Connecticut Department of Consumer Protection Medical Marijuana Program Board of Physicians—Public Hearing Minutes June 7, 2017

Members Present: Michelle Seagull Commissioner

Dr. Godfrey Pearlson Dr. William Zempsky Dr. Linda Barry Dr. Mitchell Prywes Dr. Andrew Salner Dr. Jonathan Kost

Dr. Deepak Cyril D'Souza

DCP Staff Present: Xaviel Soto Health Program Supervisor

Karen Semmelrock Board Administrator

Call to Order

Commissioner Seagull called the meeting to order of the Board of Physicians for Connecticut's Medical Marijuana Program at 8:39 a.m. at the Department of Consumer Protection, 450 Columbus Blvd, Hartford, North conference room C/D.

Review and Approval of Prior Meeting Minutes

On a motion made by Dr. Zempsky and seconded by Dr. Salner, the draft minutes of the January 11, 2017 meeting are accepted.

Board of Physicians Introductions

Commissioner Seagull asked the Board members to briefly introduce themselves.

Status Report on Program Implementation

Commissioner Seagull reported that the program is growing. As of June 7, 2017, there were just under 700 physicians who are certifying patients. When the program first started, there were under 100 physicians. Also, the number of patients who have been certified in Connecticut has increased to 18,298. The Department continues to hear very meaningful and compelling stories from patients who have been helped by this program. Although it is still a relatively small number (under 50), the Department has begun seeing minor patients benefitting from the program.

In the research area, we have 2 approved research programs that are moving forward. Although the Department does not get regular updates from the researchers, we should receive the findings at the end of the studies. We have had other interest in the research aspect but we do not have any formal applications at this time.

The other significant update is that we are in the process of updating our regulations to do a number of different things. Much of this is in response to the law that was passed last legislative session, including the availability of the program for minors and the ability for research program. Also, APRNs are now able to certify and we need our regulations to reflect those changes. We are also making some other changes in response to our learning and growth in the program.

Discussion and Vote on Petitions to Add Debilitating Medical Conditions

At this meeting, the Board deliberated on the five petitions individually, applying the required criteria from the regulations to each. For each condition, the three questions posed in the regulations were reviewed by the physicians individually. The three questions posed in the regulations are as follows:

- 1. Is the medical condition, medical treatment or disease debilitating?
- 2. Is marijuana more likely than not to have the potential to be beneficial to treat or alleviate the debilitation associated with the medical condition, medical treatment or disease?
- 3. Are there other matters that seem relevant to the approval or the denial of the petition?

Commissioner Seagull invited the general public to speak on any of the conditions. Only two people had signed up to speak in regard to the condition Hydrocephalus.

• Anxiety Disorders

- o No testimony from patients or public. Discussion from the Board members only.
- Vote on qualifying criteria #1:
 - 4 yes and 3 no
- Vote on qualifying criteria #2:
 - 0 yes and 7 no.
- Vote on qualifying criteria #3:
 - No discussion

Vote to recommend to the Commissioner to add Anxiety Disorders to the list of debilitating medical conditions:

 The Board recommended against adding Anxiety Disorders to the list of debilitating conditions by a vote of 0 for and 7 against.

Hydrocephalus

 Testimony from Taylor Dudek and her mother Sheila Dudek. Miss Dudek shared her lifelong struggle with this condition and how it has impacted her life. She went through all the procedures, treatments and therapies she has tried. Her mother testified how difficult it is to watch her child suffer and there is nothing she can do to help her.

Discussion followed by Board members.

Vote on qualifying criteria #1:

- 7 yes, 0 no
- Vote on qualifying criteria #2:
 - 6 yes, 1 no
- Vote on qualifying criteria #3:
 - This condition will be recommended for adults.

Vote to recommend to the Commissioner to add Hydrocephalus to the list of debilitating medical conditions:

- The Board recommended adding Hydrocephalus to the list of debilitating conditions for adults only by a vote of 6 for and 1 against.
- o Condition to be narrowed to be Hydrocephalus with Intractable Headache.

• Menieres Disease

- o No testimony from patients or public. Discussion from the Board members only.
- Vote on qualifying criteria #1:
 - 7 yes, 0 no
- Vote on qualifying criteria #2:
 - 0 yes, 7 no
- Vote on qualifying criteria #3:
 - No discussion

Vote to recommend to the Commissioner to add Menieres Disease to the list of debilitating medical conditions:

 The Board recommended against adding Menieres to the list of debilitating conditions by a vote of 0 for and 7 against.

Migraines

- o No testimony from patients or public. Discussion from the Board members only.
- Vote on qualifying criteria #1:
 - 7 yes, 0 no
- Vote on qualifying criteria #2:
 - 6 yes, 1 no
- Vote on qualifying criteria #3:
 - No discussion

Vote to recommend to the Commissioner to add Migraines to the list of debilitating medical conditions:

- The Board recommended adding Migraines to the list of debilitating conditions for adults only by a vote of 6 for and 1 against.
- Condition to be narrowed to Intractable Migraines.
- o Dr. D'Souza asked that the statement from Christopher Gottschalk be noted. He is the head of the Headache Clinic at Yale and was asked for his thoughts on the use of medical marijuana for headaches in general. "I'm not aware of published RCTs for either condition or even any underway. The consensus in discussions with other HA program docs is that "no

one who uses MJ for migraine ever gets better". There is, of course, reason to think there could be benefit if studied properly-- CB1 and 2 are highly expressed in "pain matrix" neurons."

• Trigeminal Neuralgia

- o No testimony from patients or public. Discussion from the Board members only.
- Vote on qualifying criteria #1:
 - 7 yes, 0 no
- Vote on qualifying criteria #2:
 - 7 yes, 0 no
- Vote on qualifying criteria #3:
 - It was recommended for adults.

Vote to recommend to the Commissioner to add Trigeminal Neuralgia to the list of debilitating medical conditions:

• The Board recommended adding Trigeminal Neuralgia to the list of debilitating conditions for adults only by a vote of 7 for and 0 against.

There was a great deal of discussion about combining conditions under an "umbrella" term so that people aren't excluded because their specific condition is not listed. This was discussed at length in this meeting because both Hydrocephalus and Migraines are considered Intractable Headache Syndromes. It was decided that another public hearing would be held soon so the Board could consider broader medical conditions that would encompass some of the narrower conditions passed at this meeting. Legal counsel advised that proper notice must be given.

Commissioner Seagull noted to place on the agenda for the next meeting Intractable Headache Syndrome and Neuropathic Facial Pain.

Adjournment

Commissioner Seagull adjourned the meeting at approximately 10:22 a.m.

Next Meeting

Commissioner Seagull stated that another meeting will be scheduled soon to consider additional medical conditions that the Board wanted to raise on its own initiative.