

TO: The Honorable Members of the Senate Health & Human Services Committee
 FROM: Amanda Bent, Policy Manager, Drug Policy Alliance
 DATE: January 31, 2019
 RE: Support for SB19-013

In keeping with our vision of advancing drug policies grounded in science, compassion, health and human rights, the Drug Policy Alliance (DPA) urges you to vote favorably on SB19-013. The primary purpose of this bill is to help curb the overdose crisis in Colorado by fully leveraging the evidence-based harm reduction potential of medical marijuana.

The CDC estimates that there are over 50 opioid prescriptions for every 100 people in Colorado. In 2017 alone, there were over 1000 drug overdose deaths in our state—roughly one death every 9 hours and more than in any previous year.ⁱ These deaths are preventable. Over half of Colorado's overdose deaths involve opioids.ⁱⁱ And while the overall statewide rate of drug overdose deaths seems to be leveling off,ⁱⁱⁱ rates of prescription opioid overdose increased by 13 percent from 2016-2017.^{iv}

SB19-013 will give many Coloradans who would otherwise be treated with opioids the opportunity to seek an alternative with fewer side effects and less risks. Those who wish to avoid, minimize or reduce their use of opioids should be supported by having medical marijuana as an option. Those with a known history of opioid dependence or who are otherwise concerned about using opioids due to negative side effects or a history of addiction in their families should be able to seek alternative relief for pain or any other conditions where a doctor would prescribe opioids.

In order to effectively curb opioid use, dependence, and overdose deaths, Colorado can take steps to ensure that medical marijuana is a more viable option for any patients who may otherwise utilize opioids. A growing body of research shows that:

- People who use medical marijuana find that it is a lower-risk alternative to opioids, has fewer harmful side effects, helps manage pain symptoms and lowers likelihood of withdrawal symptoms.^v
- Marijuana is a non-opioid alternative that can relieve pain with lower risk of addiction and virtually no risk of overdose.^{vi}
- As documented in a 2018 Harvard Medical School study, marijuana can be effective for treating pain from injury and surgery while also reducing opioid intake.^{vii}
- Broader access to medical marijuana prevents overdose deaths by facilitating substitution of marijuana for powerful and addictive opioids.^{viii}
- Prescriptions for opioids tend to decrease significantly when medical marijuana is available.^{ix} By making medical marijuana more readily available – specifically making it explicitly available for cases where opioids are otherwise being commonly used – we can optimize this harm reduction phenomenon here in Colorado.

Other states such as New York, Missouri, Pennsylvania, New Jersey and New Mexico are addressing opioid harm reduction through their medical marijuana programs and it is under consideration in additional states. Colorado should move forward without delay. It is important to note that this bill does not facilitate unfettered medical marijuana access, nor does it force health providers to recommend marijuana or require any patients to utilize it. Opioids will remain an important tool in the medical arsenal, but their benefits must always be weighed against the risks. This bill simply creates a mechanism for patients who would commonly be treated with opioids to consider an alternative.

DPA believes that public health advocates and lawmakers can collaborate successfully on reasonable, humane and effective solutions to the overdose crisis. By allowing patients who would otherwise be treated with opiates to have the option of accessing medical marijuana instead, many Coloradans can reduce or discontinue their use of opioids and many will avoid ever taking them in the first place. This has the potential to save countless lives. Please vote YES on SB19-013.

ⁱ Centers for Disease Control and Prevention. (2018, Dec 19). Drug Overdose Deaths <https://www.cdc.gov/drugoverdose/data/statedeaths.html>, Colorado Health Institute. (2018, April). Death By Drugs <https://www.coloradohealthinstitute.org/research/death-drugs>

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- ⁱⁱ Kaiser Family Foundation. (2018). Opioid Overdose Deaths and Opioid Overdose Deaths as a Percent of All Drug Overdose Deaths, 2016. <https://www.kff.org/other/state-indicator/opioid-overdose-deaths/?currentTimeframe=0&sortModel=%7B%22colld%22:%22Location%22,%22sort%22:%22asc%22%7D>
- ⁱⁱⁱ Centers for Disease Control and Prevention. (2018, Dec 19). Drug Overdose Deaths <https://www.cdc.gov/drugoverdose/data/statedeaths.html>, Colorado Health Institute. (2018, April). Death By Drugs <https://www.coloradohealthinstitute.org/research/death-drugs>
- ^{iv} Centers for Disease Control and Prevention. (2019, Jan 4). Drug and Opioid-Involved Overdose Deaths — United States, 2013–2017. *Morbidity and Mortality Weekly Report (MMWR)*, 67(5152): 1419-1427. <https://www.cdc.gov/mmwr/volumes/67/wr/mm675152e1.htm>
- ^v Reiman (2009, Sept). Cannabis as a substitute for alcohol and other drugs. *Harm Reduction Journal*, 6 (35): <https://doi.org/10.1186/1477-7517-6-35>, Lucas et al. (2012, Nov). Cannabis as a substitute for alcohol and other drugs: A dispensary-based survey of substitution effect in Canadian medical cannabis patients. *Addiction Research & Theory*, 21, 435–442.
- ^{vi} Wen & Hockenberry. (2018, April) Association of medical and adult-use marijuana laws with opioid prescribing for Medicaid enrollees. *JAMA Internal Medicine*, doi:10.1001/jamainternmed.2018.1007
- ^{vii} Heng et al. (2018, Jan). Patient perceptions of the use of medical marijuana in the treatment of pain after musculoskeletal trauma: A survey of patients at 2 trauma centers in Massachusetts. *Journal of Orthopaedic Trauma*, 32(10), e25-e30.
- ^{viii} Powell et al. (2018, March). Do medical marijuana laws reduce addictions and deaths related to painkillers? *Journal of Health Economics*, 58, 29-42.
- ^{ix} Bradford et al. (2018, April). Association between US state medical cannabis laws and opioid prescribing in Medicare Part D population. *JAMA Internal Medicine*, doi:10.1001/jamainternmed.2018.0266

Medical Marijuana as an Alternative to Opiates: Curbing the Overdose Crisis in Colorado

We are
the Drug
Policy
Alliance.

January 2019

Colorado loses another community member to overdose roughly every 9 hours with opioids contributing to more than half of those deaths. Many of these tragedies are preventable. Comprehensive access to medical marijuana for patients who would otherwise be prescribed an opiate will save lives.

**VOTE YES
ON SB19-013**

Vote YES on SB19-013

In order to effectively curb opioid use, dependence, and overdose deaths, Colorado can take steps to ensure that medical marijuana is a viable option for *all* patients who may otherwise utilize opiates/opioids. Research shows that broader access to medical marijuana allows such patients to more readily seek a safer alternative.¹ A 2018 Harvard Medical School study surveying 500 trauma patients found medical marijuana to be effective at alleviating postinjury and postoperative pain while reducing opioid intake.² SB19-013 will allow physicians to recommend medical marijuana for any condition for which they could prescribe an opiate. This will provide the opportunity for more patients to seek a therapeutic alternative that has fewer side effects and less risks.

Better access to medical marijuana reduces opioid-related harm

We can do more to ensure that patients who are being routinely prescribed opioids have better access to medical marijuana as a lower-risk alternative. The CDC estimates that there are over 50 opioid prescriptions for every 100 people in Colorado.³ While medical marijuana access is already associated with reduced opioid overdose mortality and fewer dependence or abuse-related hospitalizations in our state,⁴ opioid overdose deaths continue to be an alarming problem. Current law only allows patients with severe pain associated with a chronic or debilitating disease or medical condition to qualify for medical marijuana, but many Coloradoans who struggle with opioid dependency or other dangerous opioid side effects begin their use with a prescription to treat pain associated with an injury or medical procedure.

Colorado must reduce needless overdose deaths

In recent years, Colorado has made strides in establishing and improving access to vital harm reduction services such as naloxone distribution to prevent needless overdose deaths. But our communities still experience far too many tragedies. In 2017 alone, there were over 1000 drug overdose deaths in our state—roughly one death every 9 hours and more than in any previous year.⁵ Over half of Colorado's overdose deaths involve opioids.⁶ And while the overall statewide rate of drug overdose deaths seems to be leveling off,⁷ rates of prescription opioid overdose increased by 13 percent from 2016-2017.⁸ SB19-013 can help curb this crisis.

Providing a viable alternative to opioids will save lives

Opioids are an important tool in the medical arsenal, but their benefits must be weighed against the risks. Medical marijuana is another important tool available in this state, and patients as well as doctors deserve better access to this safer alternative. By establishing access to medical marijuana for any condition for which a physician could prescribe an opiate, many Coloradans can reduce or discontinue their use of opioids and many will avoid ever taking them in the first place. This has the potential to save countless lives. **Vote YES on SB19-013.**

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- ¹ Powell et al. (2018, March). Do medical marijuana laws reduce addictions and deaths related to painkillers? *Journal of Health Economics*, 58, 29-42.
- ² Heng et al. (2018, Jan). Patient perceptions of the use of medical marijuana in the treatment of pain after musculoskeletal trauma: A survey of patients at 2 trauma centers in Massachusetts. *Journal of Orthopaedic Trauma*, 32(10), e25-e30.
- ³ Centers for Disease Control and Prevention. (2017, July 31). U.S. State Prescribing Rates, 2017. <https://www.cdc.gov/drugoverdose/maps/rxstate2017.html>
- ⁴ Drug Policy Alliance. (2018, Jan 22). From Prohibition to Progress: A Status Report on Marijuana Legalization <http://www.drugpolicy.org/legalization-status-report>
- ⁵ Centers for Disease Control and Prevention. (2018, Dec 19). Drug Overdose Deaths <https://www.cdc.gov/drugoverdose/data/statedeaths.html>, Colorado Health Institute. (2018, April). Death By Drugs <https://www.coloradohealthinstitute.org/research/death-drugs>
- ⁶ Kaiser Family Foundation. (2018). Opioid Overdose Deaths and Opioid Overdose Deaths as a Percent of All Drug Overdose Deaths, 2016. <https://www.kff.org/other/state-indicator/opioid-overdose-deaths/?currentTimeframe=0&sortModel=%7B%22colId%22:%22Location%22,%22sort%22:%22asc%22%7D>
- ⁷ Centers for Disease Control and Prevention. (2018, Dec 19). Drug Overdose Deaths <https://www.cdc.gov/drugoverdose/data/statedeaths.html>, Colorado Health Institute. (2018, April). Death By Drugs <https://www.coloradohealthinstitute.org/research/death-drugs>
- ⁸ Centers for Disease Control and Prevention. (2019, Jan 4). Drug and Opioid-Involved Overdose Deaths — United States, 2013–2017. *Morbidity and Mortality Weekly Report (MMWR)*, 67(5152): 1419-1427. <https://www.cdc.gov/mmwr/volumes/67/wr/mm675152e1.htm>

Medical Marijuana & Opioid Harm Reduction Reference List

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- Abrams, et al. (2011). Cannabinoid-Opioid interaction in chronic pain. *Clinical Pharmacology & Therapeutics*, 90(6), 844–851.
- Aggarwal (2013, Feb). Cannabinergic pain medicine: a concise clinical primer and survey of randomized-controlled trial results. *The Clinical Journal of Pain*, 29(2), 162–171.
- Bachhuber et al. (2014). Medical marijuana laws and opioid analgesic overdose mortality in the United States, 1999–2010. *JAMA Internal Medicine*, 174(10), 1668–1673.
- Boehnke et al. (2016, June). Medical cannabis use is associated with decreased opiate medication use in a retrospective cross-sectional survey of patients with chronic pain. *The Journal of Pain: Official Journal of the American Pain Society*, 17(6), 739–744.
- Bradford et al. (2018, April). Association between US state medical cannabis laws and opioid prescribing in Medicare Part D population. *JAMA Internal Medicine*, doi:10.1001/jamainternmed.2018.0266
- Bruce et al. (2018, Feb). Preferences for medical marijuana over prescription medications among persons living with chronic conditions: Alternative, complementary, and tapering uses. *Journal of Alternative and Complementary Medicine* 24(2), 146–153.
- Castlight Health. (2016). *Report: The Opioid Crisis in America's Workforce*. Retrieved from: <http://www.castlighthealth.com/typ/the-opioid-crisis/> xiii
- Degenhardt et al. (2015). Experience of adjunctive marijuana use for chronic non-cancer pain: Findings from the Pain and Opioids IN Treatment (POINT) study. *Drug and Alcohol Dependence*, 147, 144–150.
- Drug Policy Alliance. (2018, Jan 22). *From Prohibition to Progress: A Status Report on Marijuana Legalization* Retrieved from <http://www.drugpolicy.org/legalization-status-report>
- Haroutounian et al. (2016, Dec). The effect of medicinal cannabis on pain and quality-of-life outcomes in chronic pain: A prospective open-label study. *The Clinical Journal of Pain*, 32(12), 1036–1043.
- Heng et al. (2018, Jan). Patient perceptions of the use of medical marijuana in the treatment of pain after musculoskeletal trauma: A survey of patients at 2 trauma centers in Massachusetts. *Journal of Orthopaedic Trauma*, 32(10), e25–e30.
- Liang et al. (2018, July). Medical cannabis legalization and opioid prescriptions: evidence on US Medicaid enrollees during 1993–2014. *Addiction*, 113(11), 2060–2070.
- Livingston et al. (2017, Nov). Recreational cannabis legalization and opioid-related deaths in Colorado, 2000–2015. *American Journal of Public Health*, 107(11), 1827–1829.

CONTINUED

- Lucas et al. (2012, Nov). Cannabis as a substitute for alcohol and other drugs: A dispensary-based survey of substitution effect in Canadian medical cannabis patients. *Addiction Research & Theory*, 21, 435–442.
- Lucas et al. (2016, May). Substituting marijuana for prescription drugs, alcohol and other substances among medical marijuana patients: The impact of contextual factors. *Drug and Alcohol Review* 35(3):326-33.
- National Academies of Sciences, Engineering, and Medicine (2017). *The Health Effects of Cannabis and Cannabinoids: Current State of Evidence and Recommendations for Research*. Washington, DC: The National Academies Press. Retrieved from <https://www.ncbi.nlm.nih.gov/books/NBK423845/>
- Powell et al. (2018, March). Do medical marijuana laws reduce addictions and deaths related to painkillers? *Journal of Health Economics*, 58, 29-42.
- Reiman (2009, Sept). Cannabis as a substitute for alcohol and other drugs. *Harm Reduction Journal*, 6 (35): <https://doi.org/10.1186/1477-7517-6-35>.
- Shi (2017, April). Medical marijuana policies and hospitalizations related to marijuana and opioid pain reliever. *Drug & Alcohol Dependence*, 173, 144–150.
- Smith (2017, Aug). The Effects of Medical Marijuana Dispensaries on Adverse Opioid Outcomes. Social Science Research Network. Retrieved from <https://papers.ssrn.com/abstract=3012381>
- Wen & Hockenberry. (2018, April). Association of medical and adult-use marijuana laws with opioid prescribing for Medicaid enrollees. *JAMA Internal Medicine*, doi:10.1001/jamainternmed.2018.1007