

DHHS Therapeutic Cannabis Medical Oversight Board Meeting  
March 4, 2020, DHHS Offices, 29 Hazen Drive  
Meeting Minutes

*Members Present:* Virginia Brack, Heather Brown, Corey Burchman, Jerry Knirk, Molly Rossignol, Seddon Savage, Cornel Stanciu, Tricia Tilley (for Jonathan Ballard), Lisa Withrow

*Members Absent:* Bert Fichman, Richard Morse, Dennis Thapa

*DHHS Staff:* Michael Holt, DHHS Program Administrator

Meeting convened at 5:35 p.m.

### Minutes

Meeting minutes from 2/5/20 were approved. Motion: Brack; Second: Brown; Vote: 9-0

### Board Membership

Board member representing obstetrics and gynecology is vacant. Persons suggested at previous meetings were unavailable (Ellen Joyce). Search for new member will continue (suggest Oge Young).

### Qualifying Medical Condition Discussion – Autism Spectrum Disorder

Discussion of Autism Spectrum Disorder (ASD) as a qualifying condition. Lively discussion of many of the concerns and issues raised at the last meeting and some new ones. Among them:

- Note was made of largely positive public testimony from parents and caregivers in favor of ASD as a qualifying condition.
- One very negative written testimonial from the mother of a 37 year old with ASD who observed access to therapeutic cannabis led to deterioration of her son's many accomplishments (college, work, relationships) built over many years.
  - Noted negative outcomes was in another state with less restricted access, not in New Hampshire.
  - Is there a public bias to report positive outcomes?
- It was noted that adults on the spectrum have access to illicit cannabis.
- It was noted that there are major side effects and a lack of testing and study in children of medications currently used to manage challenging behaviors related to ASD.
- The need for close monitoring with treatment with any medication, including cannabis, was noted in this vulnerable population.
  - Emerging evidence is mixed regarding cannabis and ASD (ie, many studies show benefit, many show no benefit or harm). Careful provider management is critical.
  - If clinicians follow patients closely and change course for risk or harm, the benefits for some should outweigh the risks, particularly when compared with other options.
    - Many adults with ASD have guardians and systems that observe outcomes. Some adults do not have such support.
    - Parents of children with ASD usually serve as observers and advocates.

- Need for clinician education is paramount.
- Developmental risks discussed:
  - Known increases in risk of psychosis, addiction, intellectual and relational problems, and possibly other neurodevelopmental issues with use of cannabis by children. It appears that the younger the age, the greater the risk.
  - Studies suggest different action of CBD in brains of persons with ASD noted; this may be or is likely true for other cannabinoids.
  - Whether developmental effects are greater, lesser, or the same in children with ASD is not known.
- The current rate of ASD is about 1 in 70 children. Would access to the TCP drive a massive increase in use by children?
- Many felt use by children should be very rare, but the benefits in some cases may outweigh the uncertain long-term risks.
  - This would require careful expert judgment in shared decision making with patients and families with full disclosure of long-term risks.
  - It was proposed that, in order to permit access in exceptional cases where the immediate benefits were believed to outweigh potential long-term risks, a child and adolescent psychiatrist should be involved in decision-making, in addition to a pediatrician.
- Question of age for majority in this context was discussed:
  - Noted that the American Academy of Addiction Psychiatry recommends no therapeutic use of cannabis before age 26 (age of near full brain development)
  - NH statute establishes age 18 as an adult.
  - Board agreed that age 21 would be appropriate in this context.
- Question was raised whether due to cognitive differences/sometimes limitations, adults with ASD should have greater supervision or require higher level of certification as for minors. Complex issue legally and ethically and not felt to be indicated by group.
- Motion to recommend adding Autism Spectrum Disorder as a qualifying medical condition for the therapeutic use of cannabis:
  - “ASD as a qualifying condition in adults 21 years old or older. ASD as a qualifying condition in persons under 21 years old, including requirement for consultation with a child and adolescent psychiatrist who (1) confirms that the condition has not responded to previously prescribed medication or for which other treatment options produced serious side effects and (2) supports certification for the use of therapeutic cannabis.”
  - Motion: Knirk. Second: Stanciu. Vote 9-0. Note: Brown did not support the requirement related to a child and adolescent psychiatrist.

### 2020 Workplan Discussion

- Reviewed drafted strategies
  1. Improve access to programmatic and administrative information about the NH Therapeutic Cannabis Program
  2. Share educational resources about the potential risk and benefits of cannabis

3. Develop guidelines and best practice in the clinical management of patients who elect to use therapeutic cannabis.
- Timeline discussed.
    - By April gather the materials.
    - In May review them.
    - In June, July, August, begin selection, development, editing of materials for posting and other dissemination, and consider promotional strategies.
  - Members volunteered as follows
    - Seddon will send:
      - DH guidelines
      - APS guidelines
      - NHMS survey
    - Corey will look into other best practices:
      - Mentioned Minnesota guidelines
      - Suggested a book from a cannabis symposium in Orlando he will share
      - The Answer page is a good 12 hour course on cannabis
    - Lisa will write up what she does on a daily basis in terms of cannabis management as a form of best practices, and will provide her documents.
    - Jerry will:
      - Send DC slide deck
      - Cannabis educational materials from Rep Wendy Thomas
    - Molly will review FSMB document on state requirements and search for educational materials through their connections.
    - Jinny and Cornel will review educational materials around pregnancy and breast feeding
    - Mike will ask the three ATCs to share their provider educational materials, and invite them to come in to present them. The ATCs have been working in the community doing provider education.
    - Heather will think about how we can present the patient experience.

#### Member Updates

- Corey spoke to the Iowa Medical Cannabis oversight committee
  - They had a cap on THC 3.5 grams per 90 days, are working on changing that.
  - Attended an industry conference in Florida
  - Spent a day in Tallahassee related to policy issues as well.
- Heather noted that she will be going to Washington DC in May to participate with Americans for Safe Access. Some issues
  - Working on concerns about what happens to therapeutic cannabis programs in States that go recreational.
  - Recommended organization NECANN that engages medical experts and industry. They have a website with good information

Meeting adjourned at 7:35 p.m.