

Medical Marijuana  
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Sensible minds are prevailing over the issue of medical marijuana in Durango, throughout Colorado and in fourteen other states. The shroud of illegitimacy is lifting, being replaced by compassion for the hundreds of thousands who find relief from pain and debilitating disease not reached by chemical pharmaceuticals and standard medical therapy.

On November 7, 1999, Colorado passed Amendment 20 to the state constitution, permitting the use of marijuana for the treatment of specified, disabling medical conditions. Regulating the lawful use of cannabis was turned over to the Colorado State Board of Health, then the Colorado Department of Public Health and Environment, which in turn established the Medical Marijuana Registry Program within the Department of Vital Statistics. "Effective June 1, 1999," Amendment 20 reads, "it shall be an exception from the state's criminal laws for any patient or primary care-giver in lawful possession of a registry identification card to engage or assist in the medical use of marijuana ...."

With a number of storefront medical marijuana dispensaries now open in Durango and more in the making, law enforcement and municipal and county governments are accepting of the volumes of testimony from patients and health providers that this ancient herb is indeed a palliative if not a curative, natural pharmaceutical. The concerns have legitimately turned toward suitable and fair regulation and transparency, similar to scrutiny applied to pharmacies, health clinics and alcohol sales.

Among all the discussions and policy making, the focus has inevitably taken no notice of the patients themselves and the stunning beneficial effects cannabis is having on a variety of infirmities. The patient cannot be excluded from bricks-and-mortar policy, as the baby must not be poured out with the bathwater.

Bill Delany, a sixty-year-old businessman living in Pagosa Springs, is one of only two certified medical marijuana patients interviewed for this article who was willing to have his full name used. They, as all cardholders, fearing criminal reprisal and social disapprobation until both recently decided that their practical experiences were too material not to be known and bring discernment to the public discourse. Delany suffers from severe Crohn's disease, an inflammatory bowel disease that presents with abdominal pain, chronic diarrhea and malnutrition, leading possibly death.

"After 10 years, three operations and literally hundreds of thousands of

dollars in prescription drugs, I've pretty much given up on traditional medicine's ability to help me," says Delany, a serious man with sensorial appearance. "They term my disease incurable, so I decided to seek out people who are more optimistic about the healing powers of one's body and mind and this led to much research and thousands of dollars spent on supplements and treatments. In January 2009 I decided to apply for medical marijuana and it has been the single most important ingredient in the search for stability within my body. Now I feel that a healing process has begun rather than just pouring more caustic prescription drugs into an already inflamed system," he says with renewed vigor and promise. "It has also allowed me to relax more and to think less about my disease. The power of the mind and a positive attitude are also a huge part of the healing process, and marijuana, fortunately, also facilitates these ends."

Qualifying medical conditions for legal use of marijuana include: chronic pain; chronic nausea; AIDS; cancer; glaucoma; hepatitis; chronic muscle spasms and other spastic disorders, such as multiple sclerosis; seizure disorders, such as epilepsy; gastrointestinal disorders, such as Irritable Bowl Syndrome, Crohn's disease and the inability to eat; or patients who have medical conditions that cause one of these conditions. As research continues and criminal consequences dematerialize, medicinal use of the properties of cannabis may spread to many more diseases and conditions. A pioneer in the field, Aamann Degarth, currently doing research in Durango, feels strongly that with the right dose of THC, the psychoactive ingredient in marijuana, mixed with other known healing herbs, cancer can be stopped or cured.

Sherry Smith suffers from multiple sclerosis (MS), a potentially fatal idiopathic autoimmune disease, meaning that the cause is unknown and affliction can occur spontaneously. It attacks the central nervous system, interfering with the ability of the nerve cells in the brain and spinal cord to communicate with each other. There is no known cure. Typically progressive, symptoms include numbness, impaired muscular coordination and speech, blurred vision and severe fatigue. With MS, the body's immune system attacks the protective covering of the long fibers called axons that conduct electrical signals from the brain to the body parts.

"I've been disabled with MS for so long that I got to the point where I didn't know which was worse, the dozens of medications prescribed by my doctors or the disease itself," reports Smith. "About three years ago, after reading about medical marijuana, I applied for my certificate for no other reason than I had nowhere else to turn; my prescription drugs were making me depressed and sick in other ways and not helping me whatsoever with the reason I was taking them in the first place. Now," says Smith, "I take hemp oil capsules three times a day, which completely controls my muscle spasticity and pain, and then supplement,

when necessary every once in a while, with smokable herb." Smith reports that after being on this therapy now for two years, her MS has almost completely disappeared.

Dr. Sean Devlin is a primary care physician practicing at Sonas Integrative Medical Center, LLC in Durango. Dr. Devlin is the only physician willing to interview for this article. "When I was in college and medical school, I wouldn't even be around anyone using marijuana; I was against recreational drug use, and I still am for the most part because it can inhibit motivation," Devlin submits. "While treating cancer patients back in 1999, though, I found a number of them were smoking pot and finding relief they hadn't experienced with traditional drugs. I did research," Devlin says, "and discovered that the body produces cannabinoids, which are structurally related to tetrahydrocannabinol, or THC, the psychoactive ingredient in marijuana. I found this connection of cannabis to our endocannabinoid system and their receptors that influence appetite and pain-sensation," continues Devlin, "and that's when I started seeing how effective this organic, herbal remedy was."

Douglas Shrock is a model rocket designer and science fiction artist living and working in Pagosa Springs. He was diagnosed with Parkinson's disease in 2002. "My medication was costing \$3,000 a month, with little to show but nausea," Shrock says. "I got my medical marijuana card after seeing some relief from the prescription Marinol, a synthetic THC, and wanted a cheaper and more controllable self-medication." Shrock self-medicates with marijuana and has his condition under control. He occasionally experiments by not medicating for a week, and the symptoms return.

One medical marijuana patient, a middle-aged female who wishes to remain anonymous but permitted the use of Lynn, her middle name, suffers to the point of exhaustion from Cyclic Vomiting Syndrome (CVS) and Irritable Bowel Syndrome. "I don't know how this started, but since I've been thirteen-years-old my digestive system bothered me and about twelve years ago I began vomiting, sometimes so hard I thought I'd throw up my shoes," exclaims Lynn. "I have visited many doctors, but nobody seems to know what to do but prescribe drugs that didn't work and threw a wet blanket on my life."

Lynn has been prescribed Femoral, morphine, Phenergan, Adivan, Fentanyl, Oxycontin, Compazine, and a potpourri of other drugs. None worked. Her weight went to eighty-six pounds last year. "The doctors just couldn't do anything for me; I just knew I was going to die," Lynn confesses. "Then one night we saw a television show about medical marijuana, and my husband and I looked at each other and knew that this could be my last chance."

"I used to sleep with one eye open," says Lynn's husband. "If Lynn had an episode we'd be off to the emergency room, each time thinking it would be the

end, and a few times it was close. When we saw the program about medical marijuana, I just knew she had to try it and I made connections to get her a medical marijuana card.”

Medical records from a primary-care physician must be submitted to the THC Foundation or Canamed in Denver, where an appointment with another physician is scheduled to review your condition and approve or disapprove eligibility.

“I didn’t want to smoke marijuana,” Lynn says, “but I realized that it was my last chance, although I didn’t hold out much hope – for anything. I went to Denver, got my card, then when I felt my next episode coming, I smoked a few puffs and within an hour my nausea disappeared. I take hemp oil capsules now – I don’t like smoking and I don’t like the high – and I’m hungry for the first time in years. And I can stop an episode immediately if I do take a couple of puffs,” Lynn says brightly. “I’m not over this horrible thing, but I can control the worst of it. And . . . I can have a life.”

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NOTE: This is a terrific resource, an academic treatise, for an easy-to-read review of all the aspects of the subject. If you have room and can figure out how to present it.

Dr. Robert Melamede, Ph.D, Associate Professor of Biology, University of Colorado, Colorado Springs, CO

<<http://www.harmreductionjournal.com/content/2/1/17>>