

A petition filed by the Coalition for Rescheduling Cannabis in 2003 cited 220 journal articles to support moving cannabis to Schedule III, drugs with accepted medical use. — Journal of the American Medical Association, 8/20/03

The Medical Press Reports:

Marijuana, and cannabinoids in general, are acceptably safe in a vulnerable, immune-compromised patient population, and further study of the therapeutic potential of marijuana is warranted.— *Annals of Internal Medicine*, 8/19/03

48% of cancer specialists responding to a survey recommend marijuana medicine. — *Journal of Clinical Oncology*, 7/91

Cannabinoids were more effective than conventional antiemetics, especially where the emesis event rate was between 25% and 75%. — *British Medical Journal*, 7/7/01

"Marijuana relieves asthma attacks & loss of appetite... (&) can be... used to combat nausea... vomiting, epilepsy, muscle spasticity, anxiety, depression, pain, glaucoma, &... withdrawal from alcohol & narcotics." — *National Academy of Science, Marijuana & Health*, 6/82

One study found higher immune cell counts (CD4+ and CD8+) in patients who used cannabis than in those who did not, contradicting earlier studies' results. While the clinical significance and mechanism of this result are unclear, it may be related to a second recently discovered human cannabinoid receptor, found predominantly on B lymphocytes and natural killer cells. — *Annals of Internal Medicine*, 8/19/03

"The advanced stages of many illnesses and their treatments are often accompanied by intractable nausea, vomiting, or pain. Thousands of patients with cancer, AIDS, and other diseases report ... obtain(ing) striking relief from these devastating symptoms by smoking marijuana." — *New England Journal of Medicine* editorial, Dr. Jerome Kassirer



Doctors Speak Out For Marijuana Medicine:

"If you have people with terminal illnesses... and if this makes their lives better and their doctors feel it would benefit them; I have no problem with it." — **Dr. Jocelyn Elders, U.S. Surgeon General, 1993**

"The American Academy of Family Physicians [supports] the use of marijuana... under medical supervision and control for specific medical indications." — **AAFP Reference Manual, Selected Policies on Health Issues**

"Marijuana should be available for appropriate medicinal purposes." — **American Preventive Medical Association, Medicinal Uses of Marijuana policy statement**

The American Public Health Association passed a resolution in 1995 urging lawmakers to legalize medical marijuana, stating, "Cannabis/marijuana was wrongfully placed in Schedule I of the Controlled Substances Act (1970) depriving patients of its therapeutic potential..." A National Institutes of Health (NIH) panel at a 1997 Workshop on the Medical Utility of Marijuana found several valid medical uses for marijuana, acknowledging its broad spectrum relief for patients with AIDS or those undergoing chemotherapy. Britain's Select Committee on Science and Technology said in 1998, "We have ... enough evidence to convince us that a doctor might legitimately want to prescribe cannabis ... the ... law ought not to stand in the way."

"It's a sad fact that our federal government continues to base its marijuana laws on outright misinformation rather than on the best scientific evidence, even when the government itself paid for that research and analysis!" — **Bob Johnson, M.D., Kodiak**

ARE OUR LOVED ONES PATIENTS - OR PAWNS??

"Marijuana, in its natural form, is one of the safest therapeutically active substances known to man. By any... rational analysis, marijuana can be safely used within a... program of medical care... (There) is a legitimate need... for the relief marijuana can provide..." — **Francis Young, Drug Enforcement Administration Chief Law Judge, 1988**



"When our grown daughter was undergoing chemotherapy... she was sick and vomiting constantly... No legal drugs, including Marinol, helped her. We finally turned to marijuana. With it, she kept her food down, was comfortable and even gained weight. If doctors can prescribe morphine... it makes no sense to deny marijuana to... patients..." — **Lyn Nofziger, former deputy chair, Republican National Committee, letter, Washington Post, 11/17/97**

A Note on Drug Safety:

Some people say that medical marijuana should be approved by the Food & Drug Administration, like synthetic drugs, before being allowed. FDA approval costs millions of dollars. Only big pharmaceutical companies can pursue it, and only when they expect to make big profits. Marijuana, an herb, cannot be patented, and so is not profitable, in its natural state, to these companies. FDA approval is not an option.

Also, FDA approval does not guarantee safety! Over 20,000 Americans die annually using FDA-approved prescription and over-the-counter medicines in the correct dose and manner; 10,000 of them while hospitalized! The FDA often reverses approval of drugs already on the market, when they are seen to have side-effects which were not made known earlier (e.g., Vioxx™, hormone replacement therapy, "FenPhen" and dozens more).

After thousands of years of human use, there has never been a death, not even one, from marijuana. It is less toxic than aspirin.

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RIGHTS AND REVENUES
PO Box 92910
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How Do Millions of Sick People Spell 'R e l i e f'?



M-e-d-i-c-a-l M-a-r-i-j-u-a-n-a!

ALASKAN PATIENTS SPEAK OUT:

"I never thought I would be a medical marijuana user. Five years ago I developed multiple sclerosis. I have been doing my best to live with it. Marijuana helps me deal with frequent muscle spasms and painful tremors. Marijuana has enabled me to cope." — **Sherri Brown, Anchorage**

"The state obstructed the 1988 medical marijuana law, making it illegal for me to get marijuana. I shouldn't be treated like a criminal when getting my medicine." — **Jim Welch, Eagle River, former dogsled racer, multiple sclerosis**

"The system isn't working for me. I developed fibromyalgia, chronic hepatitis C, rheumatoid arthritis, and Epstein Barr Syndrome. The symptoms were agonizing. I needed help. The only medication that helps without painful side effects is marijuana, but no Alaska patient can get it legally." — **Savon Duchein, Palmer, former tourism industry worker, active community volunteer**

"Using medical marijuana took quite a bit of arguing with myself, I was disabled for 16 years as a result of a forklift accident. Movement was excruciating. Marijuana gave me relief from the pain and depression." — **Marty Keef, Girdwood, Retired U.S. Military Officer**

Help Build A More Compassionate World!



Fear and lies made *Cannabis* (marijuana; hemp) illegal after thousands of years of safe human use. The results? Millions arrested; hundreds of thousands jailed; sick people denied proven medicine; and the rich get richer...

Medical Marijuana History:

5000 B.C. *Cannabis* used medicinally in ancient Israel; discussed in world's first medical text, China. Roman surgeon Dioscorides describes medical use of *Cannabis*, **100 A.D.** Prophet Mohammed allows marijuana; forbids alcohol; herb's medical uses known to Arab world. Dr. W.B. O'Shaughnessy of Scotland visits India, studies *cannabis* medicine, **1841**. Queen Victoria's physician, Sir Reynolds, prescribes *cannabis*.

1937 *Cannabis* withdrawn from U.S. sale, against advice of the American Medical Association.

1970's Marijuana named Schedule I drug (dangerous; of no medical interest) by federal government. Legislation of 33 states recognizing marijuana's medical uses and asking to make it available blocked by feds.

1985 Marinol®, modeled on one component of cannabis, approved by Food & Drug Administration to treat nausea in chemotherapy patients; later (1992) for AIDS wasting syndrome. Many patients, however, prefer whole herb, which takes less time to work, can be easily self-controlled for dosage, and costs much less.

1990's Federal government, disregarding people's health, ends tiny "compassionate" medical marijuana program. California passes Prop. 215, legalizing medical marijuana there. Federal government threatens to revoke doctors' medical licenses; Drug Enforcement agents raid cannabis buyers' clubs; arrest sick people and caregivers.

Did You Know? Marijuana Can:

- Relieve pain of arthritis & rheumatism
- Reduce intraocular pressure & arrest the advance of glaucoma
- Reduce blood pressure and dilate blood vessels, reducing chances of heart attack or stroke
- Relieve migraine headaches
- Be useful in some psychotherapies, including those for stress, depression, & anorexia
- Reduce spasticity in multiple sclerosis, cerebral palsy, & paralysis
- Ease withdrawal from alcohol & other drugs, including nicotine
- Relieve menstrual cramps, PMS, and some symptoms of menopause
- Help asthma & emphysema patients breathe
- Relieve pain of *spina bifida*, muscle spasms, chronic pain, nerve pain, peripheral neuropathy, sickle cell anemia, & spinal injuries
- Alleviate nausea & pain of chemotherapy
- Help overcome insomnia
- Block epileptic seizures
- Help people with AIDS reduce pain, & fight "wasting syndrome" by stimulating appetite & reducing nausea

1998 - 2004 Alaska legislature guts medical marijuana initiative passed by voters. Voters and legislators in 8 more states and District of Columbia vote to allow medical marijuana; D.C. vote voided by Congress. Feds continue to prosecute and jail patients and providers. DEA tries to ban non-intoxicating hempseed foods, recognized as heart-healthy by FDA, until curbed by US Supreme Court. First new US cannabis research in 20 years begins at UC San Diego. In England, Sativex®, an extract of specially-grown marijuana, is approved for chronic pain, multiple sclerosis, and neurological conditions. US Supreme Court hears medical marijuana cases after Geo. Bush re-elected President, is not expected to favor states' rights to decide this issue.

2006?? Will sick and disabled Alaskans continue to be denied marijuana's time-tested medicine? **It's up to you!** Join Alaskans for Rights & Revenues today!

hempseed is



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Paid Taster No. 100... (Alcohol 0.0%)... 5.00



Buyers' Club Guide to Using Marijuana

"**Marijuana**" refers to flowers and resinous leaves of the Hemp plant, *Cannabis sativa*.

Smoking marijuana produces rapid effects and permits refined control of dosage by each user. Smoking anything is not good for the lungs, but the small amount of marijuana needed for relief should not be a big concern. Smoking the flowers rather than the leaves reduces the amount needed. Water pipes cool smoke and remove many toxins produced by burning. New vaporizers reduce toxic intake still further, maximizing medicinal effects.

Eating. Since active ingredients in marijuana are fat-soluble, the herb may be cooked gently in butter, then strained out, and the

butter used in cooking or baking many dishes. Or the whole herb, finely chopped, may be added directly to fresh or cooked foods. It takes longer to gain relief when marijuana is eaten, and may take longer to learn to control dosage. However, when effects are felt, they may be stronger than from smoking. Patients should plan to relax when eating marijuana.

Tea. Like other herbs, marijuana may be made into a tea. Boil water and pour it over cannabis leaves and flowers in a teapot. Let it steep for approximately an hour and a half. Add a teaspoon of butter. Effects of drinking marijuana tea are the same as when marijuana is eaten.

Tincture. To prepare a tincture, use 5 parts fresh marijuana to one part vodka, or 10 parts dried herb to one part vodka. Let stand for one week, then strain, reserving the liquid. Use as a liniment, or take 1 - 2 tablespoons orally. People who do not drink alcohol may stir the tincture into one-half cup boiling water, to evaporate the alcohol.

Compress. Make enough cannabis tea to thoroughly soak a cloth. Apply the warm, wet, wrung-out cloth to pain site for half an hour. Some people keep the wet leaf matter wrapped in the compress during use.

Side Effects. Marijuana was one of the first herbs used by humans, and is one of the safest. It is impossible to consume enough to produce a toxic reaction in the body. However, it can cause some temporary effects of which users should be aware, including uneasiness, hunger, thirst, reddened eyes, drowsiness or insomnia, short-term memory loss, or giddiness. Marijuana should not be used before a physical or eye examination, as it may obscure symptoms of disease.

Say 'Yes' to Medical Marijuana!

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A 1998 report commissioned by the White House Office of National Drug Control Policy, and prepared by the Institute of Medicine (IOM) is the most comprehensive, recent, U.S. government-sponsored appraisal of marijuana's physical effects, issued by the National Academy of Sciences/Institute of Medicine in 1999. Titled "Marijuana and Medicine: Assessing the Science Base", it is available online at: <http://bob.nap.edu/books/0309071550/html>.