

West Virginia: Testimony Opposing 10% THC Cap

Higher-THC cannabis possesses well-established therapeutic benefits, including mitigating pain, relieving nausea, and stimulating appetite. Patients who benefit therapeutically from either cannabis flowers or products with greater than 10 percent THC must not have their access to these products abruptly taken away. Doing so will leave these patients without access to the medicine that they need, and it will also likely foster an illicit market of underground producers and sellers willing to provide unregulated, more potent cannabis products to the patient community. Neither outcome is in the best interest of West Virginia's health or safety.

The availability of more potent cannabis products is not a new phenomenon. In fact, higher potency cannabis products, like hashish, have always been available. Typically, when consumers encounter higher potency products, [they ingest lesser quantities of them](#). This self-regulatory process is known as [self-titration](#). Virtually no other state imposes a similar cap on medical cannabis products. West Virginia should not be the first to do so.

Since 1985 the US FDA has regulated the prescription drug [dronabinol](#), which consists only of synthetic THC. In 1999, the agency [reduced](#) the restrictions on dronabinol based upon findings that it posed little risk to health and safety.

Despite some high-profile claims about the supposed risks associated with exposure to higher-THC products, studies have generally [failed to identify](#) an independent causal link between the increased use of cannabis within the general population and any parallel rise in psychiatric disorders, like [psychosis or schizophrenia](#). Canadian researchers recently [assessed](#) marijuana-related hospitalizations among a cohort of more than 23,000 patients authorized to access cannabis products. Specifically, investigators tracked incidences whereby subjects were hospitalized because of either "cannabis poisoning" or because of "mental or behavioral disorders due to the use of cannabis." During the course of the trial, investigators [reported](#) that a total of 14 patients were hospitalized for issues related to cannabis toxicity and 26 were admitted for either mental or behavioral disorders.

Patients and their allies in West Virginia have fought for years to establish a comprehensive system to create safe access to medical cannabis. This proposed THC cap would roll back progress and is an affront to the thousands of West Virginians who currently benefit from access to a wide range of medical cannabis formulations and potencies.

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