

MEETING MINUTES
GMIAC Health Subcommittee Teleconference Agenda
Monday, October 5, 2015, 2:00p.m. – 3:00p.m
Century Link Building, 6101 Yellowstone Road, Room 417
Cheyenne, Wyoming 82002

Attendees:

In-Person

Wendy E. Braund, MD, MPH, MEd, FACPM, State Health Officer and Senior Administrator, Public Health Division, Wyoming Department of Health
Tracy Murphy, MD, Public Health Sciences Section Chief and State Epidemiologist, Public Health Division, Wyoming Department of Health
Stephanie Pyle, MBA, Community Health Section Chief, Public Health Division, Wyoming Department of Health
Alice Russler, Ed.D, Administrator, Mental Health and Substance Abuse Services Section, Behavioral Health Division, Wyoming Department of Health
Lisa Wordeman, Chronic Disease and Substance Abuse Prevention Unit Manager, Public Health Division, Wyoming Department of Health
Joseph D'Eufemia, Tobacco Prevention and Control Program Manager, Public Health Division, Wyoming Department of Health
Erica Matthews, Substance Abuse and Suicide Prevention Program Manager, Public Health Division, Wyoming Department of Health
David Robinson, JD, Office of the Wyoming Attorney General
Jeremy Bay, Executive Assistant to the State Health Officer and Senior Administrator, Public Health Division, Wyoming Department of Health

Via Telephone

Jackie Herb, Region Manager, Department of Family Services
Dr. Charles Ksir, Professor Emeritus, University of Wyoming Psychology Department
Dr. Sigsbee Duck, President, Wyoming Medical Society
Dr. Michael Enright, Clinical Psychologist, St. John's Medical Center, Jackson, WY
Dr. Lonny Dobler, Pharmacy Operations Manager, Cheyenne Regional Medical Center
Dr. Mike Van Dyke, Section Chief, Environmental Epidemiology, Occupational Health, and Toxicology Colorado Department of Public Health and Environment

Dr. Braund welcomed the subcommittee members and provided an overview of the purpose of the Governor's Marijuana Impact Assessment Council (GMIAC) and the Health Subcommittee. The charge of the council is to determine to the extent possible the impact of legalization of marijuana in surrounding states and around the nation on Wyoming. There was a list of subcommittees sent out by Jeremy as part of the pre-meeting materials. Each of the subcommittees has been charged with brainstorming topics that they would like their portion of the report to contain. Our charge today is to determine the top three to five health issues related to marijuana that we believe the report should contain and Wyoming Survey and Analysis Center (WYSAC) should review. Dr. Braund stated that she would like to brainstorm the potential topics and from there determine the top three to five via a voting process via email.

Dr. Van Dyke provided an overview and insight of issues that Colorado has faced with the legalization of Marijuana. As part of his role in the management and oversight of marijuana in Colorado, Dr. Van Dyke is also the chair of the Retail Marijuana Public Health Advisory Committee which is charged to monitor for changes in marijuana use patterns, review scientific literature as it relates to

potential health effects associated with marijuana, and to review any data or epidemiology related to emerging health effects around marijuana. Over the last year and a half, the committee has produced an extensive document on the potential health effects of marijuana. This document can be found at: <https://www.colorado.gov/pacific/cdphe/retail-marijuana-public-health-advisory-committee>. Some of the significant findings that Colorado has discovered include:

- There is no such thing as “time-zero” as it relates to marijuana because people were using marijuana before it was legalized. Colorado has a long history of medical marijuana which has an effect on the baseline.
- An increase in hospitalization and emergency room visits that are potentially related to marijuana, it is unclear how big that increase is or exactly what the particular outcomes are because the data is still being analyzed.
- An increase in child poisonings related to edible marijuana products.
- So far, there has not been a momentous increase in use among youth or adults since Colorado legalized marijuana.

Dr. Braund mentioned that there is currently a citizens’ initiative that is being petitioned for inclusion on the ballot. This citizens’ initiative would legalize medical marijuana and commercial hemp.

Dr. Braund asked the group to brainstorm potential topics that they would like to see included in the GMIAC report. WYSAC has been charged to write the report and they have asked for our input. The following topics were discussed.

Benefit to a particular patient for a particular condition vs public health benefit
Best way to minimize harm and maximize benefits from a public health perspective
Child neglect
Childhood poisoning
Correlation between marijuana and other psychological and/or physical comorbidities
Effects of chronic marijuana use over time, especially Amotivational Syndrome as a cost to society
Effects of smoking marijuana on respiratory system and as second hand smoke
Effects on pregnancy
Evidence base for prevention of marijuana use
Evidence for marijuana as a gateway drug, especially among adolescents
Evidence-based practice for treatment for marijuana addiction
Financial/personnel impacts on to Department of Health (and other affected State entities)
Hospitalizations/emergency department visits
How to measure potency
Impact of capacity for residential treatment
Impact of legal vs. medical referrals to the treatment system
Impact on developing (adolescent) brain
Interaction between marijuana and psychotropic or other medications
Interaction between marijuana and alcohol
Is marijuana addictive? Implications for treatment/health insurance
Legal benefit to WDH/public health of decriminalization of possession
Marijuana compounds – THC vs CBD vs synthetic derivatives; relative benefits and harms
Motor vehicle crashes associated with marijuana impairment
Parameters other states put on medical marijuana programs – what medical conditions are allowable?
Potential health benefits

Public health law research – different legal ways to achieve priorities and overall objectives
Substitution of marijuana for potentially more harmful drugs (e.g., opioids)
Work Related Injuries due to being under the influence

During the discussion of topics, Dr. Duck provided insight from the Wyoming Medical Society and their position regarding the legalization of medical marijuana. He also provided additional information in the following links:

News release: <https://www.wyomed.org/wyoming-medical-society-opposes-medical-marijuana-legalization-effort>

Position paper: <https://www.wyomed.org/sites/default/files/resources/newsletters/WMS%20Marijuana%20position%20paper.pdf>

Campbell County Initiative: <http://www.campbellcountyprevention.org/there-is-no-debate/>

Dr. Murphy remarked that it was important to emphasize to WYSAC that we do not just want to list potential benefits and those that we do list should be supported by adequate literature and studies, of which there are very few. Dr. Braund followed-up by stating that there is tiered set of criteria in place to review the quality of literature and research that is submitted.

It was noted that some consideration should be given to challenges of proving benefits of marijuana because of the stringent set of parameters that exist.

Subcommittee members are requested to rank the top five topics that should be included in the WYSAC report from 1 to 5 (with 1 being most important) on the attached Excel spreadsheet and send them to Jeremy Bay (jeremy.bay@wyo.gov) no later than close of business, Wednesday, October 21, so he can compile the results. A follow up email will contain instructions for submitting documents that address the topics selected for inclusion.

WYSAC has asked that all supporting research be submitted no later than November 30, to allow ample time to prepare a document for the Governor in time for next year's legislative session. Following the selection of topics, a process for submission of documents to WYSAC will be shared with the subcommittee.

Dr. Braund thanked the group for their time and participation and concluded the meeting.