Connecticut Department of Consumer Protection

Medical Marijuana Program - Public Act 12-55

Board of Physicians

Minutes

October 10, 2012

Members Present:	William M. Rubenstein	Commissioner
	Dr. Jonathan Kost	
	Dr. Godfrey Pearlson	
	Dr. Robert Siegel	
	Dr. David Greco	
	Dr. Deepak Cyril D'Souza	

DCP Staff Present:	Michelle Seagull	Deputy Commissioner
	Gary Berner	Legislative Program Manager
	Claudette Carveth	Director of Communications
	John Gadea, Jr.	Director of Drug Control
	Gerry Garcia	Chief of Operations
	Elisa Nahas	Legal Director
	Xaviel Soto	Health Program Associate
	Arsenio Martinez	IT Analyst
	Robert Moore	IT Analyst

Call to Order:

Commissioner Rubenstein called the meeting to order of the Board of Physicians for Connecticut's Medical Marijuana Program at 8:45am at the Department of Consumer Protection, 165 Capitol Avenue, Hartford, Room 119.

New Members:

Since the last meeting the board has added two new members to the Board of Physicians: Skype: David Greco, Neurologist & Dr. Cyril D'Souza who has done extensive research in the area of the effects of marijuana. A new staff member was also introduced to the Medical Marijuana Program, Maritsa Morales, Licensing and Applications Analyst whose responsibilities will include administering the registration system for physicians and patients and the licensing system for producers and dispensers.

Status Report on Program Implementation

As of October 1, 2012, DCP started to register patients under the program. The process starts with the physician's certification of the required elements on-line, once the physician enters the patient into the system and makes the right certifications, the patient then accesses the online system which includes identifying information so we can verify age and residency and make the registration fee payment. Once completed, cards will be issued.

As expected, the process during the first week began slowly, as physicians and patients get used to the system. Eight (8) patients have been certified by their physicians during the first week.

Discussion of Board Tasks:

- Develop regulatory structure for the program
- The degree of baseline information that would be useful for the board to have and where they might reach out to get this information.

Board members will forward information that they have found to be useful that could be distributed amongst each other to help provide some of the work knowledge. All material will be forwarded to John Gadea, Director of Drug Control who will put together a package then circulate out to the Board.

A primary duty of the board is to recommend whether or not there are other debilitating conditions that could also benefit from the palliative use of medical marijuana.

The legislature has sent out a minimum number of debilitating conditions and has tasked the Board of Physicians with considering those debilitating conditions that could be added to the list but has not tasked the board with subtracting from the list. To that end, the Board discussed:

- Scope of rules for the board to accept petitions from people who would like to expand the list.
- Identification of the information that the board thinks would be useful in evaluating petitions.

There was a discussion of the board's role in recommending additional debilitating conditions for which the palliative use of marijuana would be permitted.

Board members articulated a desire to see the extent of any scientific research that shows symptoms of the condition that might be palliated by the use of marijuana and the extent of benefits or detrimental effects from marijuana use, or particular dosages or compositions, in treating such symptoms. There was discussion of whether in making a recommendation, evaluation should be, in part, driven by looking to the symptoms being palliated for the statutorily defined conditions such as pain, nausea and spasticity and then determine whether the conditions under review typically drives those symptoms.

The discussion continued about the development of protocols for determining the amount of marijuana that would constitute a one month's supply. An ultimate goal would be to have sufficient data so that amount could be expressed in quantity of any active ingredients or chemical compounds rather than gross weight. While such protocols are being developed, it was

recommended that the Department of Consumer Protection look to ways to collect data in order to further research that could inform dosage issues, efficacy, usage protocols and consistency and replication of product attributes, among other scientific and medical questions.

All inquiries from the public regarding adding to the list of debilitating conditions that have already been received should be forwarded to John Gadea in order to get an appropriate response out. The statute states that the board will meet at least twice annually to consider petitions.

Adjournment:

Commissioner Rubenstein adjourned the meeting at approximately 9:55am.

Next Meeting:

Scheduled for Wednesday, November 14, 2012 @ 8:30am, Room 119.