24th February 2015

Committee Secretary
Senate Legal and Constitutional Affairs Committee
PO Box 6100
Parliament House
Canberra ACT 2600



Dear Committee Secretary,

Thank you for the opportunity to provide a submission for the **Inquiry for the Regulator of Medicinal Cannabis Bill 2014.** Attached are copies of the submission we made for the Tasmanian Legislative Council Select Committee, along with copies of the open letter written by Hannah on 27<sup>th</sup> December 2014, and the open letter written by Peter and Beverley on 19<sup>th</sup> February 2015. Hannah's letter resulted in ABC News Tasmania doing a follow-up story. This can be found online at the ABC website <a href="http://www.abc.net.au/news/2015-01-13/medical2c-cannabis2c-legal-consequences2c-tasmania2c-prosec/6014786">http://www.abc.net.au/news/2015-01-13/medical2c-cannabis2c-legal-consequences2c-tasmania2c-prosec/6014786</a> (We have included a printed copy of the online ABC story, but the news item is also available by following the online links)

Since Hannah's letter was written, we have noticed further improvements to Tim's health, including an increased ability for him some days to be able to indicate if he is in pain, as well as having better body temperature regulation.

Sincerely Yours,

Hannah Rubenach

Peter Rubenach

Beverley Rubenach

Submission: Peter, Beverley and Hannah Rubenach

We support the use of natural botanical medicinal cannabis flower and extracted cannabinoids for medical purposes in Tasmania. We also support the regulated commercial growing and processing of cannabis for medicinal and research purposes in Tasmania. The reasons we support this are outlined below:

# **Our Family Background**

Beverley (aged 66) and Peter (aged 68) are full-time carers (24 hours a day) for their son Tim who acquired a brain injury through contracting meningitis at 5 months of age. Tim is now 28 years old and alongside his brain injury, he has severe epilepsy which is not controlled through conventional medication. Tim was prescribed various anti-convulsant medications from around 18 months old until he was 18 years old. However, he developed an increasingly severe toxicity to every kind of anti-convulsant medication prescribed. His reactions were so severe, that a neurologist and two local GP's advised to discontinue all anti-convulsant medication. Since then, Tim has had some degree of success using alternate medication and therapies, such as immune system building herbs, massage, reflexology, various anti-spasmodic herbs and supplements, diet, etc. We have also observed, that every time Tim is prescribed antibiotic medication for his frequent ear infections, he goes through a period (sometimes of several weeks) with very few seizures – both complex-partial seizures as well as the severe tonic-clonic seizures (for example he can have a reduction in seizures from the usual 5-6 night down to several days/nights without seizures whilst on antibiotics). Hannah (one of Peter and Beverley's daughters - aged 36) assists in the care of Tim (as time permits with work and community commitments). Hannah has had a background in disability work, particularly working with people with brain injury. Sarah (another of Peter and Beverley's daughters – aged 37) has been a social worker for nearly 10 years, however, she has had to take time off work and go on temporary sickness benefits as she contracted Lyme disease four years ago from a tick bite. Her health increasingly deteriorated until she was diagnosed last year with Lyme disease and began to receive treatment for it.

## Reasons we are supportive of medicinal cannabis

In the past year, we have done extensive research – internet, watching TV reports, conversations with individuals who have used cannabis medicinally, newspaper reports, social media, reading medical books/reports, etc. (Please see for example, appendix A – copy from book regarding cannabis use for epilepsy, and appendix B – regarding Lyme disease). Our research has lead us to conclude that it would be worthwhile trying medicinal cannabis for Tim and for Sarah – there is nothing to lose by trying it, and potential significant health and wellbeing outcomes to be gained.

We believe that not only will the anti-convulsant properties of medicinal cannabis likely be of significant benefit to Tim, but also the anti-microbial properties of medicinal cannabis will further help in reducing seizures and lead to better quality of life outcomes. (Our research has established that every herb reported as having anti-seizure properties have one further factor in common - they all have anti-microbial properties). Tim is mostly non-verbal, however, we have noticed whenever he is on antibiotics, he has some success in verbalising his needs and pain. Additionally, he is able to walk with limited/no support, able to feed himself, do artwork etc – all things he cannot do normally. Doctors are very hesitant to keep him on long-term antibiotics due to the risk factors, such as impairing the immune system, digestive problems that can arise, etc. From all reports we

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have read, it seems individuals can be on medicinal cannabis long term without any side-effects. Additionally, we understand it can be safely used alongside other herbal and alternate treatments.

Medicinal cannabis is renowned for its anti-microbial properties — this will undoubtedly assist both Tim and Sarah to achieve better, and sustainable health outcomes. Furthermore, both Sarah and Tim suffer from severe headaches, muscular pain and fatigue as result of their conditions. Tim also suffers from sleeplessness, and challenging behaviour (due to his ABI). Again, medicinal cannabis reportedly can relieve all these symptoms.

As we believe medicinal cannabis would offer the only remaining hope to give Tim better health and wellbeing outcomes, throughout the past year, we have considered purchasing medicinal cannabis (without a prescription). After hearing and reading about other people's successes, we contacted Mullaway Medical Cannabis Pty Ltd earlier this year. We were very disappointed to hear he is no longer able to supply medicinal cannabis (please see appendix C- reply from the Mullaway Man; appendix D-our followup letter to the AMA and NHMRC, appendix E- reply from NHMRC).

The legislation prohibiting medicinal cannabis is failing our family. If medical cannabis were permitted to be prescribed and used in Tasmania, there are potential: a) quality of life outcomes for Tim (through a reduction of seizures and an improvement in general overall health and wellbeing); b) the potential of Sarah's recovery resulting in her returning to full-time paid employment; c) by achieving health and wellbeing outcomes for our family members (above), the stress, anxiety and depression of Peter, Beverley and Hannah as carers, will likely be significantly reduced.

From conversations with our wide range of friends and acquaintances, it seems medicinal cannabis is a major current topic – all are in favour of it. Some friends have made contact and asked whether we have considered medicinal cannabis for Tim and for Sarah's health. There appears to be strong community support and willingness to discuss.

We believe the time to act is now – not only because of the community support, and individual needs, but also because of the commercial advantages. Tasmania has an ideal climate to grow cannabis. We also have the willingness and expertise of farmers and scientist. As Tasmania has had a very successful medicinal opiates industry for decades as well as a range of herb-growing ventures, there is much expertise and community support for expanding into further medicinal botanicals, namely medical cannabis. Tasmania's economy could be significantly boosted by providing another agricultural product, by processing the botanicals locally, and by using the expertise of scientists (such as UTAS scientists) to research and develop techniques from growing through to processing of the cannabis products. These are jobs for Tasmania and Tasmanians.

By having a properly regulated and scientifically/medically controlled industry, individuals will be much safer – we know of people who are taking extreme risk by sourcing cannabis from non-regulated providers – the strength of the product is not controlled, the variety of cannabis used is not guaranteed (we understand that to achieve best outcomes, different strains are used for different ailments), the levels of THC/cannabinoids are unknown, and the hygiene of processing is unknown. Additionally, by accessing cannabis illegally, the continuity of product and access is tentative, as people will likely need to constantly find new suppliers are some are shut down due to

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police action as a result of current legislation. There is a need to have quality controlled medical cannabis prescribed (at a minimum, all registered GP's should be able to prescribe, but ideally, we would like to see registered herbalists also permitted to prescribe). The only way to ensure the safety of individual users is to have a scientifically-based quality control and prescription system in place.

If Tasmania acts now, there is potential of establishing an industry prior to too many patents being taken out on cannabis products/processing systems, which will make it harder to establish a successful Tasmanian based industry in the future. Please see attached example (appendix F) of big pharmaceutical companies attempts to cash in on the industry through patenting products (much more can be gleaned through further internet research, so this is just one example). If we wait too long, Tasmania will run the risk that not only will multi-national pharmaceutical companies have the power to control where the raw material is grown and processed, but they will also have the control over the amount paid to farmers for growing their products – this could make it economically unviable for medical cannabis to be grown in Tasmania, thus a product could be lost from our agricultural sector – particularly from small family owned/operated farms. At the moment, Tasmania could have an edge in the market by producing not only quality cannabis products in a state that is highly trusted for growing and processing medicinal botanicals, but also by developing a niche market of organically-grown medicinal cannabis (as Tim is sensitive to a range of chemicals, we would prefer organic/GM free cannabis for him – even if it means paying a higher price) .

Additionally, if Tasmania acts now, prior to too much of the market being controlled by multinational pharmaceutical companies, there will be significant savings to the government in subsiding prescriptions through the PBS (see again appendix F), as the costs will likely be signicantly lower if the growing, processing and scientific/medical research is done in Tasmania, producing uniquely Tasmanian products. Furthermore, all the profits will stay in Tasmania, rather than going off-shore to multi-national corporations.

Additional benefits to Tasmania could be realised with: less patients in hospital (eg less episodes of continual severe seizures); less costs for a range of pharmaceuticals to be subsidised; more people being able to return to work (eg those recovering from Lyme disease, or carers not having such a demanding workload).

We believe medical cannabis industry will have significant social, economic and environmental outcomes for Tasmania. We need it now.

Peter, Beverley and Hannah Rubenach