ARIZONA DEPARTMENT OF HEALTH SERVICES

Inter-Office Memorandum

TO: Will Humble, Director
Arizona Department of Health Services

FROM: Laura K. Nelson, M.D., Chief Medical Officer
Arizona Department of Health Services

C.M. Cut MD
for Laura Nelson, MD

DATE: July 17, 2012

RE: **Medical Advisory Committee Recommendations to the Agency Director**

The Medical Advisory Committee of the Arizona Department of Health Services (ADHS) would like to express our appreciation to you for maintaining the medical focus of the Arizona Medical Marijuana Program. By setting expectations for clinical assessments by medical providers and using evidence-based research to guide programmatic decisions, you have kept this program a truly medical marijuana program.

As per A.A.C. R9-17-06, the Department accepted petitions from the public in January of 2012 to add debilitating conditions to the list of current qualifying conditions. The Medical Advisory Committee considered four conditions during this submission period, which included Post Traumatic Stress Disorder, Generalized Anxiety Disorder, depression, and migraines. The Department held a public hearing and accepted public comments regarding these proposals. At your request, we reviewed all of the testimony and evidence received by ADHS prior to making our final recommendations.

The Evidence Reviews provided by The University of Arizona's Colleges of Medicine and Public Health proved extremely helpful and informative to the Committee while developing the recommendations. Because marijuana has not been subjected to any high quality, scientifically controlled testing for any of the petitioned conditions, we find no convincing evidence that marijuana provides a benefit. We acknowledge there is anecdotal evidence that using marijuana has helped patients, but there is no way to exclude the possibility that the improvement is due solely to placebo. There is also the potential for harm to patients, if the Department were to approve marijuana use for these conditions. Patients may use marijuana to self medicate, and avoid seeking care from a trained medical professional. Delaying initiation of appropriate, proven treatments and therapies could result in a worsening of their condition or misdiagnosis of a more serious condition. While the public comments and testimony were extremely compelling, the Committee, in order to maintain the medical foundation of the program, utilized scientific evidence to guide the decisions.

RECOMMENDATIONS

The Committee studied the thorough Evidence Review provided by the University of Arizona and identified and reviewed the most persuasive studies. After careful consideration, the Committee concluded that, based on the scientific evidence currently available, there is insufficient evidence to support adding the conditions to the list of qualifying conditions. The Medical Advisory Committee, by unanimous vote of all members present at the meeting of July 13, 2012, recommended **against** adding:

- Post Traumatic Stress Disorder (PTSD)
- Generalized Anxiety Disorder (GAD)
- Depression
- Migraine Headaches

The members also unanimously agreed to request that the University of Arizona's Colleges of Medicine and Public Health continue to review any new literature and study results that may become available and present them to the Committee, if warranted.

The members of the Committee acknowledged the impact these conditions have on those suffering from them, as demonstrated by the heartfelt testimony presented at the public hearing and the comments submitted online to the Department. While the Committee could not support a recommendation to add migraines to the list of qualifying conditions, the members felt migraine sufferers may already qualify for the Medical Marijuana Program through the condition for chronic pain.

The Department will begin accepting new petitions for adding debilitating conditions on July 23, 2012. The members of the Committee discussed that petitions for these conditions could be resubmitted for your consideration when new evidence or research results become available.

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