

BEFORE THE IOWA MEDICAL CANNABIDIOL BOARD



for the (addition or removal) of

P.T.S.D BIPOLAR DISORBER

PETITION FOR ADDITION or REMOVAL (Circle one)

(medical condition, medical treatment or debilitating disease) to the list of debilitating medical conditions for which the medical use of cannabidiol would be medically beneficial.

Name (First, Middle, Last or Name of Organization):

Petitioner's Information

Home Address (including Apartment or Suite #):			
City:	State:	Zip Cod	la:
Telephone Number: Email Address:	IA		
A Common Name of the Common of	16. 6. 3	GMAIL.	COM
Is this the person/ organization to whom information about the petition be directed?		Yes	No
Representative's Information (If applicable)			
Name (First, Middle, Last):			
Mailing Address (including Apartment or Suite #):			
	l a	Ta: 0.1	
City:	State:	Zip Code	e:
Is this the person/ organization to whom information about the petition be directed?	should	Yes	No
	<u></u>		

Iowa Department of Public Health Page 1 of 6

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Rev. 03/2018

CHRON'D DISEASE PREVENTION & MANAGEMENT



Telephone Number:		Email Address:
disease you are seeki patients would be eli	ng to add to or remove from the	lical condition, medical treatment, or debilitating e list of debilitating medical conditions for which abidiol registration card. <i>Please limit to ONE tion</i> .
Recommended Action		Condition or Disease
XAdd □ Remove	P.T.	S.D

2. Please provide a brief summary statement that supports the action urged in the petition. *Attach additional pages as needed.*

is a good and proper action. I am enclosing some information on the subject I'm States that Medical maryiana is aviabable Veterans and others have reported easing of symptoms and they all felt it helpled them get away from Opiates and othe harse drugs.



3. Please provide a brief summary of any data or scientific evidence supporting the action urged in this petition. Attach additional pages as needed					
ATTACHED					
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4. Please provide a list of any reference material that supports your petition.					
ATTACHED					
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5.

petition (if any). The li- telephone numbers, and				round, email addresses,
Name	(1)	(2)		(3)
Background			, , , , , , , , , , , , , , , , , , ,	
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Telephone number			-	
Mailing address				
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6. Please provide to person, known by you to petition. <i>Attach addition</i>	o be affected by or		ons, or a descripti oposed action wh	on of any class of ich is the subject of this
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Please provide a list of subject matter experts who are willing to testify in support of this



7. Please indicate whether you have attached a brief in support of the action urged in the petition.	Yes	No
action triget in the petition.		*
8. Please indicate whether you are asking to make an oral presentation of	Yes	No
the contents of the petition at a board meeting following submission of the petition.		. *

9. Acknowledgement and Signature

By signing this document I certify that the information provided in this petition is true and accurate to the best of my knowledge.



06-01-2018

Date (mm/dd/vvvv)

- Please fill out each section that is applicable to your petition. Failure to conform to what is required in this petition may result in a denial of consideration by the board.
 - o You do not need to fill out sections asking for your representative's information if you do not have one.
 - o For section 2, please provide a short, essay-like summary of your argument.
 - o For section 3, please provide a short, essay-like summary of the articles and evidence that supports your position (if any).
 - o For section 4, please provide a list of articles that are in support of your position (if any).
 - o For section 5, please provide a list of experts that would be willing to testify in support of your position (if any). In the background section, please provide the reasons why they should be considered experts in the area: education, credentials, field of study, occupation, etc. This section is optional but will greatly aid in helping the board consider your petition.
 - For section 6, please provide information about groups of people that will be affected if the petition were approved. This could include people suffering from a specific disease, advocacy groups, local government officials, etc.
 - o Sections 7 and 8 are optional but may aid the board in considering this petition.
- Please be aware:
 - o The board may request that you submit additional information concerning this petition. The board will notify you of the requested materials in the event that more information is needed.
 - The board may also solicit comments from any person on the substance of this petition.
 The board may also submit this petition for a public comment period where any interested person may comment.
 - The board has six months after you submit this form to either deny or grant the petition. If approved, you will be notified in writing that the board has recommended the addition or removal of the medical condition, treatment, or debilitating disease to the board of medicine. If denied, the board will notify you in writing the reasons for denial.



- If the board denies your petition for failure to conform to the required form, you will be allowed to correct the errors and resubmit for consideration.
- After you have completed this petition, please make sure that you sign, date it, and email, mail, or hand deliver to:

Iowa Department of Public Health
Office of Medical Cannabidiol
Lucas State Office Building
321 E. 12th Street
Des Moines, IA 50319-0075
Email: iamedcbd@idph.iowa.gov
Phone: (515) 281-7996

Medical Marijuana for PTSD?

Combined with other therapies, medical marijuana may help those with PTSD.

Posted Dec 14, 2017

On October 1, 2016, a Canadian medical <u>marijuana</u> company called Marijuana for <u>Trauma</u> opened a location in Edmonton, Alberta to treat <u>PTSD</u>in military veterans. It's owned and operated by Fabian Henry, who uses marijuana to treat combat-related PTSD, resulting from his second tour of duty in Afghanistan. He claims that conventional medicine does not allow people struggling with PTSD to prócess their trauma, while marijuana does.

Although the use of medical marijuana for the treatment of physical and psychological disorders is controversial, medical marijuana is currently legal in Canada.

The Washington Post reported that therapeutic use of marijuana was banned in the U.S. in 1970, and marijuana is still categorized as an illicit drug despite its potential medicinal benefits. Given its controversial <u>nature</u> and association with stereotypes, cannabis research for treatment of mental disorders has been limited. But scientific interest is intensifying.

A recent study published in *Molecular <u>Psychiatry</u>* showed that treatment using particular compounds found in marijuana may benefit those with PTSD, and that "plant-derived cannabinoids [psychoactive chemicals] such as marijuana may possess some benefits in individuals with PTSD by helping relieve haunting <u>nightmares</u> and other symptoms of PTSD."

Research published on *Science Daily* also looked at symptom reduction in patients with PTSD. As a result of taking medical marijuana, participants reported a decrease in re-experiencing the trauma, less avoidance of situations that reminded them of the trauma, and a decline in hyper-arousal.

There is also anecdotal evidence. In an interview with the Trauma and Mental Health Report, Dianna Donnelly, a counselor and patient at the Canadian Cannabis Clinics, described her experience:

"I am a patient who legally uses cannabis for <u>depression</u>. The cannabis helps mute or lower my negative chatter, which allows for good thoughts and feelings to arise. One Veteran, a friend of mine, who recently started using marijuana instead of prescription <u>medication</u> for PTSD, said that with the cannabis, he can feel his emotions, and experience them properly and safely. Before, he just felt numb."

Medical marijuana is not usually used on its own for the treatment of PTSD. Shelley Franklin, the Veteran Program Coordinator for the Canadian Cannabis Clinics, explained:

"Medical cannabis is used in conjunction with other therapies. Peer support groups are a highly supported therapy for patients suffering an Operational Stress Injury [another term for PTSD]. Medical cannabis strains with the right CBD and THC [psychoactive chemicals in cannabis] levels are assisting veterans with chronic physical pain, as well anxiety and insomnia issues. I believe that medical cannabis will continue to work in conjunction with many other therapies."

Conversely, former Canadian Member of Parliament Peter Stoffer believes that soldiers have too much access to medical marijuana. Although not opposed to the use of medical marijuana in certain cases, Stoffer believes that current legislation, which compensates veterans for up to 10 grams of cannabis per day, promotes overuse and could potentially lead to negative effects. In an interview with the CBC, Stoffer said:

"Ten grams a day is an awful lot of marijuana to give one person. It is an incredible amount. That's simply not the way to go. You're not helping that person at all. You're not giving them any chance of recovery. All you're really doing is masking the pain that they're suffering."

The research is still in its infancy and likely to explode in the near future, as the Canadian government prepares to remove restrictions on marijuana in 2017. This movement will make it much easier for researchers to study the effects cannabis has on psychological disorders and to form conclusions on its efficacy.

As for Fabian Henry and his cannabis dispensary Marijuana for Trauma, he continues to work with physicians to tailor the amounts dispensed to individuals and has no plans himself to stop using the drug.

- Andrei Nistor, Contributing Writer, <u>The Trauma</u> (link is external) <u>and</u> (link is external) <u>Mental Health Report</u> (link is external)
- Chief Editor: <u>Robert T. Muller</u>,(link is external) <u>The Trauma</u> (link is external) <u>and</u>(link is external) <u>Mental Health Report</u>.(link is external)
- Copyright Robert T. Muller.

Marijuana may hold promise in treating veterans with PTSD

BY GABE GUTIERREZ AND MICHELLE DUBERT
PHOENIX — His nightmares had gotten so bad, Marine Corps veteran Roberto
Pickering was drinking himself to death.

"When I got back from Iraq, I felt like an eggshell, and a basket case," he said. "And I was just doing all this self-destructive behavior that I could think of to not feel anything at all."

Pickering returned from Iraq in 2003 haunted by post-traumatic stress. He'd seen his buddies die. The transition back to civilian life wasn't easy. At one point, he was prescribed 14 different drugs.

Then he tried pot.

"I stopped all the pills cold turkey," he said. "And I picked up cannabis, 'cause in my opinion, it was either find relief or suicide."

He's one of the growing number of veterans who say medical marijuana is helping treat PTSD symptoms — and is a less addictive alternative to opioids.

Roughly 20 veterans commit suicide every day, according to a study by the Department of Veterans Affairs.

Near Phoenix, Dr. Sue Sisley is now running the first FDA-approved clinical trial of its kind to see whether marijuana is effective in treating PTSD.

"I think we're desperately seeking new treatments for PTSD," she said. "Our hypothesis is that we believe cannabis will reduce the severity of the PTSD symptoms. But we don't know that ... it needs to be tested."

The trial, funded by the Colorado Department of Public Health and Environment and sponsored by California-based MAPS, an organization that promotes research into psychedelic drugs for medical benefit, is looking at the safety and efficacy of four strains of smoked marijuana to manage treatment-resistant PTSD symptoms in military veterans.

Sisley has currently enrolled 23 vets in the study. She needs 76 to reach statistical significance. But recruiting has been difficult.

A man rolls a marijuana joint in San Francisco. Marcio Jose Sanchez / AP file Cannabis' classification as a "Schedule 1" drug means physicians at the nation's VA hospitals can't prescribe or discuss marijuana with their patients as a possible treatment for PTSD.

Arizona alone is home to more than half a million veterans, and Sisley's lab is less than 30 minutes from the VA in Phoenix.

Medical marijuana is now legal in 29 states plus Washington, D.C., and PTSD is a qualifying condition in 23 of those states.

But a recent report, funded by the VA, found there's not enough hard evidence to make firm conclusions about the drug's effectiveness.

"What might feel good in the short term is not necessarily good in the long term," said Kevin Sabet with Smart Approaches to Marijuana. "And rather than look at anecdote and stories, let's look at the overall picture of where this might lead in the future."

Pickering just wants more research to be done.

"These men and women went out there [and] put their lives on the line," he said. "And they're coming back from a war and they're fighting a new war here in America. And that war is a suicide and the opioid epidemic that we're essentially fighting within ourselves."