

**Submission
No 109**

INQUIRY INTO USE OF CANNABIS FOR MEDICAL PURPOSES

Organisation: Cannabis Cures

Name: Ms Kathy Day

Date received: 12/02/2013

Dear Members of Australian Parliament and NSW Legislative Council
General Purpose Standing Committee No 4,

I wrote this and will be submitting it shortly for the USA, however if stands true in all nations, there fore I am submitting it for your Inquiry into the safety and efficacy of cannabis for medical purposes.

No law on cannabis was ever written or enacted based on real evidence or a single fact about the plant. As was written into in our nation's Declaration of Independence, government derives "their powers from the consent of the governed". The government(s) had no authority to take control of the plant, and their doing so was not based on any scientific or real evidence but done so on deceit of the people and Congress it's self for the greed of a few. Congress has repeatedly continued the lies by enacting additional laws based on those lies instead of real evidence or studies done, including a law requiring the ONDCP to oppose legalization regardless of any science or health benefits. It was in fact Congress who acted arbitrarily and capriciously in regard to cannabis and the oppressive laws enacted regarding a plant.

There have been few times when the people demanded change, slavery and alcohol prohibition being two of those times. Cannabis prohibition has led to an other form of slavery through the prison system. We have reached a tipping point once again where the people of the nation demand laws be changed for the betterment of society as a whole. Report after report for decades have displayed the total failure of the current cannabis and drug policy. Every peer-reviewed or government study ordered has come to the same conclusion, that cannabis does not belong in Schedule 1 of the Controlled Substance Act, and it is a safe substance. Now science has explained the damage to the health of the people, so that the cannabis policy is no longer tolerable and must immediately be changed.

Science has displayed repeatedly that the endocannabinoid system regulates the other systems in the body. This homeostasis is what keeps our body's balance and functioning normal. For those with a damaged ECS (endocannabinoid system) or lacking in endogenous cannabinoids (the ones our body naturally make) health issues and crisis are looming. Science has proven the ECS is directly related to motion sickness. This should be a diagnostic tool. Every parent knows when their child suffers motion sickness. If the ECS can not function appropriately to balance the body's system when the body is in motion much more is going on in that body unseen by the naked eye and most likely unnoticed by the individual. Partly because it is a minor differentiation and partly because they are unaware. If a person has a dysfunctional ECS they can not be fully unaware of what true normal feels like. Their normal is off kilter from the get go. Chances are the child suffering motion sickness has other

issues with health or brain/learning/social, or sensitivities. These are all a signals that the ECS is involved. When something is off balance, when the child is off balance, the ECS is the internal balance. When all works right there are no issues, the person is healthy. When the ECS can not balance the systems things begin going haywire and the individuals health is at stake. Science has also learned that activity of cannabinoid system decreases the progression of brain aging and the neuroprotectant properties of cannabis actually protects the brain from damage in 7 out of the 8 areas of the brain that suffer damage from binge drinking if consumed during the binge drinking.

Bring on the Stakeholders, the pharmaceutical industry, the medical profession, the FDA, the insurance companies, the stockholders. By keeping cannabis illegal we maintain status quo. The individual with the malfunctioning ECS whose health is at stake is now a patient for the stakeholders. A created group of industries. Though there was no way of realizing this is what took place in 1937 the fact that it can be proven that nearly all health disorders are a direct cause of a malfunctioning ECS it is time to change the laws.

The DEA has a set of criteria that they base any controlled substance schedule change and assignment to. Fact is they can not place that same criteria on cannabis with the known science. By doing so the are maintaining the status quo creating patients, or one could easily say with the known science, they are in essence killing off citizens.

The Pharmaceutical industry provides chemical compounds to treat symptoms. We are suppose to rely on food to keep us healthily. In that case cannabis should be considered a food not a medicine, the DEA may have that one right. I'll even give that to them. Cannabis is not a medicine in the sense of a pharmaceutical medicine. It does not treat the symptoms, it treats the cause. The cause of ailment, disease, disorders, whatever you or science cares to call it still boils down to one thing, the ECS not working as it should. Science has proven exogenous (external) cannabinoids, (only cannabis has exogenous cannabinoids, there is no other source) act identical to endogenous cannabinoids, those our body make naturally. No amount of pharmaceuticals can boost the ECS. Only cannabis can do that by means of the cannabinoids. While the DEA and FDA want to claim concern over the other components in cannabis truth is known that the flavonoids and terpenes also have healing properties. As for anything else in cannabis that they may try to take issue with it is a widely known fact that cannabis has never caused any permanent damage to organs which most pharmaceutical can and do. The FDA regulates patented medicine. Cannabis is a plant and not eligible for a patent. Therefore the DEA's argument is wrong.

In the 5000 plus year history of the plant if there were any significant

problems we would know about it so to play dumb on that is an insult to the American people. Until science develops the ability to measure the functions of the ECS the DEA's standards can not possibly be used in conjunction with cannabis for the simple reason that physiologically cannabis' effects on each individual will vary depending on the level of endogenous cannabinoids and functionality of the individual ECS.

By continuing to keep cannabis illegal the government is denying citizens an essential nutrient for health, causing health problems for individuals putting the citizens as stake on the plates of the stakeholders, the pharmaceutical industry, the medical profession, the FDA, the insurance companies, the stockholders. While we are a capitalist society, to create diseases for an industry to feed on by maintaining an illegal status of a plant that science has proven repeatedly to be a necessity for homeostasis is unacceptable by any government and no different than feeding the Christians to the lions. It is a genocide.

It is far wiser of a government to realize grave errors in a rush to judgement due to overwhelming heat and false testimony and an awaking in the light of scientific facts than to continue the path of society distraction with the war of cannabis. The social experiment has proven an utter failure with many unforeseen casualties. Patients around the globe have found treating the cause of their disorder far more helpful than treating the symptom. As a nation we should embrace a new health science and eagerly learn all we can. The DEA's refusal to change the schedule of cannabis which allow more science displays pure ignorance and arrogance. The most wonderful thing about hanging out with a bunch of autistic people is when you realize there are so many other ways to think it opens your mind to so many ways to look at things, see it differently, and gain an other sense about it. It was a most wonderful gift of enlightenment and opening of mind and something as a nation we must do about cannabis. It is ancient medicine as well as new medicine and science.

To say we are as a society all too ignorant to know our own body and how we feel is an overreach of any government. Withholding the key to homeostatic wellness by keeping cannabis illegal forcing citizens to consume chemicals to treat symptoms instead of cannabis to treat the cause is not only immoral it is murder by slow poisoning.

Attempts to break apart the compounds of cannabis, separating the various cannabinoids in attempts to use them as a single cannabinoid for therapeutic purposes is where the pharmaceutical industry is making a huge error in cannabinoid medicine. Just as Marinol was not the answer it was intended to be and is often used as a cover to pass random testing when the actual medicine being used is cannabis.

Here is why. One must first understand the endocannabinoid system, often referred to as the ECS. The ECS controls the other systems in the body, regulating their balance and function by means of endocannabinoids. As Raphael Mechoulam, the man who originally discovered THC in 1964 and has been studying cannabis ever since, and whose team discovered the endocannabinoid system in 1987, states, "There is barely a biological or physiological system in our bodies in which the endocannabinoids do not participate."

When the body's own endocannabinoids are diminished, this causes a function issue within the body's systems.

For example Choukèr et al concluded:

"stress and motion sickness in humans are associated with impaired endocannabinoid activity." A point which I think is diagnostically of extreme value and should be used as a diagnostic tool. Every parent knows if their child suffers motion sickness. This should be the first warning sign that the individual's ECS has issues and may well cause other health issues. I have yet to find one cannabis medicine patient that did not suffer motion sickness. The ECS is a critical modulator of physiological functions not only in the central nervous system but also in the autonomic nervous system, the endocrine network, the immune system, the gastrointestinal tract, the reproductive system and in microcirculation, and most importantly the cytokine network, which is the source of inflammation the cause of nearly if not all disease and as science is learning most if not all mental health issues and disorders such as autism.

Since the discovery of anandamide in 1992, over 3500 publications have reported new data on the biological role of the endogenous cannabinoid system.

While we have American Medicine and it works for many, there are other ways of medicine that also work and have been accepted. In many areas of the country medical cannabis is considered holistic medicine. It has always been a part of Ayurvedic medicine, Chinese and Korean medicines. Cannabis was widely used as medicine in this nation before 1937. Now that science understand the connection between the plant and humans it is time the nation accept cannabis medicine as a science and medicine. After all besides American Medicine we do have chiropractic, holistic, herbal and Ayurvedic medicine being practiced here, there is room for cannabis medicine that is to say the practice of medicine based on the endocannabinoid system. To say we are a free nation and forbid the only natural homeostatic substance that can actually heal people is an oxymoron.

Genesis 1:29 And God Said I have given you every plant yielding seed that is on the surface of the earth, and every tree which has fruit yielding

seed, it shall be food for you. If god did not want this plant on the earth it would not be. Despite all that governments have done over the last 75 years to try to remove it from the earth, it still proliferates.

So often that one could say on a regular basis, the conclusion of medical studies are, "Our study suggests that targeting the endocannabinoid system might be useful for," then lists the biological disorder. Obviously with that being the conclusion of studies on nearly every disease or disorder, the only conclusion anyone with any intelligence can come to is the endocannabinoid system is involved with everything. Rather than continue on the path of creating disorders and diseases from a lack of cannabinoids in the diet, we must make cannabis available to protect the health of people. Insisting we play guinea pig to the pharmaceutical industry any longer while chemists try to conjure up some synthetic concoction to manipulate the endocannabinoid system is no longer acceptable. We have what is needed to treat the endocannabinoid system, and that is CANNABIS.

Governments have shown a complete failure in regard to cannabis, respect for it's amazing healing properties and other beneficial uses. Therefore Cannabis must be returned to the people and removed from the controlled substance schedule allowing for it to be consumed fresh and raw as a food and dried for medicinal and a safe relaxant.

I am putting together a list of peer-reviewed studies for reference, though I am still compiling them, what I have so far is listed below my signature.

Sincerely,
Kathy Day

I am putting together a list of peer-reviewed studies for reference, though I am still compiling them here is what I have so far.

The endocannabinoid system, eating behavior and energy homeostasis:
the end or a new beginning?
Bermudez-Silva FJ, Viveros MP, McPartland JM, Rodriguez de Fonseca F

Abstract (WHAT THEY ARE DOING WRONG)

http://www.unboundmedicine.com/medline/citation/20347862/The_endocannabinoid_system_eating_behavior_and_energy_homeostasis:_the_end_or_a_new_beginning

(WHAT THEY ARE DOING WRONG)

<http://onlinelibrary.wiley.com/doi/10.1111/j.1365-2826.2008.01692.x/abstract>

(WHAT THEY ARE DOING WRONG)

Proof they are learning

Oxidation of the Endogenous Cannabinoid Arachidonoyl Ethanolamide by the Cytochrome P450 Monooxygenases: Physiological and Pharmacological Implications

Natasha T. Snider, Vyvyca J. Walker, and Paul F. Hollenberg

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2835397/>

Thermoregulation

The role of endocannabinoids in the hypothalamic regulation of visceral function.

Wenger T, Moldrich G.

<http://www.ncbi.nlm.nih.gov/pubmed/12052044>

Nature. 2001 Apr 12;410(6830):822-5.

Leptin-regulated endocannabinoids are involved in maintaining food intake.

Di Marzo V, Goparaju SK, Wang L, Liu J, Bátkai S, Járαι Z, Fezza F, Miura GI, Palmiter RD, Sugiura T, Kunos G.

<http://www.ncbi.nlm.nih.gov/pubmed/11298451>

Neuropharmacology. 2008 Jan;54(1):206-12. Epub 2007 Jun 29.

Regulation of hypothalamic endocannabinoid levels by neuropeptides and hormones involved in food intake and metabolism: insulin and melanocortins.

Matias I, Vergoni AV, Petrosino S, Ottani A, Poci A, Bertolini A, Di Marzo V.

<http://www.ncbi.nlm.nih.gov/pubmed/17675101>

Int J Obes (Lond). 2006 Apr;30 Suppl 1:S33-8.
The role of the endocannabinoid system in the control of energy homeostasis.

Osei-Hyiaman D, Harvey-White J, Bátkai S, Kunos G.

<http://www.ncbi.nlm.nih.gov/pubmed/16570103>

Pharmacol Ther. 2011 Mar;129(3):307-20. doi:
10.1016/j.pharmthera.2010.10.006. Epub 2010 Nov 3.
Role of the endocannabinoid system in food intake, energy homeostasis and regulation of the endocrine pancreas.

Li C, Jones PM, Persaud SJ.

<http://www.ncbi.nlm.nih.gov/pubmed/21055418>

Cannabinoids: Novel Medicines for the Treatment of Huntington's Disease
Onintza Sagredo

1-3,*

, M. Ruth Pazos

4

, Sara Valdeolivas

1-3

and Javier Fernández-Ruiz

http://petition.iowamedicalmarijuana.org/2012/Sagredo_2012.pdf.

Pharmaceuticals 2011, 4(8), 1101-1136; doi:10.3390/ph4081101

The Endocannabinoid System as Pharmacological Target Derived from Its CNS Role in Energy Homeostasis and Reward. Applications in Eating Disorders and Addiction

Maria-Paz Viveros 1,* , Francisco-Javier Bermúdez-Silva 2,3 , Ana-Belén Lopez-Rodriguez 1 and Edward J. Wagner 4

<http://www.mdpi.com/1424-8247/4/8/1101>

Endocannabinoids: Multi-scaled, Global Homeostatic Regulators of Cells and Society

Robert Melamede

http://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=11&ved=0CDAQFjAAOAO&url=http%3A%2F%2Fnecsi.edu%2Fevents%2Ficcs6%2Fviewpaper.php%3Fid%3D70&ei=ClwFUd_7CJG-9gTRi4GADw&usq=AFQjCNFeDBAyCSVjMqKH2yepXH0_uPt2Og&bvm=bv.41524429,d.eWU

Harm reduction-the cannabis paradox

Robert Melamede

<http://www.harmreductionjournal.com/content/2/1/17>

THE ENDOCANNABINOID SYSTEM: PHYSIOLOGY AND PHARMACOLOGY

<http://alcalc.oxfordjournals.org/content/40/1/2.full>

Neuro Endocrinol Lett. 2004 Feb-Apr;25(1-2):24-30.

The endocannabinoid-CB receptor system: Importance for development and in pediatric disease.

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Source

Department of Behavioral Sciences, College of Judea and Samaria, Ariel 44837, Israel. fride@research.yosh.ac.il

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tklein@hsc.usf.edu

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Source

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Full Article at <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3499879/>

Current Pharmaceutical Design, 2008, 14, 000-000 1 Mechanisms of Control of Neuron Survival by the Endocannabinoid System

Ismael Galve-Roperh*, Tania Aguado, Javier Palazuelos and Manuel Guzmán*

http://www.bbm1.ucm.es/cannabis/archivos/publicaciones/Curr_Pharm_De_s08_14_2274_2288.pdf

Hypertension Journal of The American Heart Association

Modulation of the Endocannabinoid System in Cardiovascular Disease Therapeutic Potential and Limitations

. Pál Pacher, Partha Mukhopadhyay, Rajesh Mohanraj, Grzegorz Godlewski, Sándor Bátkai, George Kunos

<http://hyper.ahajournals.org/content/52/4/601.full>

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doi:10.1098/rstb.2011.0388

The endocannabinoid system in normal and pathological brain ageing
Andras Bilkei-Gorzo

<http://cannabisclinicians.org/wp-content/uploads/2012/11/BrainAgeing2012.pdf>

Br J Pharmacol. 2009 April; 156(7): 1029–1040.doi: 10.1111/j.1476-5381.2008.00088.x

The endocannabinoid system as a target for the treatment of motor dysfunction

Javier Fernández-Ruiz

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2697699/>

Phil. Trans. R. Soc. B (2012) 367, 3326–3341
doi:10.1098/rstb.2011.0388

The endocannabinoid system in normal and pathological brain ageing
Andras Bilkei-Gorzo

<http://cannabisclinicians.org/wp-content/uploads/2012/11/BrainAgeing2012.pdf>

Science Direct 2004 Elsevier Inc. All rights reserved.
doi:10.1016/j.lfs.2004.03.026

Role of the endocannabinoid system in Alzheimer's disease:
New perspectives
M.R. Pazos, E. Nuñez, C. Benito, R.M. Tolón, J. Romero

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Cota D.

Source

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Grotenhermen

Department of Psychiatry, Social Psychiatry, and Psychotherapy, Hannover Medical School:

Prof. Dr. med. Müller-Vahl

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Physiology and Pharmacology, University of Calgary, Canada.

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erusso@montanadsl.net

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Monograph No.1, 2002

An American Family Physician Monograph

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Full

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Emerging Role of the CB2 Cannabinoid Receptor in Immune Regulation
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Crucial Role of CB2 Cannabinoid Receptor in the Regulation of Central Immune Responses during Neuropathic Pain

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