



August 18, 2017

Members of the Standing Committee on Health  
Sixth Floor, 131 Queen Street  
House of Commons  
Ottawa ON K1A 0A6  
Canada

**Subject: Bill C-45 (The Cannabis Act)**

Dear Honourable Members,

On behalf of The Arthritis Society and Canadians for Fair Access to Medical Marijuana (CFAMM), thank you for the opportunity to provide input on your Committee's review of Bill C-45, *An Act respecting cannabis and to amend the Controlled Drugs and Substances Act, the Criminal Code and other Acts* (The Cannabis Act).

As the federal government prepares to legalize and regulate cannabis for non-medical use by July 2018, we applaud it for recognizing the need to have a separate and distinct regulatory approach for medical cannabis. Having a separate medical cannabis regime is essential for the thousands of Canadian patients that have ongoing unmet needs with regard to access, information, affordability, and research.

Our submission highlights some of the challenges that patients face in the existing regulatory approach to medical cannabis, and provides recommendations to help inform and support your efforts to create an appropriate regulatory framework for cannabis – one that prioritizes and adequately supports the needs of patients.

Here is a summary of our recommendations:

- 1) **Enable pharmacy distribution:** Pharmacies should have exclusive authority to retail medical cannabis. This will create a clear distinction between medical cannabis and cannabis for recreational/non-medical use and help ensure that patients receive reliable education on the safe and effective use of medical cannabis from trained health care professionals. For this to happen, the *Access to Cannabis for Medical Purposes Regulations (ACMPR)* will need to be amended to enable pharmacy distribution.
- 2) **Remove sales tax for medical cannabis:** Medical cannabis should be exempt from sales tax and other levies. This will ensure that it is treated as other therapeutic products intended to manage peoples' illnesses, and does not preclude the government from levying taxes on non-medical/recreational cannabis.
- 3) **Facilitate insurance coverage:** Many existing public and private health insurance plans are reluctant to cover the costs of medical cannabis treatment because it is not viewed as a drug

under existing regulations. The federal government should ensure that medical cannabis is authorized as a therapeutic product and that it is eligible for a drug identification number (DIN) to facilitate reimbursement by health insurance plans.

- 4) **Invest in medical cannabis research:** There is an enormous deficit of properly funded research and Canadian clinical trials into the therapeutic use of medical cannabis. This has created substantial access barriers for patients. To that end, we are asking the federal government to commit \$25 million over five years to support medical cannabis research.
- 5) **Patient education:** Patients should be educated about how to access medical cannabis and have evidence-based information about its use and forms.

## **BACKGROUND**

There are upwards of 170,000 patients that use cannabis for medical purposes in Canada. Under the guidance of a health care provider, patients use medical cannabis to manage their symptoms from a variety of illnesses, including arthritis, HIV/AIDS, epilepsy, multiple sclerosis, and cancer. Although there is still much to learn, there is substantial evidence to support that cannabis is effective in the treatment of a wide variety of symptoms, including chronic pain.<sup>1</sup>

Arthritis patients resoundingly identify pain as the dominant chronic symptom of arthritis and are keenly exploring ways to manage their pain. The disease impacts over 4.6 million Canadians in many forms. Nearly 3 out of 5 people living with arthritis are working age (2.75 million people in total). While there is no cure for the disease, there are a range of effective treatments that can help patients manage their pain and lead productive lives. One of those treatments is medical cannabis.

People who live with arthritis increasingly rely on medically prescribed cannabis to help manage the inflammation and pain associated with the disease. In fact, according to Health Canada, 65% of patients authorized to possess medical cannabis were diagnosed with “severe arthritis” as of June 2013, and this remains a significant group for medical cannabis under the current regulations.

## **RECOMMENDATIONS**

### **1) Enable pharmacy distribution**

Once authorized to use medical cannabis by a physician or nurse practitioner, many patients face ongoing difficulties accessing an affordable, regulated, and tested supply of medical cannabis. The current regulatory system is a patchwork of regulations that are difficult for patients to understand and navigate. At the moment, there are two legal ways for patients to obtain medical cannabis: (1) via mail order from a licenced producer that meets a number of safety and quality assurance requirements; or (2) by growing their own supply of medical grade cannabis or designating someone to grow it for them.

While both of the current non-retail distribution options have their merits and should remain in place, we believe that the most coherent and responsive approach to addressing the needs of patients would be through a formal retail channel for medical cannabis that is easier to access and navigate. To that end, we believe that pharmacies are best suited for this purpose, and should have the exclusive authority to sell and distribute medical cannabis in the provinces.

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<sup>1</sup> US National Academies of Science, Engineering, and Medicine, [The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research](#), 2017

This is so for a number of important reasons, including:

- As knowledgeable health care professionals, pharmacists are capable of providing the necessary level of support and on-site information to patients about their medicine.
- Pharmacies would be able to monitor supply issues and help patients manage any potential supply disruptions.
- Pharmacy distribution would expand the potential for broader cost-coverage, increasing the affordability of medical cannabis to patients.
- Pharmacies have the requisite regulatory and professional oversight and quality assurance procedures.

To enable pharmacy distribution in provinces and territories that have selected to use this distribution channel for medical cannabis, it is vital that the federal government amend the *Access to Cannabis for Medical Purposes Regulations (ACMPR)*, to allow licensed producers to ship cannabis to pharmacies. This will improve accessibility for patients and provide them with the clinical support they need.

## **2) Remove sales tax for medical cannabis**

Patients who access medical cannabis should be treated consistently and equitably with other patients who access health products to support their health and manage their illnesses. Prescription medicines are not subject to tax, therefore medically prescribed cannabis should also be exempt from sales tax and any other levies. This does not preclude the government from levying sales tax on cannabis for recreational /non-medical purposes and would underscore a clear distinction between medical cannabis and cannabis used for non-medical purposes.

## **3) Facilitate insurance coverage**

Affordability of medical cannabis is a major concern for many patients, as they cannot make use of existing policies and programs that can help address the costs of their medicine. Based on the average current pricing and dosage, medical cannabis patients, many of whom are on fixed incomes, bear costs upwards of \$500/month.<sup>2</sup> These expenses are often in addition to the other health expenses borne by patients. At the moment, many public and private health insurance plans are reluctant to cover the costs of medical cannabis because of its nebulous status under existing regulations. The federal government should ensure that medical cannabis is authorized as a therapeutic product so it can receive a drug identification number (DIN), and therefore improve its eligibility for coverage under public and private health insurance plans. Failure to address affordability concerns may undermine incentives for patients to seek a regulated supply of medical cannabis.

## **4) Invest in medical cannabis research**

Although Health Canada has permitted access to medical cannabis authorized by a physician for a number of years, there remains an enormous deficit of properly funded research and Canadian clinical trials into its use. This creates barriers to patient access as many physicians express reluctance to authorize medical cannabis in the absence of robust, peer-reviewed research. The lack of scientific and clinical research on medical cannabis has also been cited by Health Canada as a key reason why

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<sup>2</sup> Calculation based on Health Canada published average dose of (~2 g/day) and average market pricing (\$8.50/g).

medical cannabis is not regulated as a therapeutic product.<sup>3</sup> As mentioned above, this has affected the ability of patients to access medical cannabis through their public, private or employer-sponsored health plans. Investment in medical cannabis research will help address many of these issues. It will also contribute to raising Canada's competitiveness and productivity – two current government priorities – in the following ways:

- *Competitiveness*: medical cannabis research will help address Canada's lagging research competitiveness – a conclusion from the 2017 Naylor report<sup>4</sup> – by unlocking Canada's potential to become a leading center of research in this important and emerging therapeutic area.
- *Productivity*: increased research funding for medical cannabis will optimize the use of the therapy for the over 2.75 million working age people in Canada who live with arthritis. This will allow patients to better manage their pain and, consequently, participate more fully in the workforce. It will also address the impact of arthritis on the Canadian economy – an estimated \$33 billion each year on health care costs and lost productivity.<sup>5</sup>

To that end, we recommend that the federal government actively support medical cannabis research by investing \$25 million over the next five years. This money should be allocated to support fundamental, clinical and health service and policy research.<sup>6</sup> We have also made this recommendation to the Standing Committee on Finance and the government in the context of Budget 2018.

## 5) Support patient education

Education is key to supporting patients to develop an appropriate care plan in collaboration with their healthcare provider. The government should engage in a public education campaign to educate patients about how to access medical cannabis, understand whether they are accessing medical cannabis that has been regulated for safety, potency and quality, and be provided with evidence-based information about its different forms (e.g., oil, dried flowers, food, etc.), appropriate dosages, and interactions with other elements of a patient's treatment plan. Patient education should be supported by an oversight framework that includes packaging, labeling, testing, storage and handling of medical cannabis as it makes its way from production to distribution to patients.

## CONCLUSION

The federal government has an important opportunity to address the current challenges patients face regarding medical cannabis. The government's approach to medical cannabis needs to be coherent, equitable and patient-centered. The patient community is an invaluable resource for the federal government as it works to develop its regulatory approach to cannabis. We appreciate the opportunity to provide our input into this important process and look forward to further dialogue on these matters.

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<sup>3</sup> [Marihuana for Medical Purposes Regulations](#), Canada Gazette II, Vol. 146, No. 50, December 15, 2012

<sup>4</sup> Naylor et al., [Investing in Canada's Future: Strengthening the Foundations of Canadian Research](#), 2017

<sup>5</sup> Arthritis Alliance of Canada, [The Impact of Arthritis in Canada: Today and over the next 30 years](#), 2011

<sup>6</sup> For more details on our research ask, please refer to our 2018 pre-budget submission, available from: <https://cfamm.ca/wp-content/uploads/2017/08/Arthritis-Society-and-CFAMM-2018-pre-budget-submission-Final.pdf>

**Respectfully submitted by:**

The Arthritis Society  
Janet Yale, President & CEO  
393 University Avenue, Suite 1700  
Toronto, ON M5G 1E6  
Phone: (416) 979-7228 / Toll-Free: 1-800-321-1433  
Email: [info@arthritis.ca](mailto:info@arthritis.ca)

Canadians for Fair Access to Medical Marijuana (CFAMM)  
Jonathan Zaid, Founder/Executive Director  
50 Westmount Road North  
PO Box 22009, Westmount PO  
Waterloo, Ontario, N2L 6J7  
Phone: (416) 837-5972  
Email: [jzaid@cfamm.ca](mailto:jzaid@cfamm.ca)

**ABOUT**

**The Arthritis Society** is Canada's principal health charity providing education, programs and support to the over 4.6 million Canadians living with arthritis. The Arthritis Society conducts research to better understand the impact of arthritis, advocates for progressive arthritis policies, works with stakeholders to promote appropriate standards of care and deliver educational programs to empower those living with arthritis to self-manage their disease.

**Canadians for Fair Access to Medical Marijuana (CFAMM)** is a national, non-profit, patient-run organization dedicated to protecting and improving the rights of medical cannabis patients. Founded in 2014, CFAMM's goal is to enable patients to obtain fair and safe access to medical cannabis with a special focus on affordability, including private and public insurance coverage.