Final Decision Regarding Advisory Board Report and Recommendations from
Meeting of October 30, 2015

I. Decision:

I have reviewed the recommendations of the Medical Cannabis Advisory Board contained in their report, which was based on the Advisory Board’s findings at a public hearing held on October 30, 2015.

Having reviewed the Advisory Board’s recommendations and the available materials, and in consideration of the purpose of the Lynn and Erin Compassionate Use Act to provide relief from pain and suffering associated with debilitating medical conditions, I am taking the following actions with regard to the petition and the recommendations submitted to the Department of Health (“Department”).

A. Recommendation Regarding Attention Deficit Hyperactivity Disorder/Attention Deficit Disorder

The Medical Cannabis Advisory Board considered a petition for the addition of Attention Deficit Hyperactivity Disorder/Attention Deficit Disorder (“ADHD/ADD”) to the list of medical conditions qualifying individuals for enrollment in the New Mexico Medical Cannabis Program. The Advisory Board reviewed certain medical literature concerning the effects of cannabis and cannabinoids on persons with ADHD/ADD, and discussed clinical aspects of ADHD/ADD. The Board voted unanimously to recommend that ADHD/ADD not be added to the list of qualifying conditions.

I am adopting the Advisory Board’s recommendation to not add ADHD/ADD to the list of qualifying conditions in the Medical Cannabis Program. There are no clinical data regarding the effects of cannabis in the treatment of ADHD/ADD, and as the Advisory Board also noted in its report, there are some studies that indicate a relationship between cannabis usage at an early age and neuropsychological decline. This is all the more concerning, given that ADHD/ADD patients tend to be children and adolescents. The Lynn and Erin Compassionate Use Act, NMSA 1978, § 26-2B-4(C), does contemplate the potential for minors with qualifying medical conditions and treatments to enroll in the Medical Cannabis Program. However, there are clear distinctions to be drawn between, for example, ADHD/ADD and Epilepsy (which is a statutorily-approved qualifying condition), both in terms of the risk vs. benefit to the use of cannabis in those adolescent populations, and also in terms of the supporting medical literature. In short, I find that the potential adverse consequences of approving ADHD/ADD as a qualifying condition for enrollment in the Program significantly outweigh the potential benefits, and accordingly, I decline to add ADHD/ADD to the list of qualifying medical conditions.
B. Recommendation Regarding Proposed Rule Amendments

The Medical Cannabis Advisory Board reviewed proposed rule amendments concerning the Patient Registration rule at 7.34.3 NMAC and the Advisory Board rule at 7.34.2 NMAC. The proposed amendments included changes to the rules that were proposed in response to Advisory Board recommendations from the Board’s previous meeting on May 1, 2015. The Advisory Board recommended unanimously in favor of the proposed amendments.

The Department of Health held a hearing to receive public comment concerning the proposed amendments to the Patient Registry and Advisory Board rules, as well as certain amendments to the Medical Cannabis Producer rule (7.34.4 NMAC), on January 6, 2016. The Department received the report and recommendation of the Hearing Officer, Craig Erickson, Esq., on February 5, 2016, in which the Hearing Officer recommended in favor of adoption of the proposed amendments to the Patient Registry and Advisory Board rules, and also recommended adoption of the Producer rule with edits suggested to two sections. On February 15, 2016, the Department filed finalized copies of the amendments to all three rules on with the State Records and Archives Center for publication in the New Mexico Register, and those rule amendments will become effective upon their date of publication, on Monday, February 29, 2016.

II. Closing

In closing, I would like to thank the individual who submitted the petition for consideration. I would also once again like to thank the Advisory Board for its work and support of this program, which has provided relief to thousands of people suffering from debilitating medical conditions.

Retta Ward
Cabinet Secretary

2/23/16
Date