

2019 UIC Australian

MEDICINAL CANNABIS

S Y M P O S I U M



PLATINUM SPONSORS

HIGHLIGHTS

KEYNOTE SPEAKERS



Dr Donald Abrams

Past Chief of the Hematology-Oncology Division at San Francisco General Hospital and a Professor of Clinical Medicine at the University of California San Francisco.



"Amazon John" Easterling

Since 1976 'Amazon' John Easterling has been an explorer and treasure hunter in the Amazon rainforest where curanderos taught him plant medicine.



Dr Ethan Russo

A board-certified neurologist, psychopharmacology researcher, and Director of Research and Development of the International Cannabis and Cannabinoids Institute.



Dr Mark Ware

Currently the Chief Medical Officer of Canopy Growth Corporation. He previously served as Director of Clinical Research of the Alan Edwards Pain Management Unit.



Dr Jeffrey Hergenrather

A general practitioner specializing in cannabis / cannabinoid medicine since 1999 and his medical experience includes 26 years in emergency medicine and private general practice.



Dr Dedi Meiri

Principal Investigator, Technion Israel Institute of Technology, Laboratory of Cancer Biology and Cannabinoid Research.



Dr David Bearman

One of the most clinically knowledgeable physicians in the U.S. in the field of medicinal cannabis with 40 years working in substance and drug abuse treatment and prevention programs.

SPECIAL GUEST PANELISTS



Professor Laurie Mather

A member of the Working Party on the Use of Cannabis for Medicinal Purposes convened by NSW Premier Carr in 2000.



Dr Alex Wodak

A physician and the President of the Australian Drug Law Reform Foundation and a Director of Australia 21.



Cam Battley

Chief Corporate Officer of Aurora Cannabis, one of the world's largest and fastest growing cannabis companies.



Jonathon Zaid

The Director of Advocacy and Corporate Social Responsibility at Aurora Cannabis Inc., one of the world's largest legal cannabis companies.

SPECIAL EVENTS

Champagne & Canapés

Networking Pre-Premiere Event
Friday 22nd

High as Mike

World Premiere Screening
Friday 22nd

Hummingbird Gala

Networking Dinner
Saturday 23rd



DAY ONE

FRIDAY 22ND MARCH

Schedule subject to change

8.00am Arrivals and Registrations
Entry to Trade Display in the Stars Room.
Lanyard/Ticket must be worn at all times.

8.45am Welcome to the Showroom Plenary
Prompt start at 9.00am

9.00am Dr David Bearman USA
History, Myths and Misconceptions



9.45am Mr "Amazon John" Easterling USA
Why Cannabis....Why now?



10.30am Dr David Caldicott AUS
The Elephant in the room - time to acknowledge it!



10.45am Ms Rita Martin AUS
NSW Nurses and Midwives Association
Recognising and responding to patient need;
the compassionate approach of Australian nurses



11.00am Morning Tea



11.30am Mr Thomas Stoddart AUS
Office of Drug Control Update



11.45am Dr Mark Ware Canada
Cannabis as an Opiate Sparing medicine...
from 'Gateway' to 'Exit'

12.30pm Senator Richard Di Natale AUS
Putting patients before politics



1.00pm Lunch

1.30pm Dr Ethan Russo USA
Making Medicinal Cannabis Safer and Better



2.15pm Dr Jeffrey Hergenrath USA
Side effects, Adverse Effects and Precautions



3.00pm Afternoon Tea

3.30pm Panel Discussion
Illicit vs Legal and why Australia's current
system drives thousands to the black market.

4.15pm Dr Ethan Russo USA
The compelling case for "Entourage"



5.00pm Close for the day
Special evening events to follow

6.30pm Special events
See page opposite

SPECIAL EVENTS

6.30pm

Canapés and Champagne Networking Pre-Premiere Event

(Separate ticketed event) in the Stars Room.
Mingle with the Keynote Speakers.....network.....
enjoy!



7.30pm
to
9.45pm

World Premiere screening of “High as Mike”

By DC Stories followed by Q&A panel session.
Entry is included with all Friday and 3 day
passes or sold separately for \$20 each via the
website
Tickets must be presented at the door



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DAY TWO

SATURDAY 23RD MARCH

Schedule subject to change

8.00am Arrivals and Registrations
Entry to Trade Display in the Stars Room.
Lanyard/Ticket must be worn at all times.

8.45am Welcome back
Prompt start at 9.00am

9.00am Dr Donald Abrams USA
Cannabis in Cancer Care



9.45am Associate Professor Dedi Meiri Israel
The orchestra of the Phytocannabinoids



10.30am Professor Simon Eckermann AUS
Health economic analysis highlights need for medicinal cannabis policy reform in Australia



10.50am Dr Melissa Benson AUS
Current challenges conducting clinical research on cannabis



11.00am Morning Tea

11.30am Dr Graham Gulbransen NZL
Medicinal Cannabis for chronic pain, anxiety, insomnia and opioid overuse



11.45am Dr Judith Lacey AUS
The role of multidisciplinary research: cannabis and treatment in high grade Gliomas



12.00pm Associate Professor Mehrdad Nikfarjam AUS
Exploring Cannabis medicines for Pancreatic Cancer



12.15pm Dr Jeffrey Hergenrather USA
The artform and science of Cannabis Delivery and Dosage



1.00pm Lunch

1.30pm Panel Discussion
What if cannabis cured cancer?



4.15pm A/ Professor Jonathon Arnold AUS
Unlocking the medicinal potential of cannabis in epilepsy and beyond

3.00pm Afternoon Tea

3.30pm Mr Cam Battley & Mr Jonathon Zaid CANADA
Lessons from Canada and Beyond: Patient Perspectives - *Jonathan Z*
A Global Perspective: Bridging Industry and Advocacy - *Cam B*



4.00pm **Panel Discussion**
A Global perspective of Medicinal Cannabis Schemes

4.30pm **Panel Discussion**
The Hierarchy of Evidence....Is it time to rethink?

5.00pm **Close for the day**
Special evening events to follow

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hero sponsor*



7.30pm **Hummingbird Gala**
Networking Dinner

Keynote:

Mr Amazon John Easterling *'Australia's Cannabis Opportunity: Global Leader or Mired in a Convoluted Fantasy'*

Special Guests:

Mr Peter Crock *'Introduction to the Medicinal Cannabis Industry Australia'*

Dr Teresa Nicoletti *'An update from the Medical Cannabis Council'*



DAY THREE

SUNDAY 24TH MARCH

Schedule subject to change

8.00am **Arrivals and Registrations**
Entry to Trade Display in the Stars Room.
Lanyard/Ticket must be worn at all times.

8.45am **Welcome back**
Prompt start at 9.00am

9.00am **Dr Teresa Towpik AUS**
Practicalities of Prescribing in Australia: A GP's
Perspective



9.30am **Dr Scott Smid AUS**
Cannabis in Gut Health and Inflammation



9.45am **Mr Justin Sinclair AUS**
Cannabis for Endometriosis; results of an
Australian Survey



10.00am **Dr Donald Abrams USA**
National Academy of Sciences, Engineering
and Medicine "Report on the Report."



11.00am *Morning Tea*

11.30am **Professor Iain McGregor AUS**
Cannabis Driving and Mobile Drug Testing:
Recent research from the Lambert Initiative



11.45am **Panel Discussion**
Driving and Mobile Drug Testing: a deal
breaker for patients?

12.45pm **Dr David Bearman USA**
Cannabis for the treatment of Autism Spectrum
Disorder



1.30pm *Lunch*

2.00pm **Dr Ethan Russo USA**
Cannabis and the future of Neurology



2.45pm **Panel Discussion**
"Industry and patients - a necessary alliance?"

3.30pm **Close of conference**
Thank you for your attendance and support

A Few Notes On UIC Policy

#FIXDANSLAW



i stand with Dan
#FixDansLaw



As many of you will be aware, United in Compassion is currently running a campaign to improve access to cannabis and cannabis products for all sick Australians who need it.

Called #FixDansLaw, the campaign was launched on the third anniversary of the Amendments to the Narcotic Drugs Act 1967 and the fourth anniversary of UIC co-founder Dan Haslam's death on 24th February 2015.

Australia's current medicinal cannabis (MC) framework is, we believe, unfit for purpose and must be replaced urgently. When viewed through the only honest and realistic lens possible - that of a situation in which 100,000+ people are using illicit products against the couple of thousand or so who've managed to get a legal prescription - this becomes even more pressing.

Our favoured solution would be a return to the original scheme proposed in 2014 - a separate 'Regulator of Medicinal Cannabis' operating outside of the Therapeutic Goods Act 1989 thus also outside of the TGA's control and oversight. This is exactly the model employed in every jurisdiction where cannabis has genuinely been made available for medical use and we believe the only one which can and will properly guarantee genuine access to cannabis and cannabis products for patients. It's also the only environment in which domestic industry will be able to flourish and supply medicines to Australians at affordable prices.

This is entirely consistent with what has been, from day one, UIC's Mission Statement which is to advocate for:

'...patient access to Full Spectrum herbal medicinal Cannabis extracts and dried herb Cannabis; in a manner which is safe, effective, affordable, equitable and favourable for patients, for the dignified relief of suffering.'

Reasons for the failure of the current system for MC are numerous and are described in detail within UIC's Submission to the Statutory Review of the Narcotic Drugs Act Amendments. The Submission - which is available for download from our website via the link at the end of this section - is designed to serve various purposes. It is partly our contribution to the Review and partly a comprehensive briefing for policy-makers, politicians and journalists as well as an explanation of UIC's position on MC and the regulations and legislation surrounding it.

As such the document is 'foundational' to UIC in that it lays out our thoughts, views and criticisms of the legislation and regulation as it is in its present form as well as suggesting a definition of MC that can, we hope be agreed on by everyone. This has been written by Professor Mark Ware, a world authority on the subject and a guest at this, the 2019 UIC Symposium. Mark's definition is to be found in no less prestigious a reference point than the Encyclopaedia Britannica, arguably the most trusted source of general knowledge in the English language, so hopefully will not prove controversial.

In brief, Mark defines MC as *'the use of cannabis under ongoing medical supervision, with an established diagnosis of the target symptom-disease complex.'*

A short summary of UICs criticism of the current legislation and regulation is as follows:

- Australia still has a huge black market for medicinal cannabis and cannabis products, supplied by definition without provenance or quality assurance which (necessarily) dwarfs the licit market by orders of magnitude. Results of the 2016 legislation have obliged sick Australians to rely on such products without clinical supervision while placing themselves at risk of prosecution;
- No objectives in terms of what of the 2016 legislation set out to achieve (other than compliance with the UN Single Convention on Drugs) were ever identified, making it impossible (now or in future) to determine whether it (the legislation) has 'succeeded' or 'failed';
- As a result, the Amendments meant medicinal cannabis and cannabis products would fall into a state of permanent 'regulatory limbo' – quite literally 'approved unapproved medicines' - a situation which is illogical if not completely nonsensical;
- This position has in turn resulted in an access pathway (the TGA's Special Access Scheme) to cannabis and cannabis products ensuring they are seen only as medicines of last resort, for use in 'exceptional clinical circumstances'. This is notwithstanding the unavoidable fact that in excess of 100,000 individuals are already using such products illegally;
- Because of its Scheduling in the SUSMP (or Poisons Standard) State & Territory Health Department approval is also required to obtain cannabis and cannabis products adding a further tier of duplication and obstruction to access.

While UIC does not call directly for a separate regulator within the Submission itself, what we do demand are five minimum required policy objectives we feel should be placed at the heart of any revised scheme or framework for MC in the future. These could and should then serve as benchmarks for further Review processes against which the success or otherwise of policy can be evaluated. These five 'objectives' are as follows:

Australian MC regulation should, going forward:

1. Assess and meet patient need as well as ensuring best outcomes for patients based on the reality of 100,000+ individuals currently using cannabis and cannabis products in Australia;

2. Create an MC Programme that optimises net clinical and health system benefits;
3. Provide a serious and preferable alternative to the currently vital and necessary unregulated market as well as incentivisation of patient migration from illicit to licit products;
4. Deliver legal, accessible, and affordable products domestically;
5. Optimise the financial and economic benefits offered by a regulated and vibrant local cannabis industry.

With these aims placed at its centre UIC believes a far better solution for regulating and delivering MC should be possible.

In the meantime however, and as a matter of urgency and absolute priority, we call on all Governments in Australia immediately to:

1. Recognise the use of cannabis and cannabis products where medical use is demonstrable to be an absolute defence against arrest and charge for possession;
2. Ensure every MC user has the opportunity to transition from unregulated to equivalent regulated products;
3. Provide resource and support in the sphere of training for healthcare practitioners in the use of medicinal cannabis.

While UIC will continue to lobby for a better alternative to what we feel is an irredeemably unworkable system broken beyond repair, we recognise other important work must continue.

To this end we will be open to supporting and/or endorsing and/or collaborating with any organisation, individual or project we feel helps to move the agenda towards the goal described in our mission statement, just as we will oppose and call out those we believe are obstructing it.

For more on our policies and to download the Submission please go to:

unitedincompassion.com.au/policy

In early 2016 media both domestic and global reported that Australia had ‘legalised medical weed’.

What they were referring to was passage of the Narcotic Drugs Amendment Bill in the Australian Parliament, achieved in almost record time and with cross-party support, on 24th February that year.

Such headlines though weren’t the entire story and nor did they predict what would follow: three years of bitter, often desperate struggle on the part of patients who felt they’d been badly deceived and a government many (including this author) believe acted only for show. Claims to have made cannabis available seemed empty, we all felt, while every effort was made to ensure it stayed as far beyond the reach of those needing it as ever it was before legislative changes occurred.

For a start, the Bill didn’t ‘legalise the use’ of medical cannabis or cannabis medicines at all; prescribing had always been technically (if not practically) possible using the Federally-run ‘Special Access Schemes’ which, in certain circumstances, allow doctors to obtain drugs or therapies not registered (or generally allowed) for use in Australia. On top of these, one such medicine – Sativex – had already been formally approved by Government’s medical regulator.

What the Narcotic Drugs Amendment Bill did do though was modify the existing Federal Narcotic Drugs Act of 1967 so as to permit, at Commonwealth level, the lawful cultivation of cannabis and manufacture of cannabis products for medicinal and research purposes for the first time in more than a half-century.

It had been a long time in coming. For decades, as elsewhere, Australia had been hotly debating the matter; some argued for an end to cannabis prohibition altogether, others for its medical use while others still wished it to remain completely forbidden. As far back as 1994 a background paper prepared for the New South Wales Government noted:

‘A number of prominent Australians, including politicians from all major parties, were signatories to a charter calling for the decriminalisation of cannabis. Although such resurgence of interest in the issues surrounding the cannabis debate has occurred in the past with no resulting change to legislation, the current level of interest in the topic across all levels of Australian society suggests that cannabis is an issue that has yet to be resolved to the satisfaction of all concerned.’

This article is continued on the UIC website. Please go to: unitedincompassion.com.au/history



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02 RE

SCIENCE



MEDICINAL CANNABIS



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75%

of chronic pain sufferers want to be prescribed cannabis.¹

56.5%

of Australian GPs agree medicinal cannabis products should be available on prescription now.²

44%

agree they have patients who would benefit from medicinal cannabis.²

93.1%

do not know how to help patients legally access medicinal cannabis²

More information on medicinal cannabis and how to legally access prescription products for your patients is available at:

www.medlab.co/ems/nanabis
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References:

1. National Pain Survey 2018: Chronic Pain Australia
2. Emily A Karanges et al. BMJ Open 2018;8.



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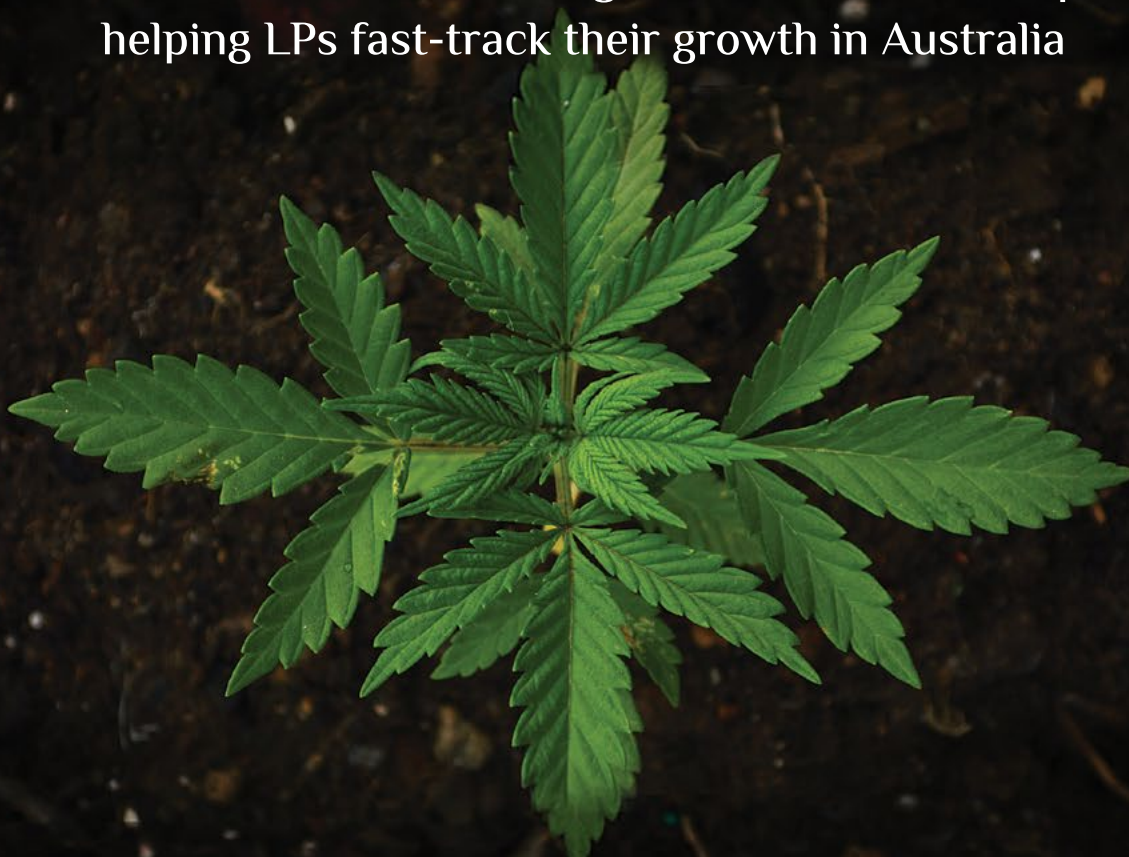
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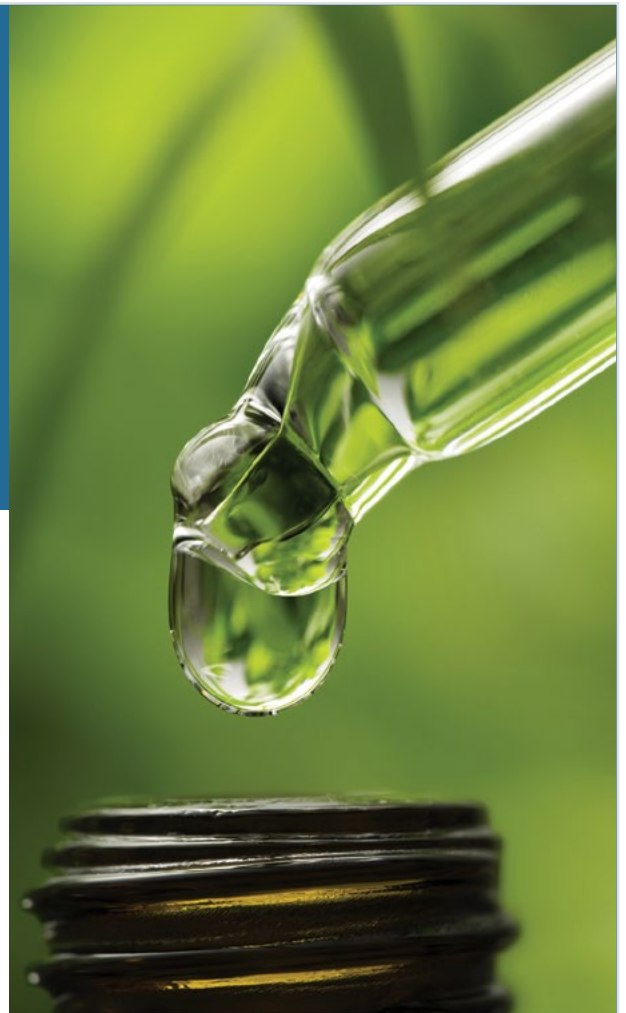
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