

Sponsor Testimony
SCR 13
Health, Human Services, and Medicaid
Chair, Senator Dave Burke
Tuesday 30, 2018

Good afternoon, Chairman Burke, Vice-Chair Beagle, Ranking Member Tavares, and members of the Senate Health, Human Services and Medicaid Committee. Thank you for allowing me to testify on SCR 13, which urges Congress and the United States Drug Enforcement Administration to reschedule marijuana, or cannabis.

Cannabis is currently a Schedule I drug. The FDA has not approved marijuana as a safe and effective drug even though scientific research has shown cannabis and its derivatives to have a range of effects that may be therapeutically useful—including in the treatment of epilepsy, glaucoma, post-traumatic stress disorder, cancer and the side effects of cancer medication, fibromyalgia, multiple sclerosis, symptoms of AIDS, Parkinson’s disease, and ALS, among many other conditions.

Part of the barrier to this lack of approval by the FDA is the slow and limited research that is able to be conducted in the United States. The current scheduling of marijuana creates a catch-22 , because the federal government is requiring thorough research of the medicinal benefits of marijuana to be conducted, but the federal restrictions prohibit any meaningful research from being conducted. The rescheduling of cannabis would ease restrictions on research of the medical use of the substance, and also ease regulatory burdens in states where marijuana is currently legal.

Earlier this month, The United States Attorney General, Jeff Sessions, released a memo encouraging the enforcement of penalties for “marijuana activity”. This is a reversal of the Cole Memo of February 14, 2014, under which nine states—including Ohio—passed legislation to legalize marijuana for either medicinal or recreational use. Sessions’ memo is an attack on a growing and thriving industry that has boosted economies and more importantly increased the quality of life of those suffering from debilitating conditions. Now is the time for Congress to reschedule marijuana from being one of the most dangerous drugs with no medical benefits, to a schedule that reflects its true medicinal nature.

At least 29 states, including Ohio, and the District of Columbia, allow for comprehensive public medical marijuana and cannabis programs, indicating that their citizens believe that cannabis can safely provide medicinal benefits to many patients.

Chairman Burke and members of the committee, I appreciate your attention to this important matter. I would be happy to answer any questions that you may have.