



...working to legalize responsible adult use...

National Organization for the Reform of Marijuana Laws

1100 H Street, NW, Suite 830
Washington, D.C. 20005
T 202.483.5500 | F 202.483.0057
<http://noml.org> | noml@noml.org

**Written Testimony submitted to The NJ Division of Consumer Affairs
from The National Organization for the Reform of Marijuana Laws (NORML)
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The National Organization for the Reform of Marijuana Laws (NORML) thanks the Division of Consumer Affairs for the opportunity to offer written comments with regard to the issue of marijuana's classification as a "Schedule I" drug in New Jersey.

NORML encourages the Division to reconsider this classification. "Schedule I" is the most restrictive designation that exists for controlled substances and it is generally reserved for only the most dangerous drugs, such as heroin. Maintaining cannabis in this designation is improper and is in conflict with the available science.

By definition, a schedule I controlled substance must meet all of the following criteria:

- (A) "The drug or other substance has a high potential for abuse."
- (B) "The drug or other substance has no currently accepted medical use in treatment in the United States."
- (C) There is a lack of accepted safety for the use of the drug or other substance under medical supervision."

Cannabis clearly does not share the 'high' abuse potential associated with other "Schedule I" substances like heroin, or even other legal substances like alcohol, tobacco, or prescription opiates. According to a comprehensive review by the National Academy of Sciences,¹ cannabis' dependence liability is similar to that of caffeine (7 percent) or anxiolytics (9 percent), and is far lower than the dependence liability associated with other substances like alcohol (15 percent) and tobacco (32 percent).

It is also apparent that cannabis possess an acceptable and known safety profile. Unlike most therapeutics, cannabis possesses no known risk of lethal overdose.² Further, the acute toxicity of

¹ National Academy of Sciences. Marijuana and Medicine: Assessing the Science Base. 1999: page 95: Table 3.4 'Prevalence of Drug Use and Dependence in the General Population'

² US DEA Drug Fact Sheet: Marijuana. "No death from overdose of marijuana has been reported." https://www.dea.gov/druginfo/drug_data_sheets/Marijuana.pdf

cannabis is very low, and it is recognized that “there are no cases of fatal cannabis poisoning in the human medical literature.”³

There exist numerous⁴ FDA-approved controlled trials assessing the safety and efficacy of cannabis in various patient populations. A scientific review of several of these trials concludes: “Based on evidence currently available the Schedule I classification is not tenable. It is not accurate that cannabis has no medical value, or that information on safety is lacking.”⁵

Finally, it is illogical to opine that cannabis “has no currently accepted medical use in treatment in the United States.” In reality, 30 states – including New Jersey – recognize the therapeutic use of cannabis by statute.⁶ Many of these laws have been in existence for nearly two decades. It is now estimated that over 1.2 million Americans are using cannabis as a legal medicine under state law.⁷

Rather than continuing to keep cannabis misplaced in ‘Schedule I,’ a better option would be to deschedule it – in other words, to remove it from the controlled substances act completely – and regulate its commercial production and retail sale in a manner similar to alcohol or tobacco. Such regulation has been advocated by Gov. Murphy, and I encourage the Division to give serious consideration to this policy change.

Contact

Paul Armentano
paul@noml.org
202-483-5500

³ Hall, Degenhardt, and Lynskey. The Health and Psychological Effects of Cannabis Use, 2nd edition. National Drug and Alcohol Research Centre, University of South Wales, 2001.

⁴ Grotenhermen and Muller-Vahl. Medicinal uses of marijuana and cannabinoids. *Critical Reviews in Plant Sciences*, 2016:
<https://www.tandfonline.com/doi/abs/10.1080/07352689.2016.1265360?needAccess=true&journalCode=bpts20>

⁵ Grant et al. 2012. Medical marijuana: clearing away the smoke. *The Open Journal of Neurology*, 2012:
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3358713/>

⁶ <http://noml.org/legal/medical-marijuana-2>

⁷ <https://medicalmarijuana.procon.org/view.resource.php?resourceID=005889>