

Pot docs face new rules in Colorado

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In this Jan. 11, 2010 photo, a worker shows a marijuana bud for sale at the Lotus Medical dispensary in Denver. Colorado's Board of Health is nearing a decision on rules clarifying what's a "bona fide" doctor-patient relationship in an effort to crack down on marijuana mills, in which unscrupulous "pot docs" recommend pot for patients they've never seen before. Colorado's proposed regulations would be among the nation's most detailed governing how well doctors recommending marijuana must know their patients, but some marijuana advocates are fighting the rules. (AP Photo/Ed Andrieski)

(AP) -- Colorado's dispute over which doctors can recommend medical marijuana could become more confusing this week when state health authorities consider tighter limits at the same time lawmakers debate conflicting rules.

One question is whether doctors with conditions on their medical licenses - such as a surgeon being banned from surgery after developing

[arthritis](#) - should be able to recommend pot.

The Colorado Board of Health also plans to flesh out how well doctors have to know patients before recommending marijuana.

The proposed regulations address what lawmakers called for last year by requiring a "bona fide" relationship between doctors and patients - designed to discourage so-called "marijuana mills" in which doctors recommend pot to people after only brief visits.

Some 1,300 people who applied for [medical marijuana](#) cards were rejected late last year by state health officials because their recommendations came from doctors with license conditions.

The doctors - and the Colorado Medical Society - argued that barring all doctors with conditions from recommending pot is too broad because many doctors' conditions don't affect their ability to prescribe or recommend drugs.

One of them is Dr. Abraham Grinberg, a 64-year-old Denver physician who once focused on neonatal care until a hand tremor made surgery impossible.

Grinberg then turned to meeting with patients about medical marijuana until dozens of them got rejection letters. Grinberg now works as a Spanish language medical translator while waiting to hear if he can treat patients again.

"Now I am looking for what to do," said Grinberg, who insists his hand tremor doesn't affect his ability to decide when to recommend marijuana.

"I really felt that was helping people, people who couldn't be helped by

other means," Grinberg said. "I helped them get off [painkillers](#) and [narcotics](#)."

Grinberg wouldn't be able to go back to a marijuana clinic under regulations up for a hearing Wednesday at the Board of Health. The rules would require physicians to have "unrestricted, unconditioned" licenses before they can recommend pot.

Meanwhile, a bill awaiting a vote in the Colorado House would allow doctors with license conditions to ask the Colorado Medical Board for permission to recommend marijuana. Assuming their conditions are unrelated to recommending drugs, the doctors could write recommendations for pot.

Diana Protopapa of the Colorado Medical Society says her group prefers that approach and that marijuana shouldn't have special limitations.

"Voters in 2000 deemed that it was medicine," Protopapa said, referring to the year Colorado voters approved a constitutional amendment allowing medical marijuana. "What the medical society then wants is for marijuana to be treated like other medicine."

The proposed regulations dealing with the doctor-patient relationship would require doctors to complete "a full assessment of the patient's medical history ... including an appropriate personal physical condition."

Colorado regulators considered, but rejected, some proposals strongly opposed by pot activists. One would have required doctors to see a patient more than once before recommending pot. Another would have banned mobile pot clinics that travel from town to town.

The latter rule would have put the nonprofit Medical Marijuana Assistance Program of America out of business. The charity consists of

two recreational vehicles that canvass rural Colorado, with volunteer doctors writing marijuana recommendations in places where most doctors won't suggest the drug.

The charity's executive director, Vincent Palazzotto, said that because health insurance doesn't cover medical pot, requiring multiple doctors' visits would unduly burden patients.

Pot advocates also argue that multiple visits aren't required before doctors can recommend other drugs.

"People are going to seek out marijuana either way, whether you have to see a patient once or four times. But it does affect the cost," Palazzotto said.

The proposals before the Board of Health would still be among the nation's strictest governing doctors and marijuana, said Tamar Todd, staff attorney for the New York-based Drug Policy Alliance, which advocates for lighter drug punishments.

At least five other marijuana states and Washington, D.C., require "bona fide" doctor-patient relationships.

Some states, such as California, require only that recommendations come from physicians. Others go further than Colorado's suggested rules. Alaska requires doctors to consider other treatments; New Jersey and Washington, D.C., require a doctor to be a patient's primary physician, with ongoing care.

Todd said his group doesn't oppose clarifying the doctor-patient relationship as long as it doesn't "make it overly burdensome or costly for patients to obtain recommendations."

Colorado pot activists fear new rules could do just that.

Cheryl Brown, a managing partner of Herbal Health Systems, which runs four clinics along the Front Range, said the drug isn't widely accepted among physicians and that banning all doctors with license conditions goes too far.

"What they should do instead of demonizing doctors is look at making this a specialized industry," Brown said. "Right now, there are too many [doctors](#) who are still afraid of recommending marijuana. The stigma is still there."

More information: Draft physician rules: <http://goo.gl/kLWYF>

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