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FISCAL IMPACT REPORT

SPONSOR: Godbey DATE TYPED: 2/20/01 HB 411
 SHORT TITLE: Controlled Substances Therapeutic Research SB _____
 ANALYST: Rael

APPROPRIATION

Appropriation Contained		Estimated Additional Impact		Recurring or Non-Rec	Fund Affected
FY01	FY02	FY01	FY02		
No Fiscal Impact					

(Parenthesis () Indicate Expenditure Decreases)

SOURCES OF INFORMATION

Department of Health (DOH)
 Department of Public Safety (DPS)
 Attorney General’s Office (AGO)

SUMMARY

Synopsis of Bill

The Controlled Substances Therapeutic Research bill would repeal the Controlled Substances Therapeutic Research Act of 1978 (Sections 26-2A-1 through 26-2A-7 NMSA 1978) that established the “Lynn Pierson Therapeutic Research Program” to conduct clinical research on the medical use of marijuana.

CONFLICT/DUPLICATION/COMPANIONSHIP/RELATIONSHIP

This bill conflicts with HB 431 and SB 319, duplicate bills that would establish the Compassionate Use Of Medical Marijuana Act.

OTHER SUBSTANTIVE ISSUES

The uses of marijuana as a medical therapeutic agent are clearly controversial. The Department of Health reports that clinical data regarding marijuana’s effectiveness in treating specific diseases or symptoms are limited, owing in large part to the obstacles that have been encountered by those who have sought to pursue research on marijuana’s therapeutic effects. Those data that are available support the role of marijuana in certain medical conditions including cancer to relieve nausea associated with chemotherapy, HIV/AIDS to alleviate nausea associated with HIV combination therapy and anorexia associated with HIV disease itself, and certain neuromuscular diseases (including spinal cord injury, multiple sclerosis and certain forms of epilepsy) to reduce uncontrollable muscle spasms and seizures.

These studies are summarized in a review conducted by the Institute of Medicine of the National Academy of Sciences titled "Marijuana and Medicine: Assessing the Science Base" (Janet E. Joy, Stanley J. Watson, Jr., and John A. Benson, Jr., eds. National Academy Press, Washington, D.C., 1999). This OIM review of the available information regarding the medical use of marijuana was commissioned in 1997 by the White House Office of National Drug Control Policy (ONDCP). The following paragraphs are quoted from the Executive Summary:

The accumulated data indicate a potential therapeutic value for cannabinoid drugs, particularly for symptoms such as pain relief, control of nausea and vomiting, and appetite stimulation. The therapeutic effects of cannabinoids are best established for THC, which is generally one of the two most abundant of the cannabinoids in marijuana. (Cannabidiol is generally the other most abundant cannabinoid).

The effects of cannabinoids on the symptoms studied are generally modest, and in most cases, there are more effective medications. However, people vary in their responses to medications, and there will likely always be a subpopulation of patients who do not respond well to other medication. The combination of cannabinoid drug effects (anxiety reduction, appetite stimulation, nausea reduction, and pain relief) suggests that cannabinoids would be moderately well suited for particular conditions, such as chemotherapy-induced nausea and vomiting and AIDS wasting.

The report recommends that better controlled and regulated medications derived from marijuana should be developed. But until that time, people who derive relief from suffering caused by debilitating medical conditions such as cancer and HIV/AIDS should be provided with access to medical marijuana on a compassionate use basis in a regulated environment.

FAR/njw