

1 A MEMORIAL

2 REQUESTING THE SECRETARY OF HEALTH TO ADD OPIOID USE DISORDER
3 AS A "QUALIFYING CONDITION" IN DEPARTMENT OF HEALTH RULES IN
4 ORDER THAT INDIVIDUALS LIVING WITH OPIOID USE DISORDERS MAY
5 BE ELIGIBLE TO PARTICIPATE IN THE LYNN AND ERIN COMPASSIONATE
6 USE ACT MEDICAL CANNABIS PROGRAM; REQUESTING THE NEW MEXICO
7 LEGISLATIVE COUNCIL TO CHARGE THE LEGISLATIVE HEALTH AND
8 HUMAN SERVICES COMMITTEE WITH HEARING EXPERT TESTIMONY ON
9 USING MEDICAL CANNABIS TO PROVIDE AN ALTERNATIVE TO OPIOIDS
10 IN ACUTE AND CHRONIC PAIN MANAGEMENT AND IN PREVENTING AND
11 TREATING OPIOID USE DISORDERS.

12
13 WHEREAS, every day, more than ninety Americans die after
14 overdosing on opioids, often after becoming addicted to these
15 drugs; and

16 WHEREAS, many of these opioids are prescribed to
17 patients for the treatment of pain; and

18 WHEREAS, there is a growing body of research showing
19 that medical cannabis may be a safe alternative allowing the
20 replacement or reduction of opioid-based treatments, thereby
21 reducing the risk and number of opioid-related deaths; and

22 WHEREAS, cannabis helps to reduce symptoms associated
23 with detoxing from opioids, including nausea, vomiting, pain
24 and anxiety, as well as cravings; and

25 WHEREAS, opioid use disorder often goes untreated

1 because medication assisted treatment is not accessible to
2 many residents of New Mexico, especially those living in
3 rural areas of the state; and

4 WHEREAS, a study published in 2017 in the *Harm Reduction*
5 *Journal* provides evidence that suggests that expanding
6 medical cannabis programs to people with opioid use disorders
7 could help people suffering from addiction at risk of dying
8 from overdose; and

9 WHEREAS, a study published in 2017 in the *American*
10 *Journal of Public Health* concludes that legalization of
11 cannabis in Colorado was associated with short-term
12 reductions in opioid-related deaths; and

13 WHEREAS, a 2009 study of three hundred fifty medical
14 cannabis patients in California found that twenty-six percent
15 of respondents reported they used cannabis as a substitute
16 for illicit drugs and sixty-five and eight-tenths percent as
17 a substitute for prescription drugs; and

18 WHEREAS, a similar study to the 2009 California medical
19 cannabis patient study that was done in Canada in 2016 found
20 results similar to those reported in the California study;
21 and

22 WHEREAS, a study published in 2014 in the *Journal of the*
23 *American Medical Association* found that states with medical
24 cannabis laws were associated with a significant reduction in
25 mortality from opioid use, with a twenty-five percent

1 reduction in opioid overdose deaths reported in these states;
2 and

3 WHEREAS, the intent of the medical cannabis program is
4 to provide access to allow the beneficial use of medical
5 cannabis within a regulated system; and

6 WHEREAS, a recent university of Michigan study has
7 concluded that patients using medical cannabis to control
8 chronic pain reported a sixty-four percent reduction in their
9 use of more traditional prescription pain medications,
10 including opioids; and

11 WHEREAS, researchers from the university of Michigan
12 school of public health and the university of Michigan
13 medical school reported that their results suggest that for
14 some people, medical cannabis may be an alternative to more
15 common prescription painkillers at a time when national
16 health leaders are asking the medical community to cut back
17 on prescribing opioids such as Vicodin and OxyContin; and

18 WHEREAS, hundreds of people in Massachusetts who are
19 addicted to opioids are being treated with medical cannabis;
20 and

21 WHEREAS, a March 2017 article in the journal *Trends in*
22 *Neurosciences* urges that the initial promise shown by
23 cannabidiol warrants additional clinical studies to further
24 evaluate cannabidiol's potential as a treatment for opioid
25 use disorders; and

1 WHEREAS, a study published in 2017 in the journal *Planta*
2 *Medica* suggests that cannabidiol, a nonpsychoactive compound
3 found in medical cannabis, blocks opioid reward centers and
4 thereby may be effective in treating opioid use disorders;
5 and

6 WHEREAS, on November 6, 2016 and November 3, 2017, the
7 New Mexico medical cannabis advisory board recommended to the
8 secretary of health that opioid use disorder be included in
9 department of health medical cannabis program rules as a
10 "qualifying condition", that would render those living with
11 opioid use disorders as eligible to participate in New
12 Mexico's medical cannabis program; and

13 WHEREAS, in the first regular session of the fifty-third
14 legislature, the legislature passed a bill that would have
15 added opioid use disorder to the list of qualifying
16 conditions;

17 NOW, THEREFORE, BE IT RESOLVED BY THE HOUSE OF
18 REPRESENTATIVES OF THE STATE OF NEW MEXICO that, in light of
19 the epidemic of opioid-induced deaths in New Mexico and
20 recommendations by the New Mexico medical cannabis advisory
21 board to include opioid use disorder among those conditions
22 listed in department of health rules as a "qualifying
23 condition" for participation in the Lynn and Erin
24 Compassionate Use Act medical cannabis program, the secretary
25 of health be requested to adopt and promulgate in the

1 department of health's medical cannabis program rules opioid
2 use disorder as a "qualifying condition"; and

3 BE IT FURTHER RESOLVED that the New Mexico legislative
4 council be requested to charge the legislative health and
5 human services committee with hearing evidence related to the
6 use of medical cannabis to combat opioid use disorders during
7 the 2018 legislative interim; and

8 BE IT FURTHER RESOLVED that, if it is charged with
9 holding hearings on the use of medical cannabis to combat
10 opioid use disorders during the 2018 legislative interim, the
11 legislative health and human services committee receive
12 testimony from the secretary of health, the medical cannabis
13 advisory board, the chair of the New Mexico medical board and
14 the chair of the board of osteopathic medicine as well as
15 national experts in the therapeutic application of medical
16 cannabis, in acute and chronic pain management and in the
17 prevention and treatment of substance use disorders; and

18 BE IT FURTHER RESOLVED that copies of this memorial be
19 transmitted to the president pro tempore of the senate, the
20 speaker of the house of representatives, the chair of the
21 legislative health and human services committee, the secretary
22 of health, the members of the medical cannabis advisory board,
23 the chair of the New Mexico medical board and the chair of the
24 board of osteopathic medicine.
