## OREGON MEDICAL ASSOCIATION



## **MEMORANDUM**

To: Senator Burdick, co-chair, Joint Committee on Marijuana Legalization

Representative Lininger, co-chair, Joint Committee on Marijuana Legalization

Members of the Joint Committee on Marijuana Legalization

From: Courtni Dresser, OMA Government Relations

Date: February 12, 2016

Re: Opposition to SB 1511 -5

Co-chairs Burdick and Lininger, members of the committee, thank you for the opportunity to submit a statement on the -5 amendment of SB 1511.

The Oregon Medical Associations represents over 8,200 physicians and physician assistants in Oregon, and is concerned about the impact the -5 amendment to SB 1511 will have our state's minors. The OMA has been an active participant in the state's rulemaking process for recreational marijuana, as a member of the rulemaking advisory committee for HB 2546 (2015), related to the Packaging and Labeling Standards for Inhalant Delivery Systems, and through the monitoring and submission of comments on the draft OHA rules on marijuana labeling, concentration and testing.

Oregon, as the third state to implement a recreational marijuana program, has the advantage of using available data from its predecessors in Washington and Colorado to ensure that any rules or new laws implemented protect our youngest and most vulnerable population – children – who are at the highest risk of accidental exposure and ingestion. This becomes critical when setting edible marijuana dosages and packaging standards, which are the most appealing to children and can be consumed easily. Under Oregon's current temporary rules, the dosage for both edibles and liquids containing marijuana is 5 mg THC per serving, with clearly identifiable service sizes/packaging requirements. These rules are in effect through June 2016 and the OHA Public Health Department is working on the permanent rules, which will include the opportunity for a public comment period. The OMA is concerned that the -5 amendment of HB 1511 undermines the work of this rulemaking body, composed of representatives from the public as well as analysts from the state, charged with developing appropriate rules that protect the health and safety of all Oregonians.

Based on member experiences with children in the ER, which is supported by evidence coming out of both Colorado and Washington with regard to accidental ingestion of edible marijuana products by young children, the OMA encourages this committee to oppose the -5 amendment to SB 1511 and allow the state's rulemaking body to set the appropriate dosing levels. The OMA fully supports the current dosage and total serving restrictions allowed for edibles and liquids in the temporary rules as it

ensures the highest level of protection for those with the smallest body sizes (ages 1-3 years) who may accidentally ingest brownies, ice cream or soda made with marijuana. The slow release of THC in an edible means the effect of the drug is not felt as quickly and leads to more severe cases of marijuana poisoning, especially for children, who present in the ER with symptoms of breathing issues, lethargy and loss of muscle control.

Thank you one again for the opportunity to address the committee on this topic. We encourage you to vote NO on the -5 amendment.

The Oregon Medical Association serves and supports over 8,200 physicians, physician assistants and student members in their efforts to improve the health of all Oregonians. Additional information can be found at <a href="https://www.theOMA.org">www.theOMA.org</a>.