

## Submission: Inquiry into Cannabis and Hemp

1. I have been a recreational user of cannabis at different frequencies for over fifty-five years.
2. Since January 2021, I have been prescribed with medicinal cannabis to treat chronic arthritic pain caused by a traumatic accident and insomnia.
3. Prior to receiving scripts for medicinal cannabis, I had trialled numerous medications and natural supplements to treat both of these conditions. None of them have proved as effective as cannabis, which has totally eliminated the deleterious sleep deprivation I suffered even while taking 10 mg melatonin together with other sleep medications.
4. I first applied for a script here in Perth at Emerald Clinics. After filling out all the required forms and protocols, the doctor informed me that, instead of receiving cannabis flower, I would have to submit to a titration regimen of cannabis oil with graduated THC content, which precluded any recreational use along with regular testing to ensure compliance.
5. She also informed me that if my chronic pain were from a migraine, I would then be eligible for a cannabis flower script but not for my chronic ankle pain. She was unable to explain the medical science behind that distinction.
6. I also questioned her that there must be many others in a similar situation to mine, i.e., long time recreational users with age-related conditions that dovetail with medical cannabis solutions. I pointed out how the EC policy would exclude treatment for these people, a wide swath of the general population.
7. To be fair, the EC doctor listened to my concerns and promised to try and procure me an exemption for cannabis flower at the next staff meeting. She emailed the following week that her colleagues had not concurred with her recommendation and further suggested that I look online for alternative medical cannabis providers to address my particular situation.
8. Through an online search and advice of a friend, I arranged a Telehealth consult with Dr Jim Connell from Queensland. I received scripts for both CBD oil and cannabis flower, a more energising sativa strain for daytime and a sedating indica strain for nighttime. Since January 2021 I have been receiving these medications delivered to my home by Australia Post/ Startrack.
9. I am prescribed 1 gm per day of cannabis flower, which I vaporise using the TGA approved Mighty Medic (Storz und Bickel) vaporiser. With the average cost of

medicinal cannabis averaging \$15 per gram, using cannabis flower as prescribed costs \$450 per month.

10. I am similarly prescribed .2 milligrams of CBD oil (100 mg CBD; 4 mg THC) to be taken twice daily. However, to follow the script in full would entail an additional \$250- \$300 monthly. Therefore, I only use the CBD oil sparingly, often when for circumstances (e.g., driving) preclude the use of cannabis flower. Even so, with only occasional use is ~\$40 -50 monthly.
11. If I lived in Queensland, having been certified for medicinal cannabis by a QLD prescriber, I would be entitled to grow five plants, which would considerably defray the costs for cannabis flower.
12. Due to intermittent supply shortages, particularly during the pandemic, I have had to shift scripts on a few occasions. I currently have some scripts from Cannatrek, a producer and retailer, and some from Astrid Dispensary, the primary distributors for the Canadian firm Beacon Medical.
13. Prices are disparate, possibly related to the country of cultivation. At present, I pay \$125 (\$100 + \$25 dispensing fee) per 10 gm for Cannatrek's Australia grown T17 (17% THC) *Yamba* strain; \$150 for its Israeli-import T19 *Beersheba*; all Beacon Medical products retail from Astrid at \$165.
14. Each order for a new strain, either upon completion of a script or due to product unavailability, entails a further Telehealth Consult and/or Script Reorder Fee.
15. My closest friend is a cancer survivor with a Medical Marijuana Card in Maine. He has an annual appointment (in person or telehealth) with his prescriber to confirm eligibility and then apply online for a Medical Marijuana Card *with no fee*. With this license, he can purchase in any of the local dispensaries any strain of cannabis flower with no limit on THC content. He can further purchase hashish, oils, tinctures, wax, shatter, edibles, and any other product that clearly lists THC content to the consumer. He is allowed 2.5 ounces (70 grams) of cannabis product every two weeks, can cultivate up to six plants, and is allowed to possess 8 pounds (3628 grams) of harvested cannabis. He is currently paying US \$100 for an ounce of cannabis flower (~\$5 AUD per gram). For more information on Maine's medical cannabis laws, see here [How to Get a Medical Marijuana Card in Maine \[Explained\] \(wayofleaf.com\)](https://www.wayofleaf.com/medical-marijuana-card-in-maine-explained)
16. In comparison, the Australian medical cannabis system, compounded by WA's archaic stringency on THC levels, is a Kafkaesque nightmare of wasteful bureaucratic complications with excessive costs passed on to the patient.
17. Only at the federal level will it ultimately be possible to reduce the cost of medicinal cannabis through the PBS scheme.
18. In the interim, to bring a measure of repair to what is a broken system that cannot adequately provide affordable medicinal cannabis to the West Australian public, the following interim steps should be open to this committee's consideration:

- WA's medicinal cannabis laws should be in accord with Queensland's, including the allowance to cultivate five plants
- Encourage WA farmers to produce medical cannabis locally to decrease reliance on costly imports
- Exponentially increase the cultivation of industrial hemp for the production of more affordable CBD oil
- Exponentially increase the production and supply of medicinal cannabis flower to lower prices
- End the unnecessary limits on THC (there's nothing 'bad' or 'immoral' about a cannabinoid that happens to induce euphoria)
- Consider moving from pharmacy distribution to a designated medical dispensary model (which, in time, could be expanded to serve WA's future recreational market)
- Enable renewable Medical Cannabis Licences through an annual prescriber consult which allow the patient monthly access to a specified amount of any cannabis strain and all cannabis derivative products
- Ascertain that any future committee or advisory board on medical cannabis related issues consists of people who have a thorough understanding of medicinal cannabis and its benefits