

What Doctors Say about Medical Marijuana

Sanjay Gupta, MD

When it comes to marijuana, there are some 500 different chemical compounds. All these compounds work together. It's something known as the entourage effect. It's important because you can't just take a chemical out of marijuana and make it a medicine. You need the whole plant especially when it comes to using pot instead of pills."¹

“Or maybe the doctors aren't convinced that marijuana is an appropriate treatment,” I wanted to scream.
Dr. Krishna Upadhya

The Institute of Medicine

“If there is any future for marijuana as a medicine, it lies in its isolated components, the cannabinoids and their synthetic derivatives. Isolated cannabinoids will provide more reliable effects than crude plant mixtures. Therefore, the purpose of clinical trials of smoked marijuana would not be to develop marijuana as a licensed drug but rather to serve as a first step toward the development of nonsmoked rapid-onset cannabinoid delivery systems.”²

Krishna Upadhya, MD

“Recently I was the only witness to testify against local medical marijuana legislation.”

“Witness after witness reported that marijuana was the only thing that helped treat their health conditions from endometriosis to PTSD to epilepsy and lupus. Compelling personal stories were supported by information from the Internet and CNN documentaries featuring Dr. Sanjay Gupta.”

“Besides the legislation under discussion, witnesses testified that the only thing standing in the way of their access to marijuana was getting doctors to agree to recommend it for them. The main reason cited for physician reluctance was institutional policies prohibiting recommendations for fear of legal consequences.”

“Or maybe the doctors aren't convinced that marijuana is an appropriate treatment' I wanted to scream.”³

Dr. Upadhya is an adolescent medicine physician.

Peter Lipson, MD

“At this point, despite thousands of studies, there is very little evidence that cannabis is good for any specific medical condition. . .Pot, when tested alone or compared to currently available treatments doesn't seem to carry any

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Drs. Wilkinson and D’Souza

of the advantages touted by its supporters.”

“The *Wall Street Journal* just published an opinion piece in support of medical marijuana, one that should be viewed with skepticism. The author, Steve Patierno, explains how non-smoked cannabis, in carefully documented doses, can bring great benefit. His industry disclosure shows him to chair the medical board of a company called Pallia Tech that—surprise, surprise—works on developing carefully dosed, non-smoked cannabis medications. This doesn’t invalidate everything he writes, but it makes it suspect, especially if he doesn’t give us hard data (he doesn’t).”

“The question of legalization is an important one, but distinct from pot’s potential as medicine. One is a decision based on our values. The other on cold, hard, dispassionate science. We should keep this distinction clear and stop using medical marijuana as a stepping stone to legalization.”⁴

Dr. Lipson practices internal medicine in Michigan.

**Samuel T. Wilkinson, MD
Deepak Cyril D’Souza, MD**

“Some evidence suggests that marijuana may have efficacy in chemotherapy-induced vomiting, cachexia in HIV/AIDS patients, spasticity associated with multiple sclerosis, and neuropathic pain. However, the evidence for use in other conditions—including posttraumatic stress disorder, glaucoma, Crohn disease, and Alzheimer disease—relies largely on testimonials instead of adequately powered, double-blind, placebo-controlled randomized clinical trials.”

“Furthermore, marijuana may be contaminated with pesticides, herbicides, or fungi, the latter being especially dangerous to immune-compromised individuals such as patients with HIV/AIDS or cancer.”

“Central regulatory oversight by the FDA makes possible the recall of harmful drugs or contaminated batches. . .Is there sufficient oversight to monitor potential contamination of marijuana?”

“The potential harms associated with medical marijuana need to be carefully considered. . . There is evidence that marijuana exposure is

“States are essentially legalizing recreational marijuana but forcing physicians to act as gatekeepers for those who wish to obtain it.”

Drs. Wilkinson and D’Souza

associated with an increased risk of psychotic disorders in vulnerable individuals.”

“Recent findings suggest that long-term marijuana exposure is associated with structural brain changes as well as a decline in IQ.”

“States are essentially legalizing recreational marijuana but forcing physicians to act as gatekeepers for those who wish to obtain it.”⁵

Dr. Wilkinson is with the department of psychiatry, Yale School of Medicine, New Haven, Connecticut. So is Dr. D’Souza who is also affiliated with the Abraham Ribicoff Research Facilities, Connecticut Mental Health Center in New Haven and the Schizophrenia and Neuropharmacology Research Group, VA Connecticut Healthcare System, West Haven.

Florida Medical Association (20,000 doctors)

Our members should “reject responsibility for providing access to cannabis products . . . until such time that these materials receive marketing approval from the Food and Drug Administration.”

Florida Medical Association

The Florida Medical Association opposes consideration of any initiative or policy supporting the use of medical marijuana in Florida. . .and adopts the following policy statements from the American Society of Addiction Medicine:

1. That cannabis, cannabis-based products, and cannabis delivery devices should be subject to the same standards that are applicable to other prescription medications and medical devices and that these products should not be distributed or otherwise provided to patients unless and until such products or devices have received marketing approval from the Food and Drug Administration;
2. Reject smoking as a means of drug delivery since it is not safe;
3. Rejects a process whereby State and local ballot initiatives approve medicines because these initiatives are being decided by individuals not qualified to make such decisions (based upon a careful science-based review of safety and efficacy, standardization and formulation for dosing, or provide a means for a regulated, closed system of distribution for marijuana which is a CNS drug with abuse potential); and
4. Recommends its members and other physician organizations and their members reject responsibility for providing access to

cannabis and cannabis-based products until such time that these materials receive marketing approval from the Food and Drug Administration.⁶

Akikur Mohammad, MD

***“The recommendation letter is not an actual prescription.”
“Can you imagine if a physician prescribed other mind-altering drugs, like Vicodin or Oxycodone in this way?”***

Dr. Akikur Mohammad

“The whiff of nationwide legalization of medical marijuana is again in the air, no matter that it already has made a complete mockery of almost everyone in the field of medicine associated with it. The approval process in the 20 states and the District of Columbia that currently offers medical marijuana would be laughable if it also wasn't so dangerous. How my profession of medicine struck a Faustian bargain by allowing anyone with a checkbook to get a "recommendation letter" for marijuana is beyond me, but this charade cannot be allowed to go on any longer.”

“The sad reality is that medical marijuana cards aren't worth the paper they're printed on and to be crystal clear, anyone with any symptom can go to a "marijuana doctor" and can get what is actually called a "recommendation letter" that explains how the individual in question will medically benefit from marijuana. The patient takes the ersatz prescription to a dispensary and is now able to procure a host of mind-altering products -- none of which have actually been 'prescribed' in a traditional sense.”

“Let's be clear, here. The recommendation letter is not an actual prescription where, for instance, a patient is directed to take 500 mg of a particular medication three times a day for a month. The "medication" in question isn't directed and the patient can use whatever they want whenever they want depending upon their own taste. Can you imagine if a physician prescribed other mind-altering drugs, like Vicodin or Oxycodone, in this way?”

“If you seek a doctor's care for an ailment, he normally would ask for your complete health history, perhaps even a complete physical exam and perform diagnostic tests of varying degrees before prescribing a structured medication regimen with a systematic follow-up. That's standard medical procedure. In the case of marijuana, there is no standard medical procedure, no oversight, no special

There is no standard medical procedure, no oversight, no special training for physicians and no guidelines.

Dr. Akikur Mohammad

“There are no published trials of smoked marijuana in rheumatoid arthritis patients. We have zero evidence for efficacy.”

“None of my 60-year-old patients are interested in being stoned to treat their glaucoma.”

Dr. Paul N. Orloff

training for the physicians and no guidelines. Calling it "medical marijuana" is a disgrace for the entire medical community and all those perpetuating the misleading notion that this process is somehow medically sound.”⁷

Dr. A.R. Mohammad, addiction medicine specialist and board certified in psychiatry and addiction medicine, is an adjunct clinical associate professor at Keck School of Medicine at USC and CEO/Founder of [Inspire Malibu Treatment Center](#) and Las Virgines Behavioral Health and Medical Clinic.

Mary-Ann Fitzcharles, MD

“At this time, we cannot recommend herbal cannabis for arthritis pain management given the lack of efficacy data, potential harm from the drug, and availability of other therapies for managing pain. Physicians should discourage rheumatology patients from using medical marijuana as a therapy.”⁸

“There are no published trials of smoked marijuana in rheumatoid arthritis patients. We have zero evidence for efficacy.”⁹

Dr. Mary-Ann Fitzcharles is a researcher and rheumatologist at the McGill University Health Centre (MUHC) and the Research Institute of the MUHC in Quebec, Canada.

Dr. Paul N. Orloff

Since 2009, the American Glaucoma Society has said marijuana is an impractical way to treat glaucoma. “It’s very illogical to prescribe a medication where it’s not standardized. “None of my 60-year-old patients are interested in being stoned to treat their glaucoma.”¹⁰

Dr. Orloff is legislative chairman for the New York Ophthalmological Society.

References

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- ² Institute of Medicine, *Marijuana and Medicine: Assessing the Science Base*, 1999. http://www.nap.edu/openbook.php?record_id=6376 The Institute of Medicine (IOM) is an independent, nonprofit organization that works outside of government to provide unbiased and authoritative advice to decision makers and the public. Established in 1970, the IOM is the health arm of the National Academy of Sciences, which was chartered under President Abraham Lincoln in 1863. Nearly 150 years later, the National Academy of Sciences has expanded into what is collectively known as the National Academies, which comprises the National Academy of Sciences, the National Academy of Engineering, the National Research Council, and the IOM.
- ³ Krishna Upadhy, MD MPH, Medicine by public opinion: Where are the doctors?, July 19, 2014, <http://www.kevinmd.com/blog/post-author/krishna-upadhy>, accessed July 19, 2014.
- ⁴ Peter Lipson, MD, "Why I'm skeptical about marijuana's medical benefits," *Forbes*, July 9, 2014. <http://www.forbes.com/sites/peterlipson/2014/07/09/update-medical-marijuana/>
- ⁵ Samuel T. Wilkinson, MD; Deepak Cyril D'Souza, MBBS, MD. "Problems With the Medicalization of Marijuana," *Journal of the American Medical Association*, June 18, 2014. *JAMA*. 2014;311(23):2377-2378. <http://jama.jamanetwork.com/article.aspx?articleID=1874073>
- ⁶ The Florida Medical Association represents 20,000 Florida physicians. Its resolution can be read here in full: <http://www.tampabay.com/blogs/the-buzz-florida-politics/doctors-lobby-officially-opposes-marijuana-amendment/2191426>
- ⁷ Akikur Mohammad, M.D., "Smoke and Mirrors Cloud Medical Marijuana," Huffington Post, accessed July 20, 2014. http://www.huffingtonpost.com/akikur-mohammad-md/medical-marijuana_b_4995878.html
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- ⁹ Catherine Saint Louis, "Politician's Prescriptions for Marijuana Defy Doctors and Data, New York Times, June 26, 2014. http://www.nytimes.com/2014/06/27/health/politicians-prescriptions-for-marijuana-defy-doctors-and-data.html?_r=0
- ¹⁰ Ibid.

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What Doctors Say about Medical Marijuana is the first in a series of reports that present the views of medical marijuana by the medical and scientific community.

There is consensus among scientists that individual components found in the marijuana plant, extracted or synthesized, may become useful medicines. Two THC synthetics have been approved by FDA to treat chemotherapy-related nausea and AIDS wasting. Two extracted cannabinoids are in clinical trials in the U.S. to treat advanced cancer pain, muscle spasticity and neuropathic pain associated with MS (Sativex) and intractable epilepsy (Epidiolex). Evidence to date does not support use of the whole plant for any medical purpose.