

ARIZONA CANNABIS NURSES ASSOCIATION
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January 18, 2014

Hon. Will Humble,
Director
Arizona Department of Health Services
State of Arizona
PO Box 19000
Phoenix, AZ 85005

Clerk of the Department,
Arizona Department of Health Services
1740 W. Adams Street
Room 303
Phoenix, AZ 85007

RE: Written Request for a Hearing Regarding Petition to Add a Debilitating Medical Condition or Treatment—Post Traumatic Stress Disorder (“PTSD”)—Submitted by the Arizona Cannabis Nurses Association (“AZ CNA”)

Dear Director Humble/Clerk:

On behalf of the Arizona Cannabis Nurses Association, we respectfully appeal the denial of our request to add PTSD to the list of debilitating conditions pursuant to ARS Section 36-2801(3) and AAC R9-17-106. We further request that the Arizona Department Health Services schedule an administrative hearing in accordance with ARS Section 41-1092.08 as described and set forth in your denial letter dated January 14, 2014.

We believe that the evidence submitted proves that:

1. The physiological effects experienced by an individual suffering from PTSD...impairs the ability of the individual to accomplish activities of daily living;
2. There are no safe alternative conventional medical treatments to provide therapeutic or palliative benefits for PTSD or a treatment of the PTSD other than medical marijuana; and,
3. The totality of the evidence—including articles published in peer-reviewed, scientific journals—prove that the use of marijuana will provide therapeutic *or palliative benefits* for PTSD or a treatment of PTSD (Emphasis Added).

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Other than these standards, the Arizona Medical Marijuana Act (“AMMA”) nor its rules provides a guiding standard for the Director to approve or deny petitions once ADHS has accepted a petition to add a qualifying condition. While the ADHS Director’s Blog states that the petition was denied “because of the lack of published data regarding the risks and benefits of using *Cannabis* to treat or provide relief for the petitioned conditions,¹” ADHS excluded many published studies that spoke to *Cannabis*’s potential to provide relief for PTSD.

ADHS’s categorical rejection of published studies discussing biochemical pathways or studying the effect of cannabis on animals summarily excluded relevant scientific evidence. In a letter to Director Humble dated January 10, 2014, the Medical Advisory Committee’s stated that “because marijuana has not been subjected to *any high quality, scientifically controlled testing in humans* for any of the petitioned conditions, there is lack of evidence to support adding any of the conditions.” At some point the Committee has created a stricter standard for evidence than required by the AMMA. While we appreciate ADHS’s desire for high standards, this stricter standard is in violation of the AMMA and results in the exclusion of relevant scientific evidence that supports PTSD’s addition as a debilitating condition.

Our submission included dozens of scientific, peer-reviewed articles, combined with the live testimony of three (3) distinguished medical professionals, including one (Dr. Strand) who served as the head of the medical team for the US Olympic Track and Field team. In addition, the overwhelming number of statements received by ADHS from concerned citizens, including many veterans, describing in detail the beneficial palliative effects of medical cannabis on their PTSD.

As we furthermore pointed out, the State of New Mexico—through their medical review committee—added PTSD four (4) years ago, and recently decided that PTSD would remain a qualifying condition under its medical cannabis program.² Both panels who considered the issue and decided on it favorably, did so unanimously, and included medical professionals. Indeed, the science of our next door neighbor, New Mexico, is the same as the science in Arizona. In sustaining PTSD as a listed debilitating condition, New Mexico pointed out that in the several years that PTSD has been listed, there has not been one single reported adverse outcome with respect to the use of medical cannabis for PTSD.

Oregon, even more recently, approved PTSD as a qualifying condition under its medical cannabis program.³

¹ <http://directorsblog.health.azdhs.gov/>. “Medical Marijuana News,” January 17, 2014.

² <http://www.drugpolicy.org/news/2013/05/access-medical-marijuana-patients-post-traumatic-stress-disorder-ptsd-new-mexico-protoc>.

³ <http://www.eastbayexpress.com/LegalizationNation/archives/2013/06/11/oregon-governor-approves-medical-marijuana-for-ptsd>.

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ADHS should follow the example of our neighbors. In its recommendations, the “Committee expressed that the growing body of evidence concerning the basic science of the potential effects of cannabinoids on PTSD patient raised valid clinical questions that need to be investigated. Given this evidence and that several states have Medical Marijuana provisions for PTSD patients, it is hoped that a randomized, controlled trial may be conducted to further investigate this question.” Adding PTSD to the list of qualifying conditions in Arizona allows for “randomized, controlled trial” that the Committee seeks.

It should be unacceptable to all Arizonans to allow a returning Arizona veteran with PTSD to be denied medical cannabis when New Mexico veterans have the freedom to choose such therapy.

Accordingly, we appeal the AZDHS decision denying our petition to list PTSD as a debilitating condition.

Very truly yours,

Heather Manus, RN, President
The Arizona Cannabis Nurses Association