

Gerd W. Clabaugh, MPA Director

Kim Revnolds Governor

Iowa Medical Cannabidiol Advisory Board April 16, 2019 7:00 a.m. – 8:00 a.m. **Director's Conference Room** 6th Floor Lucas State Office Building 321 E. 12th Street Des Moines, IA 50319-0075

> 1-866-685-1580 Passcode 644 180 2541

1. Call to Order

The meeting was officially called to order 7:00 a.m.

Poll Call 2.

Mike McKelvey, Chair

. Roll Call	Mike McKelvey, Chair
Members	Absent
Dr. Jill Liesveld – via conference call	Dr. Ken Cheyne
Mr. Mike McKelvey	Dr. Stephen Richards
Dr. Lonny Miller – via conference call	Vacant - Gastroenterologist
Dr. Bob Shreck	Vacant - Neurologist
Dr. Jacqueline Stoken	
Staff	
Sarah Reisetter	
Owen Parker	
Jennifer Caskey	

3. Approval of Minutes

Mike McKelvey, Chair

Sarah Reisetter, Deputy Director

a. February 1, 2019, Medical CBD Advisory Board Mtg.

A request was received to correct the spelling of Jocelyn Sbiral's name in the Feb. 1, 2019, minutes. Correct spelling was noted and edits will be made.

A motion to approve the minutes with noted corrections was made by Dr. Miller, seconded by Dr. Stoken. There were no further comments or discussion.

A verbal vote was taken. Motion carried unanimously.

4. HF 732 Discussion & Recommendations

a. THC Cap & Purchase Limits

Sarah Reisetter, Deputy Director for the Iowa Dept. of Public Health, led the Board's discussion and reaction to the language in HF 732, An Act relating to the Medical Cannabidiol Act. Dr. Shreck provided an overview of a meeting that occurred at the end of February between several Board members and state representatives, including his interpretation of where the

Adam Gregg Lt. Governor purchase limits of 25 g of THC/ 90 days language may have originated. Dr. Stoken provided an overview of a subsequent meeting where several of the Board members discussed concerns regarding access to THC. Dr. Stoken also expressed her concerns about allowing patients to purchase 25 g of THC/ day. The Board discussed the limited nature of studies related to the effects of CBD and THC and acknowledged that comments related to appropriate limits on patient access to THC were received from both MedPharm Iowa and the organization, AC4C. The Board noted receipt of the information provided. Additional concerns, including the lack of pharmacists or pharmacy technicians to provide advice in the dispensaries, product CBD/THC ratios, potentially damaging effects of THC on developing brains, and pediatric dosages, were expressed. Various purchasing limits, studies from other states, and purchasing restrictions from other states were included in the meeting's discussions.

The Board evaluated the provision in HF 732 that seeks to eliminate the 3% THC cap in medical cannabidiol products and instead regulate patient access to THC by implementing a cap on the amount of THC that can be purchased by patients and their primary caregivers every 90 days. While the Board is supportive of this approach, it has concerns about the number of grams of THC that HF 732 would authorize patients to purchase every 90 days. The current draft of HF 732 would allow patients to purchase up to 25g (25,000mg) of THC every 90 days. Members expressed concerns that this is an extremely large amount of THC for a medical program that seeks to avoid becoming a recreational program. The Board is concerned that a 25g THC cap every 90 days would be perceived as opening a floodgate and could make knowledgeable physicians reluctant to certify patients for participation in the program.

After careful review and through discussion of the available medical literature on this topic, the Board made the following recommendations:

1. Establish a THC purchase limit for patients of 4.5g (4,500mg) THC every 90 days. This is 50mg/day of THC, which is well into the psychoactive range for all but the most experienced and tolerant patients. It covers the full range of doses supported in the medical literature for Iowa's approved debilitating medical conditions.

A motion to approve this recommendation was made by Dr. Shreck, seconded by Dr. Miller. A verbal vote was taken.

Motion carried unanimously.

 For pediatric patients under 18 years of age, limit access to THC by allowing pediatric patients to purchase only those products with a 20:1 ratio of CBD/THC, and establish a maximum CBD dose for pediatric patients of 10mg CBD/kg (weight of patient)/day.

A motion to approve this recommendation was made by Dr. Miller, seconded by Dr. Shreck. A verbal vote was taken

Motion carried unanimously.

3. Eliminate the 3% THC cap on medical cannabidiol products currently codified in Iowa Code section 124E.2(6). Patients are currently allowed to purchase of an

unlimited amount of products with 3% THC and there is no specific dose or minimum interval between doses. The current 3% THC cap also precludes development of a vaporizable product form that would offer more precise titration of dose, thereby diminishing the likelihood of adverse effects.

A motion to approve this recommendation was made by Dr. Shreck, seconded by Dr. Miller. A verbal vote was taken.

Motion carried unanimously.

At the conclusion of the discussion and voting, Chairperson McKelvey appointed a small subcommittee to complete and review a letter to be addressed to the General Assembly and Governor Reynolds summarizing the Board's recommendations related to the language of HF 732.

5. Petitions to Add Qualifying Conditions Sarah Reisetter, Deputy Director

- a. Severe, Intractable Autism with Self-injurious or Aggressive Behaviors, All Ages
- b. Addition of Adult Autism with Aggression and/or Self-injury

Two members of the public requested to speak to the Board regarding these petitions. Jocelyn Sbiral addressed the Board, thanking them for allowing her to submit a petition to allow severe, intractable autism with self-injurious or aggressive behaviors in adults to the approved conditions. Ms. Sbiral indicated that she had also spoken to the Board of Medicine requesting their consideration and support of the petition as well.

Mary Roberts, co-founder of FAACTS, addressed the Board via conference call stating that she was hopeful the Board read their petition and letters of support, and other research, although limited, that accompanied it. Ms. Roberts shared that autism is a life-long condition, noting that the benefits that may be noted by pediatric autism patients could also benefit adult patients.

Sarah Reisetter, Deputy Director at the Iowa Dept. of Public Health, led the Board in their discussion of the two petitions on the agenda for consideration. Due to the similarity of the two petitions, both focused on severe, intractable autism with self-injurious or aggressive behaviors, all ages, Sarah asked the Board to consider combining the two separate conditions into a single petition. The question was raised if the removal of the word "pediatric" from the previously approved and added autism petition would be sufficient? Although the Iowa Board of Medicine has already added that condition through rule, a motion could be made to request the Board of Medicine's removal of the word "pediatric" from the autism condition.

A motion was been made by Dr. Miller, seconded by Dr. Stoken to ask the Iowa Board of Medicine to remove the word "pediatric" from the previously approved autism condition.

A verbal vote was taken. Motion carried unanimously.

6. Letter from the Iowa Podiatric Medical Society Sarah Reisetter, Deputy Director

Sarah shared that she received a call from Mike St. Clair, a lobbyist representing the Iowa Podiatric Medical Society, who indicated the society noted HF 732 included the addition of Advanced Registered Nurse Practitioners (ARNP) and Physician Assistants (PA) as certifiers for Iowa's medical cannabidiol program. The Podiatric Medical Society, through a written letter, has asked the Board to consider recommending the addition of podiatrists to the list of health care practitioners allowed certify patients for the program. Discussion regarding this request included concerns that podiatrists would potentially begin certifying patients for conditions other than those they specialize in, questioning if podiatrists would be limited to certifying for foot and leg pain only, and concerns about receipt of similar requests from other specialists moving forward.

A motion to add podiatrists as certifiers was made by Dr. Shreck, seconded by Dr. Miller.

A verbal vote was take: Liesveld = No McKelvey = No Miller = No Shreck = Abstain Stoken = No

Motion Failed.

7. Future Meetings

- a. Friday Aug. 2, 2019
- b. Friday Nov. 1, 2019

8. Adjourn

Mike McKelvey, Chair

The meeting is officially adjourned at 8:00 a.m.

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