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Subject: HSB 164
Date: Tuesday, February 28, 2017 6:04:00 AM
Attachments: [CVCV007415_2009.pdf](#)
[05771_CVCV051068_ATAT_2771705.pdf](#)
[09-1789_2010.pdf](#)

Dear Rep. Klein,

The only time the pharmacy board has not followed federal scheduling is when I sued them in 2009. They recommended reclassification of marijuana in 2010 after I sued them and won.

I see no reason to tell the board to recommend rescheduling of a product before it is approved by the FDA and the DEA. The board does that all the time on a routine basis after a drug products has been approved by the FDA and the DEA.

The board also uses emergency scheduling for extremely bad substances that the FDA and the DEA hasn't gotten around to scheduling yet. They never use their emergency scheduling power for a new FDA and DEA approved drug.

The pharmaceutical company lobbying for this (Greenwich Biosciences, Inc.) is taking advantage of the situation. Every pharmaceutical company could make the same argument they are making, "my drug is so special it should get emergency approval."

I am attaching some of the documents I am referencing, the court ruling, the board ruling, and the Iowa Supreme Court ruling.

Another issue is that the DEA moved hydrocodone "combination" products to schedule 2 in 2014 or maybe earlier. The board has been asking the legislature to reschedule hydrocodone combination products from schedule 3 in Iowa to schedule 2 since that time.

The legislature has not acted on it.

What harm has resulted?

None.

Doctors have to have both state and federal licenses, so hydrocodone combination products are effectively in schedule 2 in Iowa unless Iowa moves them to schedule 1. The more severe of the two (state and federal scheduling) prevails, because doctors and pharmacists have to have both state and federal licenses to prescribe and dispense pharmaceutical drugs.

The legislature could put Epidiolex into schedule 2 today, or any schedule the legislature wants. There is no reason to force the board to make a recommendation back to the legislature. There's no point. If the board is not giving its advice, there's nothing for the board to do.

HSB 159, HSB 164, and SF 282 make no sense.

We could do this for every pharmaceutical company from now on.

This pharmaceutical company is taking advantage of us and should not get special treatment any more than any pharmaceutical company that comes out with a new drug. They are all assumed to be beneficial if the FDA and the DEA approve them.

The reason you see medical marijuana laws is because the government has never allowed research. Senator Grassley held hearings on this in 2015 where the Department of Health and Human Services admitted they have been blocking research for decades.

Here's a January 2017 document from the National Academies of Science saying the same thing.

<https://www.nap.edu/catalog/24625/the-health-effects-of-cannabis-and-cannabinoids-the-current-state>

Thank you!

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