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SENATE MEMORIAL 55

**53RD LEGISLATURE - STATE OF NEW MEXICO - SECOND SESSION, 2018**

INTRODUCED BY  
Jeff Steinborn

A MEMORIAL

REQUESTING THE SECRETARY OF HEALTH TO ADD OPIOID USE DISORDER AS A "QUALIFYING CONDITION" IN DEPARTMENT OF HEALTH RULES IN ORDER THAT INDIVIDUALS LIVING WITH OPIOID USE DISORDERS MAY BE ELIGIBLE TO PARTICIPATE IN THE LYNN AND ERIN COMPASSIONATE USE ACT MEDICAL CANNABIS PROGRAM; REQUESTING THE NEW MEXICO LEGISLATIVE COUNCIL TO CHARGE THE LEGISLATIVE HEALTH AND HUMAN SERVICES COMMITTEE WITH HEARING EXPERT TESTIMONY ON USING MEDICAL CANNABIS TO PROVIDE AN ALTERNATIVE TO OPIOIDS IN ACUTE AND CHRONIC PAIN MANAGEMENT AND IN PREVENTING AND TREATING OPIOID USE DISORDERS.

WHEREAS, every day, more than ninety Americans die after overdosing on opioids, often after becoming addicted to these drugs; and

WHEREAS, many of these opioids are prescribed to patients

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1 for the treatment of pain; and

2 WHEREAS, there is a growing body of research showing that  
3 medical cannabis may be a safe alternative allowing the  
4 replacement or reduction of opioid-based treatments, thereby  
5 reducing the risk and number of opioid-related deaths; and

6 WHEREAS, cannabis helps to reduce symptoms associated with  
7 detoxing from opioids, including nausea, vomiting, pain and  
8 anxiety, as well as cravings; and

9 WHEREAS, opioid use disorder often goes untreated because  
10 medication assisted treatment is not accessible to many  
11 residents of New Mexico, especially those living in rural areas  
12 of the state; and

13 WHEREAS, a study published in 2017 in *Harm Reduction*  
14 *Journal* provides evidence that suggests that expanding medical  
15 cannabis programs to people with opioid use disorders could  
16 help people suffering from addiction at risk of dying from  
17 overdose; and

18 WHEREAS, a study published in 2017 in the *American Journal*  
19 *of Public Health* concludes that legalization of cannabis in  
20 Colorado was associated with short-term reductions in opioid-  
21 related deaths; and

22 WHEREAS, a 2009 study of three hundred fifty medical  
23 cannabis patients in California found that twenty-six percent  
24 of respondents reported they used cannabis as a substitute for  
25 illicit drugs and sixty-five and eight-tenths percent as a

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1 substitute for prescription drugs; and

2 WHEREAS, a similar study to the 2009 California medical  
3 cannabis patient study that was done in Canada in 2016 found  
4 results similar to those reported in the California study; and

5 WHEREAS, a study published in 2014 in the *Journal of the*  
6 *American Medical Association* found that states with medical  
7 cannabis laws were associated with a significant reduction in  
8 mortality from opioid use, with a twenty-five percent reduction  
9 in opioid overdose deaths reported in these states; and

10 WHEREAS, the intent of the medical cannabis program is to  
11 provide access to allow the beneficial use of medical cannabis  
12 within a regulated system; and

13 WHEREAS, a recent university of Michigan study has  
14 concluded that patients using medical cannabis to control  
15 chronic pain reported a sixty-four percent reduction in their  
16 use of more traditional prescription pain medications,  
17 including opioids; and

18 WHEREAS, researchers from the university of Michigan  
19 school of public health and the university of Michigan medical  
20 school reported that their results suggest that for some  
21 people, medical cannabis may be an alternative to more common  
22 prescription painkillers at a time when national health leaders  
23 are asking the medical community to cut back on prescribing  
24 opioids such as Vicodin and OxyContin; and

25 WHEREAS, hundreds of people in Massachusetts who are

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1 addicted to opioids are being treated with medical cannabis;  
2 and

3 WHEREAS, a March 2017 article in the journal *Trends in*  
4 *Neurosciences* urges that the initial promise shown by  
5 cannabidiol warrants additional clinical studies to further  
6 evaluate cannabidiol's potential as a treatment for opioid use  
7 disorders; and

8 WHEREAS, a study published in 2017 in the journal *Planta*  
9 *Medica* suggests that cannabidiol, a nonpsychoactive compound  
10 found in medical cannabis, blocks opioid reward centers and  
11 thereby may be effective in treating opioid use disorders; and

12 WHEREAS, on November 6, 2016 and November 3, 2017, the New  
13 Mexico medical cannabis advisory board recommended to the  
14 secretary of health that opioid use disorder be included in  
15 department of health medical cannabis program rules as a  
16 "qualifying condition", that would render those living with  
17 opioid use disorders as eligible to participate in New Mexico's  
18 medical cannabis program; and

19 WHEREAS, in the first regular session of the fifty-third  
20 legislature, the legislature passed a bill that would have  
21 added opioid use disorder to the list of qualifying conditions;

22 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE OF THE STATE  
23 OF NEW MEXICO that, in light of the epidemic of opioid-induced  
24 deaths in New Mexico and recommendations by the New Mexico  
25 medical cannabis advisory board to include opioid use disorder

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1 among those conditions listed in department of health rules as  
2 a "qualifying condition" for participation in the Lynn and Erin  
3 Compassionate Use Act medical cannabis program, the secretary  
4 of health be requested to adopt and promulgate in the  
5 department of health's medical cannabis program rules opioid  
6 use disorder as a "qualifying condition"; and

7 BE IT FURTHER RESOLVED that the New Mexico legislative  
8 council be requested to charge the legislative health and human  
9 services committee with hearing evidence related to the use of  
10 medical cannabis to combat opioid use disorders during the 2018  
11 legislative interim; and

12 BE IT FURTHER RESOLVED that, if it is charged with holding  
13 hearings on the use of medical cannabis to combat opioid use  
14 disorders during the 2018 legislative interim, the legislative  
15 health and human services committee receive testimony from the  
16 secretary of health, the medical cannabis advisory board, the  
17 chair of the New Mexico medical board and the chair of the  
18 board of osteopathic medicine as well as national experts in  
19 the therapeutic application of medical cannabis, in acute and  
20 chronic pain management and in the prevention and treatment of  
21 substance use disorders; and

22 BE IT FURTHER RESOLVED that copies of this memorial be  
23 transmitted to the president pro tempore of the senate, the  
24 speaker of the house of representatives, the chair of the  
25 legislative health and human services committee, the secretary

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1 of health, the members of the medical cannabis advisory board,  
2 the chair of the New Mexico medical board and the chair of the  
3 board of osteopathic medicine.

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