

MAINE STATE LEGISLATURE

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FIRST REGULAR SESSION

ONE HUNDRED AND NINTH LEGISLATURE

Legislative Document

No. 665

H. P. 523

House of Representatives, February 20, 1979

Referred to the Committee on Health and Institutional Services. Sent up for concurrence and ordered printed.

EDWIN H. PERT, Clerk

Presented by Mr. Leighton of Harrison.

Cosponsors: Mr. Brannigan of Portland, Mr. D. Brown of Livermore Falls and Mr. S. Hughes of Auburn.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED
SEVENTY-NINE

AN ACT to Establish a Marijuana Therapeutic Research Program.

Be it enacted by the People of the State of Maine, as follows:

22 MRSA c. 558-A is enacted to read:

CHAPTER 558-A

MARIJUANA THERAPEUTIC RESEARCH PROGRAM

§ 2401. Short title

This chapter shall be known and cited as the "Marijuana Therapeutic Research Act."

§ 2402. Findings and purpose

The Legislature finds that research has recently indicated that the use of marijuana may alleviate nausea and certain other side effects of cancer chemotherapy as well as some symptoms of glaucoma. The Legislature also finds that further research and strictly controlled experimentation regarding the therapeutic uses of marijuana is necessary and desirable. The purpose of this chapter is to facilitate and encourage this research and experimentation.

§ 2403. Definitions

As used in this chapter, unless the context indicates otherwise, the following terms shall have the following meanings.

1. **Board.** "Board" means the Board of Registration in Medicine.
2. **Commissioner.** "Commissioner" means the Commissioner of Human Services.
3. **Department.** "Department" means the Department of Human Services.
4. **Marijuana.** "Marijuana" means marijuana, tetrahydrocannabinols or a chemical derivative of tetrahydrocannabinols.
5. **Practitioner.** "Practitioner" means an allopathic or osteopathic physician licensed to practice in this State.
6. **Program.** "Program" means the marijuana therapeutic research program.

§ 2404. Marijuana therapeutic research program

1. **Establishment; administration.** There is established within the department a marijuana therapeutic research program which shall be administered by the commissioner.
2. **Rules.** Subject to Title 5, Part 18, the department shall adopt rules necessary for the proper administration of the program. In adopting rules, the department shall consider pertinent rules adopted by the Drug Enforcement Agency the Food and Drug Administration, the National Institute on Drug Abuse and any other federal agency concerned with the subject of this chapter.
3. **Distribution.** The commissioner shall contract with the National Institute on Drug Abuse for the receipt of marijuana under rules adopted by the National Institute on Drug Abuse, the Food and Drug Administration and the Drug Enforcement Agency, and shall have the marijuana received under this subsection delivered to appropriate state-operated licensed pharmacies designated by the board for distribution to approved patients upon the written prescription of their approved practitioner.

§ 2405. Participation in the program

1. **Application.** Any patient or practitioner who wants to participate in the program shall apply to the board for approval.
2. **Review and approval.** The board shall review all applicants and, if they are eligible under subsection 3 and the rules adopted by the department under section 2404, subsection 2, shall approve them for participation. In performing these duties, the board shall be subject to Title 5, Part 18.
3. **Qualifications.** The following persons shall be eligible to participate in the program:

A. Cancer chemotherapy patients and glaucoma patients who are in a life-threatening or sense-threatening situation, and who are not responding to conventional treatment or who are suffering severe side effects even though conventional treatment is proving effective;

B. Other patients whose participation is warranted by the medical evidence presented; and

C. Practitioners whose patients have been approved by the board for participation.

§ 2406. Expressly authorized possession, prescription and distribution

A patient or practitioner approved by the board for participation in the program under section 2405, subsection 2, or a state-operated, licensed pharmacy designated by the board under section 2404, subsection 3, is expressly authorized to possess, prescribe or distribute marijuana, as the case may be, under this chapter.

§ 2407. Reports

The administrator and the board shall annually report their findings and recommendations regarding the program to the Governor and the Legislature.

STATEMENT OF FACT

It is now a medically accepted fact that some patients benefit significantly from the controlled use of analyzed marijuana under a physician's supervision. Research has shown, for example, that nausea and other side effects of chemotherapy, as well as the symptoms of glaucoma, may be relieved by its use in certain instances. Recent experiments also indicate that there are some other conditions which can be similarly alleviated. This bill acknowledges these medical findings and establishes a mechanism by which the use of marijuana for medical purposes can be strictly controlled. It is modeled after legislation in several other states, such as Florida, Louisiana, Illinois and New Mexico.

Specifically, the bill creates a therapeutic research program administered by the Commissioner of Human Services. The Board of Registration in Medicine must review any patient wishing to participate in the program, and participation is limited to cancer chemotherapy and glaucoma patients who are not responding to conventional treatment or who are suffering severe side effects, and any other patients where medical evidence presented to the board justifies their participation. If the board approves a patient, his physician may write a prescription which can be filled at a state-operated licensed pharmacy designated by the board. The commissioner is authorized to obtain analyzed marijuana available from the Federal Government and deliver it to the pharmacy for dispensing to any approved patient with a written prescription from his physician. The commissioner and the board must make an annual report to the Governor and the Legislature, enabling both the legislative and executive branches to monitor the program closely.