

SUNDAY, OCTOBER 18, 2009

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Medical marijuana legislation growing throughout country

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As more states debate medical marijuana policies, research at LSU Health Sciences Center-New Orleans offers new insights into how marijuana may affect people who suffer with HIV and AIDS.

ADVERTISEMENT The study looks at how long-term use of THC, the primary active chemical in marijuana, affects the progression of an animal disease similar to HIV in the immune system as well as appetite and behavior in animals affected with the disease. The animals receive THC injections twice a day for up to a year.

"Early findings suggest that, as far as the immune system is concerned, (THC) does not accelerate disease progression," said Dr. Patricia Molina, a professor and head of the physiology department at LSUHSC-New Orleans.

Researchers will publish more complete results in the next few months. They plan to begin studying the same issues in humans if they can repeat their findings in animals and get more money for clinical research in humans.

The National Institute on Drug Abuse, part of the U.S. government's National Institutes of Health, funded the LSUHSC-New Orleans. Similar research is going on in China, Molina said.

Since the mid-1990s, 13 states have allowed people to grow, buy and possess marijuana for medical purposes. California was the first to allow medical marijuana. Michigan, which started a medical marijuana registry in April, is the most recent. Other states, including Iowa, are studying the issue.

An Herbal Alternative

Brett Malone, of Shreveport, saw people suffering from AIDS complications and other chronic illnesses turn to marijuana for relief while he lived and worked in California.

Malone, now director of the Philadelphia Center in Shreveport, headed a residential program for homeless people with AIDS for four years. Every person in the program had a prescription for marijuana. Malone registered with California health officials as a caregiver, which allowed him to pick up the residents' marijuana prescriptions if they were too ill to leave the house.

"In California, people consulted with their doctors, who gave them a prescription," Malone said. "It was a health care decision. I look at it as similar to other herbal remedies. We saw three things: People stopped losing weight, their appetites improved and their moods improved and they didn't have to take as many pain medications."

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However, marijuana isn't an option for HIV-positive residents of a similar program operated by the Philadelphia Center. The drug remains illegal in Louisiana despite medical marijuana laws passed in 1978 and 1991.

ADVERTISEMENT In 1978, Louisiana lawmakers approved a bill, later signed by then-Gov. Edwin W. Edwards, that allowed marijuana prescriptions for glaucoma and cancer patients. An amendment in 1991 extended the provision to paralysis patients.

The original law set up the Marijuana Prescription Review Board, which was supposed to consider doctors' applications to treat patients with marijuana. However, the law didn't include a way for doctors or patients to get marijuana, and federal drug laws made it available only for research programs.

Medical marijuana use never got off the ground in Louisiana, and state officials dissolved the review board in 1989. Since 1991, there's been no public discussion in Louisiana about medical marijuana.

"No one has ever introduced any legislation or resolution," said state Rep. Richard Burford, R-Stonewall, a member of the House Health and Welfare Committee. "I would have to say there's no verbal interest. My first impression is I would not be in favor of that."

Louisiana officials take their cue from federal drug laws, which in 1970 classified marijuana as a drug with no medical purposes.



Marijuana plants being grown in Seattle. The drug is distributed to members of a cooperative of medical patients who have received doctor's authorization to use marijuana to treat illnesses such as AIDS and multiple sclerosis. Washington requires patients to grow marijuana themselves or designate a caregiver to grow it for them. (AP Photo/Ted S. Warren)

POTENTIAL BENEFITS

- May relieve nausea and vomiting caused by cancer chemotherapy.
- Might relieve pain caused by neuropathy.
- May ease muscle spasms and tremors in diseases like multiple sclerosis.
- Might counteract weight loss associated with AIDS and other diseases, in part, by stimulating appetite.

POTENTIAL DRAWBACKS

- May be psychologically addictive.
- Might cause lung problems like bronchitis.
- May contribute to cancer.
- Might interfere with short-term memory.
- Some people consider marijuana a "gateway" to harder drugs like cocaine and heroin.

**Malone****Molina**

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Malone noted that Louisiana isn't a direct-democracy state, meaning residents can't put up issues for a statewide vote. Only state lawmakers can propose law changes. Nine of the states that legalized medical marijuana are direct-democracy states and allow residents to propose ballot initiatives.

"I think it's going to take a lot of advocacy on the part of people who either use marijuana or advocate its use for medical purposes, people who are reputable, knowledgeable, law-abiding citizens," Malone said.

Peer Pressure

Lawmakers in other states, including Mississippi and Texas, are encouraging their colleagues to start a conversation on the subject.

Mississippi state Sen. Debbie Dawkins and Texas state Rep. Elliott Naishtat each has introduced medical marijuana bills four times in their respective state legislatures only to see the proposals die in committee without a hearing every time.

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Dawkins' bill would allow doctor-supervised use of marijuana by cancer, glaucoma and HIV patients, among others. It calls for the Mississippi Health Department to develop rules for prescribing and dispensing the drug.

ADVERTISEMENT "The more I travel and the more I'm away from Mississippi, I realize that this is something that is pretty much happening in the rest of the country," Dawkins said.

She plans to raise the issue again in February, when a newly formed legislative drug policy committee meets. Dawkins wants to have hearings on the issue. That would let doctors and patients testify about medical marijuana.

"If we have a hearing, (legislators) might actually learn about the issue."

A Medical Defense

Naishtat's bill would allow medical use of marijuana as an affirmative defense for people arrested on marijuana charges.

"It doesn't legalize anything," said Dorothy Browne, Naishtat's chief of staff. "You still get busted, you still go into court, but you can raise in your defense that you had a bona fide medical condition and that a physician had recommended to you that it might help.

"We will introduce the bill every time. Even if they don't vote it out of committee, just give the patients a hearing."

Lawmakers in another 14 states, including Iowa, are considering medical marijuana laws. The Iowa Pharmacy Board is conducting a series of hearings on the issue this fall and will make a recommendation to that state's legislature before the 2010 session.

Dr. Alan Koslow, a vascular surgeon in Des Moines, Iowa, was among those who spoke to the board. He treats patients with neuropathy, or nerve pain. Some studies indicate marijuana provides relief for neuropathy symptoms without the side effects of prescription narcotic painkillers.

"I'd say it's an 80 percent chance the (pharmacy) board is going to say 'yes' to it," Koslow said. "Then I'd say it's a 60 to 70 percent chance the Legislature would approve it."

Koslow first studied medical marijuana while researching a drug policy position paper during a run for the Iowa Legislature in 2008. This year, he said, contact with three former Iowa residents who use medical marijuana in California prompted him to testify at one of the Pharmacy Board hearings.

"I expected people who looked like stoners to testify. It wasn't. It was little old ladies and people with Parkinson's disease, people in wheelchairs. They looked like people in that painting 'American Gothic.' It was very, very powerful."

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