

New York looks to expand medical marijuana program

September 3 2016, by David Klepper

Dan Ryszka is a pharmacist, so he knows something about medicine. But he was still stumped when drug after drug failed to curb his children's violent seizures. Then they joined New York's fledgling medical marijuana program, and the attacks all but stopped.

"You go through the ABCs of medicine. Let's try this drug, let's try that one, let's find one that works," said Ryszka, a Buffalo-area resident whose 15-year-old daughter and 9-year-old son are now taking medications derived from marijuana. "We tried 10 drugs. Now, my son is off oxygen. He's smiling. Somedays my daughter was having three to five seizures. Now it's one a month."

More than 7,000 New Yorkers have signed up since New York began allowing patients with certain conditions to obtain non-smokeable marijuana preparations early this year through one of the most cautious medical marijuana programs in the nation. Now, the state is looking to expand it, with plans for home delivery and more dispensaries.

State health officials say they will also allow nurse practitioners to authorize medical cannabis, and are weighing proposals to make chronic pain a qualifying condition for [medical cannabis](#). To make it easier for patients to find doctors, the state may post an online list of physicians who participate in the program.

The steps are overdue and don't go nearly far enough, said Assemblyman Richard Gottfried, a Manhattan Democrat and one of the authors of the

law, which was passed and signed into law by Democratic Gov. Andrew Cuomo in 2014.

"The excessive restrictions in the medical marijuana law and regulations are not justified," he said. "Patients deserve easier access and more choice."

Currently, there are 17 dispensaries around the state operated by five companies that grow and process the marijuana. Three more are slated to open. The state's expansion plan calls for up to 20 more dispensaries.

At least one company picked to operate the program is concerned about the expansion plan.

"Right now there's a micro market," said Ari Hoffnung, CEO of Vireo Health New York, which operates dispensaries in Queens and Westchester and Broome counties. "We urge the state to hit the pause button... there may at some point be a rationale to adding more. The time for that has not yet come."

Alphonso David, Cuomo's counsel, said the state will carefully assess the need for more dispensaries as it makes other changes—such as allowing [nurse practitioners](#) to authorize medical marijuana recipients—to ensure the transition is smooth.

"We are expanding the program we're doing so in a thoughtful way," he said. "We are focused on patient access... We need to make sure there is sufficient demand before we increase the supply."

Unlike most other states, New York's program prohibits smokeable marijuana, instead requiring dispensing the drug capsules or oils or tinctures that can be vaporized or used with an inhaler. Doctors must complete an online training course before authorizing the drug. Patients

may not know which doctors have agreed to participate, making it difficult to access the program.

When he signed the program into law Cuomo said it "strikes the right balance" between treatment for patients and the need to protect public health and safety.

Twenty-five states and the District of Columbia now have [medical marijuana](#) programs. Enrollment rates vary considerably.. Michigan has 182,000. Rhode Island, which has a population 1/20th of New York's, has nearly 12,000.

A study by Columbia University Medical Center researchers this year found that enrollment is highest in western states with older, less restrictive programs and lower in more recent "medicalized" programs like the one in New York. Minnesota, which has a program similar to New York's, has enrolled nearly 2,800 patients since its program started a year ago.

The study suggests that if Cuomo's plan was to create a program that's difficult to abuse, he may have succeeded.

Ryszka said he's pleased the state is expanding access to a program that has helped his children. He said there are still many people in need who can't get the drug.

"It's a step in the right direction," he said. "I get calls all the time: 'I live in this area, is there a doctor I can talk to?'"

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