinal cannabis."<sup>8</sup> The HealthyWA website reiterates the recommendation that "people using medicinal cannabis do not drive", but on the same page states "In WA, it is an offence to drive with THC present in your system, regardless of whether the THC comes from prescribed legal medicinal cannabis or illicit recreational cannabis".<sup>9</sup>

So, it is a drug driving offence in Western Australia to have any THC detected in one's system with a saliva test, regardless of whether the person is under treatment with prescribed medicinal cannabis or has used illicit cannabis. Since 1 July 2021, a prescribed medicinal cannabis user with a blood alcohol reading of above 0.05 will be now also captured under the polydrug offence with its higher penalties.

---

<sup>6</sup> VicRoads. [Medicinal Cannabis and Driving: VicRoads](#). Victoria State Government, Victoria [Accessed November 2021]

<sup>7</sup> Queensland Government. [Accessing Medicinal Cannabis](#) [Accessed December 2021]

<sup>8</sup> WA Department of Health. [Cannabis-based products \(health.wa.gov.au\)](#). Western Australia [Accessed November 2021]

<sup>9</sup> Healthy WA. [Cannabis](#). WA State Government, Western Australia [Accessed December 2021]

Clarity and consistency in the way that the WA Government communicates about the legal status of cannabidiol-only containing products with respect to legal driving status would be welcomed to ensure GPs and their patients are better-informed.

Given the new prescribing landscape, a review of relevant laws in WA would also be welcomed, with consideration for a wider debate amongst lawmakers about 'impairment' versus 'detection' in relation to legal driving status for patients legally prescribed medicinal cannabis.

Doing so may increase accessibility to the potential medical benefits of cannabis from those who are fearful of breaking the law at the expense of forfeiting a viable and otherwise legal medication choice.

Thank you for considering our submission. If you would like to discuss any of the above matters further, please contact us care of the RACGP WA State Manager,

Yours sincerely

Dr Ramya Raman FRACGP  
Chair, RACGP WA

Dr Lewis MacKinnon FRACGP  
Deputy Chair, RACGP WA