2014/21:Should Australian states immediately legalise the medicinal use of cannabis?

What they said...

'The evidence is already sufficiently strong to support the use of medicinal cannabis now' Member for Molonglo, Australian Capital Territory, Shane Rattenbury

'This is not a totally safe product, like some people - in fact, perhaps many people - believe' Professor Nicholas Talley of the Royal Australian College of Physicians

The issue at a gl;ance

On December 21, 2014, the New South Wales government announced that clinical trials would begin in that state of medicinal cannabis in the treatment of children with severe epilepsy. The New South Wales Government will also fund trials of the drug's use on terminally ill adults and chemotherapy patients who suffer nausea and vomiting as a result of their treatment.

The New South Wales premier Mike Baird announced the Government would consider importing or producing cannabis once it had clinical evidence the drug could reduce suffering.

Both the Labor Opposition and the Greens in New South Wales have criticised the trials process and argue that there is already sufficient trial data to justify the medicinal production of cannabis-based products, while those using cannabis for medicinal purposes should immediately be able to do so legally.

On December 19, 2014, the new Victorian premier, Daniel Andrews, indicated that it was his government's intention to have a bill to legalise the medicinal use of marijuana before the state Parliament before the end of 2015. Prior to the election Mr Andrews's party had pledged to make medicinal cannabis legally available to Victorians.

The Victorian branch of the Australian Medical Association has called for more trials before legalisation.

Background

(Some of the information presented below has been taken from the Wikipedia entry 'Cannabis in Australia'. The full entry can be accessed at http://en.wikipedia.org/wiki/Cannabis_in_Australia
The details of the Victorian Government's policy are taken from a Victorian Labor media release dated August 25, 2014.

The full text can be accessed at https://www.viclabor.com.au/news/labor-medical-cannabis-should-be-legal/

What is Cannabis?

Cannabis, or marijuana, is the most commonly used illegal drug. It comes from the Cannabis sativa plant. It can be smoked or eaten, and comes in a variety of forms, such as dried plant leaves and flowers ('heads'), a crumbly, light-brown or dark-brown resinous material called 'hash', or a very potent oil called 'hash oil'. It can also be distilled to produce a tincture.

The chemical in cannabis that makes users feel 'high' is called THC (delta-9 tetrahydrocannabinol). THC is a psychoactive substance, which means that it travels in a person's bloodstream to the brain. It disrupts normal brain functioning and causes certain intoxicating effects.

The legal status of cannabis in Australia

Low-potency cannabis grown agriculturally for use as industrial hemp is legal to grow, transport and process in all states and territories of Australia, provided one has the correct government licenses. Hemp products such as clothes and paper are legal to sell at a retail level without specific licenses. Using agricultural cannabis for drug purposes is illegal.

In Victoria, Tasmania, Queensland, New South Wales and Western Australia; non-industrial cannabis is criminalized, although prison sentences for small amounts are rare. More commonly in these regions, first or second-time offenders caught with small amounts will be offered treatment and can avoid any criminal sentence or a criminal record. Repeat offenders caught with small amounts are likely to be fined and forced into treatment rather than sent to jail, though they may still obtain a criminal record. South Australia has officially decriminalized personal use of non-industrial cannabis, although this is a poorly defined law. Northern Territory and the Australian Capital Territory have also decriminalized small amounts of non-industrial cannabis, and small amounts of non-hydroponically grown plants. In all regions, offenders caught with large amounts are considered to be trafficking and are much more likely to have a jail sentence handed down

Medicinal cannabis in Australia

There is no current law allowing the medical use of cannabis in Australia, and the federal law regarding drug use places marijuana in Schedule 9 (the most restrictive category, which also includes heroin), meaning it has no legal medical use and cannot be prescribed by a doctor. Drugs in the other schedules are considered to have medical uses (for instance cocaine, morphine and amphetamine) and can be prescribed.

Cannabis users who claim to use the plant for medical purposes are treated the same as anyone else using non-industrial cannabis. Nevertheless, questions remain about the scope for defences argued on the basis of medical use.

Federal laws and bodies such as the Therapeutic Goods Administration govern the regulation of drugs.

Medicinal cannabis and New South Wales

In May 2013 a New South Wales parliamentary committee recommended the use of medically-prescribed cannabis for terminally ill patients and supported the legalisation of cannabis-based pharmaceuticals. As part of the recommendation, the committee called upon the cooperation of the federal Australian government for a scheme that would allow patients to possess up to 15 grams of cannabis. Both the patients and their carers would be required to obtain a certificate from a specialist, registration with the Department of Health and a photo Identification card.

In December 2014 it was announced that the New South Wales Government would fund trials of cannabis's use on children with severe epilepsy and terminally ill adults and chemotherapy patients who suffer nausea and vomiting as a result of their treatment. The trials are expected to begin after September, 2015. New South Wales premier, Mike Baird, said up to \$9 million would be spent on at least three trials of cannabis-derived medicines to examine the benefits for patients suffering a range of debilitating illnesses.

Medicinal cannabis and Victoria

The Victoria Labor Party, when in Opposition, declared its support for the medicinal use of marijuana. The policy focus appeared to be on the use of marijuana oils and tinctures in the treatment of children with severe and recurrent epileptic seizures.

The newly elected Labor Government will seek advice from the Victorian Law Reform Commission on medical cannabis, so it can be used to treat people in exceptional circumstances.

Labor's terms of reference for the commission will specifically rule out legalising marijuana for recreational use. Labor will not legalise the smoking of marijuana for medical purposes.

The Victorian Law Reform Commission will be asked to consider

- * How the prescription, manufacture and distribution of medical cannabis would be regulated
- * Advice on the appropriate form of medical cannabis permitted for use (e.g. sprays, tincture, tablets)
- * The operation of Victoria's Drugs, Poisons and Controlled Substances Act 1981 and associated Regulations and how this interacts with Commonwealth law through the role of the Therapeutic Goods Administration and other legislation
- * The role of doctors in prescribing and managing patient care

* A review of medical literature on the effectiveness and safety of medical cannabis The Commission is expected to report by August 31, 2015.

Internet information

The Victorian Government's 'Better Health Channel' Internet site includes extensive information of the possible effects of marijuana use.

This information can be accessed at http://www.betterhealth.vic.gov.au/bhcv2/bhcarticles.nsf/pages/Cannabis_marijuana?open

On December 21, 2014, ABC News carried a report titled 'Medicinal marijuana: NSW to run trials for epileptic children, terminally ill adults and cancer patients'

The full text of the report can be accessed at http://www.abc.net.au/news/2014-12-21/medicinal-marijuana-nsw-govt-to-run-trial-for-epileptic-children/5981648

On December 19, 2014, ABC News carried a report titled 'Victorian Government moves ahead with plans to legalise medical marijuana'

The full text of the report can be accessed at http://www.abc.net.au/news/2014-12-19/victorian-government-moves-ahead-with-plans-to-legalise-medical/5980636

On November 28, 2014, The Conversation published an opinion piece by Nola Ries, a researcher and lecturer in health law at the Newcastle Law School, University of Newcastle. The article is titled 'Legalising medical cannabis: lessons from Canada's policies'

The piece can be accessed at http://theconversation.com/legalising-medical-cannabis-lessons-from-canadas-policies-32034

On November 20, 2014, ABC News carried a report titled 'Medical marijuana: effects on epilepsy need to be tested, expert tells Brisbane symposium'

The full text of the report can be accessed at http://www.abc.net.au/news/2014-11-20/medical-marijuana-effects-on-epilepsy-need-to-be-tested/5907478

On November 13, 2014, UConn, the Internet site of the University of Connecticut, published an interview with Dr. Yifrah Kaminer, child and adolescent psychiatrist at UConn Health, on the use of marijuana for medical purposes. Dr Kaminer has significant reservations.

The full text of the interview can be accessed at http://today.uconn.edu/blog/2014/11/legalizing-medical-marijuana-is-recreational-use-next/

On October 19, 2014, ABC Radio National's Background Briefing broadcast a program titled 'No one's smoking anything'

The program looked at what form national trials of cannabis for medical purposes should take. Both a partial transcript and an audio version of this program can be accessed at http://www.abc.net.au/radionational/programs/backgroundbriefing/2014-10-19/5816112

On September 30, 2014 the ABC's current affairs program 7.30 broadcast a segment titled 'Meet the people at each end of an illegal medical marijuana supply chain'

The program presents a variety of perspectives on the medicinal use of cannabis and how it should be supplied.

A full transcript can be accessed at http://www.abc.net.au/7.30/content/2014/s4097788.htm

On September 17, 2014, The Daily Mail published a news report titled 'NSW moves closer to legalising medicinal cannabis: Use of the drug decriminalised for dying patients'. Though the title is something of a misnomer, as New South Wales is not about to institute full decriminalisation, the article outlines the

process that will be employed in that state to ensure that those using marijuana for medical purposes are not prosecuted.

The full text of this article can be accessed at http://www.dailytelegraph.com.au/news/nsw/nsw-moves-closer-to-legalising-medicinal-cannabis-use-of-the-drug-decriminalised-for-dying-patients/story-fni0cx12-1227059997480

On July 31, 2013, The Canberra Times ran an opinion piece by Dr Alex Wodak, president, of the Australian Drug Law Reform Foundation. The piece is titled 'Medicinal cannabis: delaying the inevitable?' It argues in favour of the legalisation of medicinal cannabis.

The full text can be accessed at http://www.canberratimes.com.au/comment/medicinal-cannabis-delaying-the-inevitable-20140731-zywp8.html

On December 16, 2013, the Medical Journal of Australia (MJA) published an externally peer reviewed article titled '(Re)introducing medicinal cannabis'.

The article was written by Laurence E Mather, Evert R Rauwendaal, Vivienne L Moxham-Hall and Alex D Wodak.

It argues that sufficient studies have already been conducted world-wide to allow for the medicinal use of cannabis to be legalised without further testing. It also argues that further testing is not required to allow the drug to be reliably dispensed to patients.

It can be accessed at https://www.mja.com.au/journal/2013/199/11/reintroducing-medicinal-cannabis#12

Arguments in favour of immediately legalising the medicinal use of cannabis

1. Overseas clinical trials of medicinal cannabis have already shown it to be safe Those who support the immediate legalisation of cannabis-based medicinal products claim that overseas trials have already indicated that these products are safe.

In an article titled '(Re)introducing medicinal cannabis', published in the Medical Journal of Australia(MJA) in 2013, the authors noted, 'Reviews of medicinal cannabis used under essentially controlled conditions indicate that the frequencies of both side effects and dependence are low. One specific review on side effects reported that they were modest, with only 10% of patients choosing to discontinue their treatment. A greater incidence was found for cannabis over placebo treatment for disorientation (4% v 0.5%), disturbance in attention (3.7% v 0.1%), feeling drunk (2.9% v 0.4%), euphoric mood (2.2% v 0.9%), depression (1.9% v 0.8%), memory impairment (1.4% v 0.1%) and dissociation (1.7% v 0.1%). Tolerance did not develop, and the review concluded that abuse or dependence "is likely to occur in only a very small proportion of recipients"

Supporters of the immediate legalisation of medicinal cannabis claim that sufficient trials have already been conducted. The MJA article cited above concludes, 'There is certainly more to learn about medicinal cannabis, but we know more than enough to act now.'

Australian Capital Territory (ACT) Greens Member for Molonglo, Shane Rattenbury, has stated, 'The evidence is already sufficiently strong to support the use of medicinal cannabis now, and the ACT Greens legislation proposes a sensible approach that allows those who have a genuine illness to access to a controlled amount of cannabis for legitimate medicinal use.

Mr Rattenbury further stated, 'Several significant inquiries have already reviewed the evidence for medicinal cannabis - including inquiries by the UK House of Lords Science and Technology Committee, the American Institute of Medicine, and two NSW committees - and all have supported its use for several conditions...

Do we really think that Australians are somehow different and that these overseas findings from trials are not applicable here?'

2. Cannabis products are already providing symptom relief to many seriously ill people It has been claimed that many people in Australia are already successfully medicating with marijuana to treat a variety of conditions. It has also been noted that marijuana has already by used effectively as a

medicine in a number of overseas jurisdictions.

At least 20 states in the United States have legalised marijuana for medical purposes.

A medical marijuana lobby group in the United States, Pain Management of America, states on its Internet site, 'Chronic pain treatment and management are challenging for patients and doctors, but medical marijuana may be able to provide chronic pain relief where many traditional chronic pain medications do not. Cannabinoids have well-documented analgesic properties that make medical marijuana an effective medicine to treat many cases of chronic pain syndrome. In scientific studies, most medical marijuana patients experience pain relief. Medical marijuana as a chronic pain management tool can reduce patients' pain and improve quality of life, without the same serious side effects associated with use of some pharmaceutical pain relievers.'

The site recommends medical marijuana as a treatment for arthritis, cancer and chemotherapy, chronic pain, fibromyalgia, glaucoma, multiple sclerosis and nausea

A large number of families with children suffering regular, severe epileptic seizures have claimed that illegally acquired and administered marijuana oil has made an enormous difference to their children's health.

One Victorian family has stated of their daughter, "She was dying, she could barely walk or talk, was unable to toilet herself and slept a similar cycle to a newborn.

We had basically been told that there was not too much more we could do, just to take her home and to love her and maybe if you are lucky she'll get to nine.'

The family have claimed that regular treatments with cannabis oil has brought about a dramatic improvement in the child's health. A recent neuropsychological assessment report by a leading doctor at Austin Health said the child's overall cognitive performances were 'significantly improved on those documented 12 months ago.'

3. People using cannabis medicinally for symptom relief are being criminalised It has been claimed that people using marijuana to treat medical conditions should not run the risk of criminal prosecutions.

The Greens policy paper on the issue states, 'So many of us have been moved by the stories of families struggling with chronically ill children, who have resorted to medicinal cannabis and found it provides significant symptomatic relief and health benefits. These families should not live under the threat of criminalisation for treating their sick children. They have suffered enough. They deserve our compassion.' The Greens propose that marijuana use for medical purposes should be immediately decriminalised. Their policy paper states, 'The Greens support de-criminalisation of possession, use, manufacture and sale of medicinal cannabis and believe the Law Reform Commission should advise on how best to achieve this.' The party is not seeking to change the laws regarding recreational use and it also favours further testing; however, it believes that medicinal marijuana should be made legally available in advance of further tests. The newly elected Labor government in Victoria appears to have a similar position.

The Victorian Premier Daniel Andrews has stated, 'In some cases, parents are forced to choose between breaking the law and watching their child suffer...Children are in pain, families are suffering, people are living in fear, and outdated laws are getting in the way.'

4. Further clinical trials would be time-consuming, expensive and result in a more expensive end product Opponents of further trials of medical marijuana claim that such trials will take a long time to complete, that they will cost a large amount to undertake and that the cost of these trails is likely to be passed on to the consumer in a more expensive treatment.

Referring to the proposed trials of medical marijuana in New South Wales, Greens MP John Kaye has stated, 'We have grave concerns that this will take a very long time.

There will be an awful lot of people who won't have access to medicinal cannabis maybe for three or five years.'

Mr Kaye also noted that the proposed trials will give no information on the efficacy of unprocessed

marijuana. Mr Kaye stated, 'The premier's proposed clinical trial is important but it will take a long time and is unlikely to deliver a useful answer on the use of crude cannabis.'

In an editorial published in The Sydney Morning Herald on August 31, 2014, it was noted, 'Clinical drug trials are costly and time-consuming. The size of the local market is unknown but likely to be small.' Such a combination is likely to mean that the end product will be very expensive.

An ABC Background Briefing on the issue broadcast in October, 2014, stated, 'Clinical trials are expensive...A recent nine day Australian trial of Sativex (a treatment derived from marijuana) involving 51 people cost more than a million dollars.

If Sativex needs to be paid for, costs will balloon. In New Zealand, where it is already available, medical cannabis users say an average prescription costs the equivalent of \$1000 a month.'

The same article also notes that the approach being taken within Australia will dramatically increase the cost of cannabis-based products. They express concern that the medicalisation of cannabis products not put them out of the price range of potential patients. They issue the warning 'If these options are...unaffordable, patients will cultivate their own supplies, purchase from the black market, or continue to suffer. In particular, older, debilitated or terminally ill patients should not be put in this position.'

5. Further trials and restrictions are the result of political conservatism

It has been claimed that the approach currently being demonstrated toward legalising medicinal cannabis in Australia is unnecessarily restrictive and grows out of political conservatism and a fear of appearing to support the recreational use of marijuana.

In May 2013, a New South Wales parliamentary committee comprising members of five political parties unanimously recommended making medicinal cannabis available for selected conditions. However, the committee recommended medicinal cannabis use in the following terms 'on the present medical evidence, cannabis based treatments will only be appropriate for a small number of people in specific circumstances, and under the supervision of medical practitioners with suitable expertise. Those patients would necessarily be people with severe and distressing symptoms that are not able to be addressed by existing medications'.

These restrictive recommendations have been challenged. In an article titled '(Re)introducing medicinal cannabis', published in the Medical Journal of Australia in 2013, the authors cited British, American and German studies all of which recommend a far less conservative approach. They note that cannabis has already been shown to be beneficial for a large number of conditions and argue against a narrow, restrictive form of dispensing.

It has been suggested that Australian politicians are wary of allowing more general use of medicinal marijuana because it could lead to a relaxation of the prohibition against recreational cannabis. In an article published in The Canberra Times, Dr Alex Wodak, president of the Australian Drug Law Reform Foundation, has stated, 'Perhaps the main reason for the official resistance is the fear that medicinal cannabis would undermine the prohibition of recreational cannabis. Australia uses morphine, cocaine, amphetamine and ketamine medically but the recreational use of these drugs is banned. If our politicians wanted to they could allow the medicinal use of cannabis but continue to prohibit its recreational use.'

Arguments against immediately legalising the medicinal use of cannabis

1. Cannabis is a potentially harmful substance

There are many doctors who are concerned that those using marijuana for medicinal purposes are underestimating its potentially harmful side-effects.

Professor Nicholas Talley of the Royal Australian College of Physicians has stated, 'I think we need to be very, very careful... people who drive and are taking marijuana: well, they're putting themselves and others at risk. There's an increased risk, based on studies, of suicide. There's an increased risk of certain cancers with chronic marijuana use. This is not a totally safe product, like some people - in fact, perhaps many people - believe.'

A wide range of reports on the safety of marijuana have concluded that marijuana impairs functions

important for safe driving and the operation of machinery. There is also increasing concern about the long-term developmental effects of marijuana use on children and adolescents.

Research suggests that cannabis use can make existing psychotic symptoms worse. Cannabis use can cause a condition known as drug-induced psychosis. Symptoms usually appear quickly and last a few days until the effects of the cannabis wear off. Disorientation, memory problems and hallucinations (seeing or hearing things that are not really there) are the most common symptoms. The effects of cannabis begin within minutes and can last several hours. However, for people with a psychotic illness (such as schizophrenia), the effects can be longer lasting and more intense.

If someone has a predisposition to a psychotic illness such as schizophrenia, use of drugs such as cannabis may trigger the first episode in what can be a lifelong, disabling condition. There is increasing evidence that regular cannabis use precedes and causes higher rates of psychotic illness.

2. Cannabis use should only be legalised after rigorous trials

Many of those who potentially support the legal therapeutic use of cannabis argue that this should only occur once rigorous testing has taken place to ensure the product's efficacy and safe dosage levels. The president of the New South Wales branch of the Australian Medical Association has praised his state's government for not taking further action to legalise the medicinal use of marijuana until thorough trials have been conducted. It has been claimed that the 'evidence' available from unregulated, informal and unmonitored community use is of no scientific value and that the trials the drug has undergone so far to determine its effective medicinal use have been inadequate.

Dr Smith has stated, 'All of the trials that have been performed to date have really had flawed research protocols and methodology. You can't compare across the trials because they are all very different products, all very different situations.

That's why it's so important that the New South Wales Government has taken this step to have this discussion within a medical trials framework.'

The same position has been adopted by the Victorian branch of the Australian Medical Association which has criticised the new Victorian Government for proposing legalisation in advance of further trials.

The president of the Victorian branch of the Australian Medical Association, Dr Tony Bartone, has stated, 'The changes to legislation and other regulatory laws need to occur to allow the clinical trials to continue in a meaningful and robust manner...We've got to make sure we don't put the horse before the cart.'

Dr Bartone has further argued that marijuana should be treated no differently to any other drug seeking to be authorised for therapeutic purposes. Any new drug has to be trialled to ensure its safety and optimal dosage. Those seeking further trials of marijuana claim it is no different. The Australian Medical Association (AMA) is lobbying governments to consider only a fully tested medicine that has been approved by the Therapeutic Goods Administration (TGA).

Dr Bartone has argued, 'What we are seeking to do is exactly what any other new medicine would be required to do coming onto the market.'

The AMA has maintained that the raw plant, and any oils or tinctures made from it, should not be trialled or legalised. The Association wants trials to use only cannabis-based pharmaceutical products already on the market overseas, but not yet available in Australia.

There are two types of these drugs. One contains a synthetic version of THC, the main mind altering molecule in cannabis and includes drugs called dronabinol and nabilone.

The other type is new on the market, and is an extract of the cannabis plant called Sativex. It contains equal amounts of THC and another key molecule, CBD. It is the only cannabis-based medicine approved by Australia's TGA, but only for the treatment of spasticity in muscular sclerosis.

3. The medicinal use of cannabis should only be legalised when there is quality-assured supply Opponents of the immediate legalisation of medicinal marijuana are concerned about quality control issues and argue that the drug should only be made legal for medicinal purposes once secure, regulated and quality assured sources are available.

The Victorian state president of the Australian Medical Association (AMA), Dr Tony Bartone, has stated

that the drug must be legalised in consultation with medical authorities to ensure the safe distribution and administration of the substance.

Dr Bartone is concerned about the variability of 'street cannabis' currently illegally available for medicinal use and does not wish to see restrictions against these products removed.

Dr Bartone has stated, 'We are in no form ... looking at the crude plant and legalising the plant for medicinal purposes...We know that the composition between leaves can vary, depending on where it's sourced, how it's grown, and what time of year it's harvested.'

Many doctors are concerned that without a properly regulated product there cannot be accurate administration of the drug. Dosage and the form which should be used will simply be a matter of guesswork.

Professor Nicholas Talley of the Royal Australian College of Physicians has described the problems which have occurred in the current unregulated environment. Talley has stated, 'The problems have been that practitioners don't quite know how to dose, how to prescribe, how to ensure people will actually get effective levels of drug, what the effective levels are, who to prescribe it for, what indications. They're pretty serious issues.'

4. Measures can be taken to avoid the criminalisation of those using cannabis for medicinal purposes It has been claimed that even without formal decriminalisation or legalisation of medicinal marijuana it is possible to allow patients to use marijuana for medical purposes without the risk of prosecution. Currently within Australia, cannabis users who claim to use the plant for medical purposes are treated the same as anyone else using non-industrial cannabis, that is, first or second-time offenders caught with small amounts will be offered treatment and can avoid any criminal sentence or a criminal record. Repeat offenders caught with small amounts are likely to be fined and forced into treatment rather than sent to jail, though they may still obtain a criminal record. In the case of the case of medicinal users, some jurisdictions appear to turn a blind eye to criminal charges and allow families and treating physicians to use the substance in a variety of forms without charges being laid.

In September, 2014, the Baird government in New South Wales announced its intention to establish new guidelines which would ensure that the terminally ill, being treated with marijuana, could be in possession of up to 15 grams of cannabis without prosecution. The scheme stops short of either decriminalisation or legalisation; however, it is intended to extend officers' current ability to use discretion to caution adults caught with small amounts of the drug.

5. Hasty legalisation of cannabis for medicinal purposes could increase its recreational use There are those who oppose the legalisation of marijuana for medical purposes because they believe that this can readily lead to an increase in the drug's use for recreational purposes.

On November 13, 2014, UConn, the University of Connecticut's Internet site gave the opinion of Dr. Yifrah Kaminer, child and adolescent psychiatrist at UConn Health, on the use of marijuana for medical purposes. Referring to the establishment of legal dispensary to make the drug available for medical use, Dr Kaminer stated, 'proximity to dispensaries has been associated with increased availability for people other than medical marijuana card holders - in particular minors. Decriminalization, medicalisation, and legalization of marijuana each increase the number of marijuana first-time users and decrease age of first use. This could lead to growing public health problems, including medical, psychosocial, academic, and financial consequences.'

Dr Kaminer went on to claim, 'The effects of medical marijuana implementations have been negative for the community and have led to an increase in crime rate, vehicular accidents among users, availability of medical marijuana to youth, increased emergency department referrals associated with marijuana ingestion by children, butane hash-oil lab explosions that resulted in burns and property damage (similarly to methamphetamine labs), increased marijuana use by teens with related school suspensions, and more.' On October 9, 2014, The Tampa Tribune noted, 'Sixty-six percent of those who responded to the annual Sunshine State Survey, conducted by the University of South Florida, said they believe that passing a constitutional amendment legalizing medical marijuana would soon lead to voters' approval of all

marijuana use.'

Susan MacManus, a University of South Florida political scientist and the survey's director stated, 'People are aware of the potential first-step nature of the medical marijuana amendment, if it passes.'

Further implications

The differences in the positions of the New South Wales and Victorian governments on the legalisation of marijuana are not as great as their public statements might at first make it appear.

The New South Wales government has committed itself to funding extensive medical trials before it will begin the process of seeking to have particular marijuana-derived products legalised for medicinal use. However, before the trials have begun, the New South Wales government has also indicated that it will establish guidelines to ensure that those currently using marijuana products to treat terminal illnesses will be able to possess up to 15 grams of cannabis without being liable to prosecution. Though the government is not proposing immediate legalisation or even decriminalisation of marijuana, it is taking action to ensure that current users of the drug to treat serious conditions will not be penalised.

In Victoria, the Labor Party, while still in Opposition, committed itself to what it termed the legalisation of medical marijuana. This undertaking has been repeated since the party won government. However, what exactly the Labor Government means by this pledge is not completely clear. The Victorian Government plans to have the ramifications of legalisation investigated by the Victorians Law Reform Commission. Exactly what form of marijuana is to be investigated by the Commission has not been fully explained. It is fairly plain, however, that the Victorian is not seeking to decriminalise the use of crude marijuana either now or in the future. The Victorian Labor government's policy on the issue states, 'Labor will not legalise the smoking of marijuana for medical purposes.' In this the Victorian policy is more conservative than the New South Wales' one, which allows the terminally to possess, and presumably smoke, up to 15 grams of cannabis.

What the Victorian government has indicated it wishes to legalise is the use of cannabis oil. It has stated, 'Cannabis oil can have a powerful effect treating very sick children and adults by reducing symptoms, with life-changing results. It can relieve conditions such as cancer, HIV/AIDS, MS, glaucoma and Parkinson's Disease.' The government seems to have no intention of making this treatment broadly available. It has stated, '[I]t can be used to treat people in exceptional circumstances.'

The full implications of the Victorian Government's position are not yet clear. Its policy is focussed on changing the law, rather than on gaining medical authorisation for marijuana as a treatment; however, the two cannot occur separately. Marijuana products can only be fully legalised for medical use if approved by the federal Therapeutic Goods Administration. Such approval is unlikely to be given in the absence of further clinical trials.

Perhaps what the Victorian government is actually proposing is decriminalisation rather than legalisation. As The Sydney Morning Herald stated just before the Victorian election, 'Daniel Andrews proposes to first seek advice from the Victorian Law Reform Commission on ways of decriminalising medical cannabis for use in sick people in "exceptional circumstances" (a caveat that already hints at years of bureaucratic nitpicking ahead). If and when the commission makes its recommendations, and the Andrews government passes legislation (it hopes to table legislation by the end of 2015), numerous questions will remain. Will they allow patients to grow their own, as occurs in some countries? Who will manufacture the drugs for commercial distribution? What will they cost? What will they be allowed to be prescribed for?'

Newspaper items used in the compilation of this issue outline

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The Age: September 18, 2014, page 3, news item by Matthew Knott, `PM backs medicinal cannabis'. http://www.smh.com.au/federal-politics/political-news/tony-abbott-backs-legalisation-of-medical-

cannabis-20140917-10i6eb.html

The Age: September 29, 2014, page 8, news item by Matthew Knott, 'Push for medical cannabis picks up pace as bill is finalised'.

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The Australian: October 15, 2014, page 8, news item by G Rushton, 'Call for wider marijuana trials'. http://www.theaustralian.com.au/national-affairs/doctors-families-mps-call-for-wider-cannabis-trials /story-fn59niix-1227090569938

The Australian: October 14, 2014, page 8, news item by M Coultan, `Support for trial of medicinal cannabis'.

http://www.theaustralian.com.au/national-affairs/health/national-support-for-trial-ofmedicinal-cannabis /story-fn59nokw-1227089409043