

cannabis.consultation@canada.ca

Subject: notice of intent cannabis consultation

I am replying to your notice in the Gazette regarding Cannabis scientific research and other questions pertaining to changes to the Cannabis Act.

I strongly oppose the use of human subjects for any cannabis research, medical or otherwise. I base this on bioethics that rule such research under international standards. No research should be conducted on human subjects unless research on animals point to safety and efficacy. Research on cannabis does not show this and therefore it is unethical to proceed to research on humans or for that matter more animals.

There are now tens of thousands of research results on the topic of THC/CBD and all are available to refer to on Pub Med. These studies do not point to safety or efficacy but rather build the case that cannabis THC/CBD are not safe for human consumption – at no age are these products safe nor for either females or males.

Hundreds of millions of dollars have been spent by the Canadian government on the research of THC-CBD and other governments around the world and their agencies have spent billions on determining risks. There is enough science now to warn all from using these products for any purpose. The drug manufacturers of Dronabinol, Epidiolex, and other THC CBD synthetic drug productions show clearly in their side effect profiles that these products are not without serious and even what are life-threatening side effects – including but not limited to an increase risk of suicide ideation and activation, birth defects, organ failure and addiction.

The Canadian government allowed for the legalization of THC and CBD knowing full well the risks these products pose to the general population, not limited to pregnant women and their offspring, nor men who wish to produce children, or those with heart, liver or other diseases or disorders including a pre-disposition for serious mental disorders, or for addiction.

The government of Canada allowed for the commercialization of products that are well established to cause serious health risks for offspring both in vitro and at birth and beyond. And yet no serious campaign was initiated to alert women to this fact – as we can see in the rising rate of pregnant women who have taken up the use of these products before, during or after pregnancy.

The Canadian government who legalized these products knew full well that Health Canada scientists and researchers and bureaucrats were party to documents that showed the risk of low levels of THC and CBD to men and women as well as youth. The Canadian government was warned by Health Canada researchers and bureaucrats of the scientific body of evidence that establishes these products are dangerous to the reproductive health of both men and women and they went on regardless with their plan.

Health Canada documents state that men should not use cannabis/marijuana (THC CBD) if they wish to have children. This document was presented as evidence to the federal task force. Instead of acting on this document the chairpersons of the task force sealed the meeting and all documents for at least 50 years from the public.

When a Minister of Health was provided with a risk assessment of THC, which showed even small amounts not to be safe for use the Health Canada official was fired and that report shredded.

When Dr. Stewart Reese was called to testify before the House of Commons Standing Committee on Health, charged with hearing Bill C45, he was uninvited when some of the people on the government side of the committee discovered he was going to speak on DNA damage and parental THC use.

When reputable witnesses appeared before the Senate Committee to hear on Bill C45 – Senate assistants took it upon themselves to attack these witnesses position on social media to the world at large.

When an evidence based scientific community led by Patrick Kennedy and Kevin Sabet circulated an information package to the Senators of Canada they met with a highly dubious critical attack by industry and the co-chair of the Task Force on Cannabis and others within the Canadian cannabis industry and shockingly within the research community. This document and the orchestrators of this attack deserve serious scrutiny to which as of this date there has been none.

Conclusion

In all further communication cannabis/marijuana should be discussed as THC and CBD only. Cannabis/marijuana are meaningless words now given the genetic modification of the plant by producers and the industry.

THC and CBD remain unworthy of the classification of medicine by the legitimate definition of the word and they remain dangerous to the public and should never have been legalized by any responsible government.

It remains an open question as to what lies ahead for any government that would see fit to legalize products with such risk profiles defined by evidence based science as is the case of THC and CBD.

Here is the position of Health Canada and this should be relied upon in any discussion regarding experimenting on human subjects, any discussion of furthering potency limits, or loosing of any restrictions. In 2021 a formal review of the Cannabis Act is to begin. This should be an opportunity for the opposition parties of Canada to interview serious scientists and review the evidence. No changes should be made until this has been conducted.

We have three hours of taped testimony from an individual who was with Health Canada who can testify on the risk assessment that neve saw the light of day. The scientific community stands at the ready to assist in providing the over 37,000 research papers now available to support my position.

Pamela McColl
BC Canada

Consumer Information - Cannabis (Marihuana, marijuana)

[\(PDF Version - 103 K\)](#)

The courts in Canada have ruled that the federal government must provide reasonable access to a legal source of marijuana for medical purposes.

The legal sources of cannabis for medical purposes are licensed producers, personal production and designated production. [A complete list of licensed cultivators, processors and sellers can be found on the Health Canada website.](#)

Cannabis is not an approved therapeutic product and the provision of this information should not be interpreted as an endorsement of the use of cannabis for therapeutic purposes, or of marijuana generally, by Health Canada. This leaflet is designed by Health Canada for patients authorized to possess cannabis for medical purposes. It is based on the document ["Information for Health Care Professionals: Cannabis \(marihuana, marijuana\) and the Cannabinoids"](#), and is a summary only - it will not provide you with all the facts about cannabis for medical purposes.

Contact your health care practitioner if you have any questions.

Serious Warnings and Precautions

Keep any fresh or dried marijuana and cannabis oil out of reach of children.

Cannabis (marihuana, marijuana) contains hundreds of substances, some of which can affect the proper functioning of the brain.

The use of this product involves risks to health, some of which may not be known or fully understood. Studies supporting the safety of this product have not yet met the standard required by the Food and Drug Regulations for marketed drugs in Canada.

Smoking cannabis is not recommended. Do not smoke or vapourize cannabis in the presence of children.

Using cannabis or any cannabis product can impair your concentration, your ability to think and make decisions, and your reaction time. It can also increase anxiety and cause panic attacks, and in some cases cause paranoia and hallucinations.

Cognitive impairment may be greatly increased when cannabis is consumed along with alcohol or other drugs which affect the brain (e.g., benzodiazepines, barbiturates, and other drugs).

About This Product

What the product may be used for

Your health care practitioner may have authorized the use of cannabis (marihuana, marijuana) for the relief of one or more of the following symptoms associated with a variety of disorders which have not responded to conventional medical treatments. These symptoms (or conditions) may include: severe refractory nausea and vomiting associated with cancer chemotherapy; loss of appetite and body weight in cancer patients and patients with HIV/AIDS; pain and muscle spasms associated with multiple sclerosis; chronic non-cancer pain (mainly neuropathic); severe refractory cancer-associated pain; insomnia and depressed mood associated with chronic diseases (HIV/AIDS, chronic non-cancer pain); and symptoms encountered in the palliative/end-of-life care setting. This is not an exhaustive list of symptoms or conditions for which cannabis may be authorized for use by your health care practitioner.

The potential therapeutic and adverse effects associated with cannabis use may vary depending on the amount of cannabis used and the concentration of cannabinoids in the cannabis product, the frequency of cannabis use, the patient's age and medical condition, previous experience with cannabis or cannabinoids, and the use of other prescription or non-prescription drugs. For more detailed information on potential therapeutic uses and adverse effects, please consult the "[Information for Health Care Professionals: Cannabis \(marihuana, marijuana\) and the Cannabinoids](#)".

What the active ingredients might be

- Tetrahydrocannabinol (THC)
- Cannabidiol (CBD)

The type and amount of these ingredients may vary depending on the cannabis strain.

What the other ingredients might be

There are over 70 different cannabinoids as well as hundreds of other chemicals in cannabis. Many of the chemicals found in tobacco smoke are also found in cannabis smoke.

What the product does

One of the principal active ingredients in cannabis (THC) acts on very specific targets found in the body known as cannabinoid receptors. Other cannabinoids, such as CBD, may also have targets other than the cannabinoid receptors. Cannabinoid receptors are found throughout the body, in most tissues and organs, but they are especially numerous in the brain and nervous system. Cannabinoid receptors are involved in the regulation of many bodily functions including: brain and nervous system activity, heart rate and blood pressure, digestion, inflammation, immune system activity, perception of pain, reproduction, wake/sleep cycle, regulation of stress and emotional state and many other functions. For more detailed information, please consult the "[Information for Health Care Professionals: Cannabis \(marihuana, marijuana\) and the Cannabinoids](#)".

When the product should not be used

Cannabis should not be used if you:

are under the age of 25

are allergic to any cannabinoid or to smoke

have serious liver, kidney, heart or lung disease

have a personal or family history of serious mental disorders such as schizophrenia, psychosis, depression, or bipolar disorder

are pregnant, are planning to get pregnant, or are breast-feeding

are a man who wishes to start a family

have a history of alcohol or drug abuse or substance dependence

Talk to your health care practitioner if you have any of these conditions. There may be other conditions where this product should not be used, but which are unknown due to limited scientific information.

Ref: <https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/licensed-producers/consumer-information-cannabis.html>

<https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/information-medical-practitioners/information-health-care-professionals-cannabis-cannabinoids.html>

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