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EXECUTIVE VICE PRESIDENT, CEO

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May 14, 2019

The Honorable Carl E. Heastie
Speaker
New York State Assembly
LOB 932
Albany, NY 12248

Re: American Medical Association concern about legalization of cannabis for recreational use

Dear Speaker Heastie:

On behalf of the American Medical Association (AMA) and our physician and medical student members, I am writing to urge New York to delay initiating the legalization of cannabis for recreational (non-medicinal) use until further research is completed on the public health, medical, economic and social consequences of its use.

It is the AMA's position that the sale of cannabis for recreational use should not be legalized due to the uncertainty about the effect of recreational cannabis legalization on public health, as well as the impact of its use particularly in high-risk populations such as youth, pregnant women and women who are breastfeeding. To date, 10 states and the District of Columbia have legalized cannabis for recreational purposes. The AMA has encouraged these jurisdictions to take steps to regulate the product effectively, to protect public health and safety and to consistently evaluate applicable laws and regulations to ensure their effectiveness. Our experiences with other legal drugs (i.e., alcohol and tobacco) suggest that for-profit corporations will attempt to weaken regulations intended to protect health in order to maximize profits—resulting in significant public health harms.

The AMA also encourages local, state and federal public health agencies to improve surveillance efforts to ensure data is available on the short- and long-term health effects of cannabis use. This includes, but is not limited to the impact of legalization on patterns of use by adults, children and adolescents, and pregnant women; cannabis-related exposures and poisonings; cannabis-related hospitalizations and emergency department visits; cannabis-related treatment admissions; impaired driving and traffic fatalities; criminal activities; and governmental costs and revenue.

Early data from jurisdictions that have legalized cannabis demonstrate concerns particularly around unintentional pediatric exposures resulting in increased calls to poison control centers and emergency department visits, as well as an increase in traffic deaths due to cannabis-related impaired driving. While states have seen an increase in revenue through sales and excise taxes on retail cannabis, the administrative and enforcement costs, as well as the costs to society, in terms of public health and

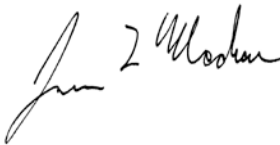
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safety should not be minimized. Due to these concerns, the AMA has encouraged states that have legalized cannabis to allocate a substantial portion of their cannabis tax revenue for public health purposes, including: the misuse of legal and illicit substances; substance misuse prevention and treatment programs for substance use disorders; cannabis-related educational campaigns; scientifically rigorous research on the health effects of cannabis; and public health surveillance efforts.

On medicinal cannabis use, the AMA believes that scientifically valid and well-controlled clinical trials conducted under federal investigational new drug applications are necessary to assess the safety and effectiveness of all new drugs, including potential cannabis products for medical use. The AMA supports efforts to ease current barriers to research by encouraging valid scientific and clinical research, expanding sources of research-grade cannabis and facilitating the commercial production of FDA-approved cannabinoid-based drugs. We are working closely with Congress to accomplish these goals. Furthermore, the AMA supports public health based strategies, rather than incarceration, in the handling of individuals possessing cannabis for personal use.

If you have any questions or would like to discuss further, please contact Daniel Blaney-Koen, JD, Senior Legislative Attorney, AMA Advocacy Resource Center, at daniel.blaney-koen@ama-assn.org or (312) 464-4954.

Sincerely,

A handwritten signature in black ink, appearing to read "Jim L Madara". The signature is written in a cursive, flowing style.

James L. Madara, MD

cc: Moe Auster