



PUBLIC POLICY & INFORMATION

Promoting Addiction Prevention, Treatment and Recovery Through Advocacy and Education

POSITION PAPER No. 5/212th Legislature (2006-07)

ISSUE:

Establishes “New Jersey Compassionate Use Medical Marijuana Act.”

BILL NO.

A-933 (Gusciora, Carroll)

S-88 (Scutari)

DESCRIPTION

S-88/A-933 allows a qualifying patient suffering from a debilitating medical condition to grow and possess six plants of marijuana for medical purposes if authorized by a doctor. Along with the patient, these bills protect the patient’s physician and primary caregiver from arrest, prosecution, property forfeiture, criminal and other penalties.

NCADD-NJ POSITION:

NCADD-New Jersey opposes S-88/A-933 because marijuana has not been approved by the Food and Drug Administration for treatment of these or any other medical conditions.

The Federal Food, Drug, and Cosmetic Act requires that drugs be shown to be safe and effective for their intended use before being marketed. The FDA is the federal agency that reviews the safety and efficacy of drugs. The approval process requires scientific, well-controlled clinical trials that provide the necessary scientific data upon which the FDA determines whether a drug is safe and effective for its intended use.

The FDA does not support the use of smoked marijuana for medical purposes. The agency determined that “marijuana has a high potential

for abuse, has no currently accepted medical use in treatment in the United States, and has a lack of accepted safety for use under medical supervision.” It further found that there is sound evidence that smoked marijuana is harmful, and a past evaluation by the FDA concluded “that no sound scientific studies supported medical use of marijuana for treatment in the United States, and no animal or human data supported the safety or efficacy of marijuana for general medical use.”

Efforts that seek to bypass the FDA drug approval process do not serve the interests of public health. S-88/A-933, which makes smoked marijuana available for a variety of medical conditions upon a doctor’s recommendation, is inconsistent with efforts to ensure that medications undergo the rigorous scientific scrutiny of the FDA approval process and are proven safe and effective under the Food Drug and Cosmetics Act.

Marijuana is one of the most prevalent illegal substances used by New Jersey residents, and was used at the earliest age, peaking in first use among residents between the ages of 15 and 17 (40 percent)¹. More than a third of New Jersey high school students (36 percent) reported the use of marijuana. Nineteen percent of students used marijuana in the past 30 days, and 5 percent used marijuana on school property in that time. Furthermore, 14 percent of the students reported they would try marijuana for the first time if it were legalized while 12 percent would increase their use of the drug².

Perceived availability of drugs and alcohol is a risk factor predictive of later use. New Jersey Middle School students who reported that it would be very easy to obtain illicit drugs or alcohol also reported higher levels of use³. Allowing qualified patients to grow and possess six plants



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of marijuana and use this drug openly could lead to a perception that marijuana is more available and more easily accessible.

These risks coupled with the lack of FDA approval leads to unnecessary danger to New Jersey residents if these bills are enacted.

Footnotes

- 1) The 2003 New Jersey Household Survey on Drug Use and Health, Division of Addiction Services, DHS, 2005.
- 2) New Jersey Student Health Survey, Department of Education, Office of Program Support Services, 2003
- 3) 2003 New Jersey Middle School Substance Use Survey, Division of Addiction Services, DHS, 2003

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