

dramatic **progress** in washington state

Rick **Doblin**

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in

FEBRUARY 1996, MAPS sponsored a public opinion poll in Washington State that was designed to measure

attitudes toward the medical use of marijuana. The poll cost \$8,000, which MAPS raised from a generous donor. The poll was coordinated by Sharon Gilpin of Standard Communications and conducted by Evans/McDonough.

The results of the poll were rather surprising, especially considering that 46% of the respondents identified themselves as born again Christians, a group one would assume to be skeptical about the medical use of marijuana. When the respondents were first asked whether they "favored or opposed making marijuana legally available for medical use if prescribed by a doctor," fully 78% indicated that they were in favor of doing so, 48% strongly in favor and 30% somewhat in favor. Only 11% were strongly opposed while 6% were somewhat opposed and 5% didn't know.

ONE RATHER ENJOYABLE PART of polling is that you can test the strength of attack arguments designed to weaken support for any proposition. For example, respondents were asked to respond to the argument that "some drug policy experts believe that legalization of marijuana for medical purposes in the first step toward total legalization." Respondents were also asked to consider the argument that "legalization of marijuana for medical purposes will make it too easy for other people to get marijuana and abuse it" and to react to the statement that "legalization of marijuana, even if it is just for medical purposes, sends the wrong message to young people." After being exposed to these ideas, respondents were asked once more whether they "favored or opposed making marijuana legally available for medical use if prescribed by a doctor." Support did drop, all the way from 78% to 75%. The poll demonstrated that support for the medical use of marijuana is substantial and rock solid in Washington State.

Legislation Introduced

These findings were particularly heartening to medical marijuana patient and advocate Joanna McKee, who had been trying to get the Washington State Legislature to address the medical marijuana issue. Joanna had found an ally in Democratic State Senator Jeanne Kohl, who agreed to introduce legislation that would authorize \$130,000 to study the medical marijuana issue. The big breakthrough came when Republican Sen. Bob McCaslin agreed to co-sponsor the bill. The reason for his support arose out of a personal tragedy in that his wife had recently died of cancer. She had not tried marijuana but Sen. McCaslin said in an interview that "if he could have helped his wife he'd have gone out and bought some."

With bipartisan support for the appropriation, clear evidence that the public was supportive of the medical use of marijuana, and effective lobbying by medical marijuana patients, the Washington State Legislature approved the

appropriation. According to a major Seattle paper, the support for medical marijuana research was one of the "notable, and commendable" actions of a generally unproductive Legislative session.

State Allocates \$130,000 for Research

Saturday, March 30, 1996 was a very special day for the medical marijuana issue. At 4:00 p.m., Governor Mike Lowry of the State of Washington signed the bill allocating \$130,000 to study medical marijuana. Of this sum, \$60,000 will be used by the Board of Pharmacy to study the medical uses of marijuana and \$70,000 will go to Washington State University to study setting up a cultivation project to grow marijuana for medicinal purposes. The federal government has a monopoly over marijuana for scientific studies and currently refuses to supply it for research into the beneficial uses of marijuana.

Joanna McKee and I have been working closely with State Senator Kohl, the co-sponsor of the bill, in an attempt to make it simpler for the people at the Board of Pharmacy and Washington State University to conduct their studies. I've provided a written report discussing the issues that will need to be faced and listing the numerous contacts who can provide essential information such as the people at the FDA involved in regulating marijuana research and setting up a Drug Master File for marijuana, the two people who currently have DEA licenses to grow

marijuana, the people who can consult on clinical research designs, etc.

Suggested Methodology

The strategy I've suggested is that the Board of Pharmacy try to use an N=1 methodology in which every patient acts as their own control and would receive marijuana, Marinol or other active drugs and a placebo in a double-blind, crossover design. This study design was suggested to me by the FDA over four years ago. The \$60,000 allocated would be sufficient to enroll a substantial number of patients in such studies and would build a broad base of support for the research by including people with a variety of different diagnoses.

In regard to the cultivation project, I'm suggesting that Washington State U. start small in order to provide marijuana for a few research projects. In the long run, I pointed out that Washington State U. could become a major provider of marijuana for prescription use to patients all across the United States, especially if its marijuana is used in the studies that eventually convince the FDA to approve marijuana for prescription use.

Final reports are supposed to be completed before the end of the year. With the Board of Pharmacy and Washington State U. studies, Washington State leads the nation in trying to respond to the needs of seriously ill patients with compassion instead of empty rhetoric and gratuitous cruelty. •



Washington Governor Mike Lowry,
WA State Senator Jeanne Kohl,
Jimmy Wheeler and Joanna McKee