

1 patients go through, the pain and the fact that if
2 there's a possibility that passing a medicinal
3 marijuana bill would help to ease their -- their
4 torment. The question I have for you is, why has
5 this not been brought into law before -- before
6 now?

7 That's all I have.

8 LLOYD JESSEN: Thank you. Do we have
9 a No. 22?

10 GEORGE McMAHON: After this could I
11 ask you to go back two numbers? I missed --

12 LLOYD JESSEN: Sure.

13 GEORGE McMAHON: My wife hurt her
14 foot. I was outside trying to get her to go home.

15 LLOYD JESSEN: Sure will.

16 GEORGE McMAHON: Thank you. I'm
17 No. 20.

18 JAMIE LAKERS: Good afternoon, board
19 and those in attendance here today. My name is
20 Jamie Lakers. I am No. 22. I like to get high.
21 I'll just start off by shocking you a little bit
22 with that statement.

23 I've been in a program of recovery for
24 over 19 years. I first started to self-medicate
25 back in high school with alcohol and marijuana,

1 testimonies -- and I've listened to a few
2 testimonies that this drug has no side effects, and
3 I disagree with those, you know. I went to a
4 doctor at about age 18 with severe asthmatic
5 conditions due to what I term today as bong lung
6 because of continuous smoking of marijuana, so
7 there is some side effects to this drug. It
8 will -- that's why it needs regulated.

9 There is also a potential for
10 overabuse. As a recovering addict, my mind will
11 try to convince me that I want to get high because
12 I like to get high. It does not differentiate
13 between the drugs I need to alleviate my pain and
14 the drugs I want for recreational use. I need help
15 in that, and I need regulated dispensing of my
16 medications lest I become addicted to those.

17 Let's see what other notes that I've
18 got prepared? Paraquat. Recovery. You know, the
19 disease of addiction will affect marijuana users.
20 There are many programs available today for those
21 who do become addicted to marijuana. We need to --
22 we need to remove this drug from its taboo. We
23 need you to consider with an open mind its relevant
24 uses.

25 You've heard many testimonies today

1 trying to figure out just what it was that was
2 wrong with me. You know, I've heard a lot of
3 symptomatic things that I tried to self-medicate
4 myself with.

5 My appeal to you today is not on my
6 behalf but on the behalf of all those here. I
7 still suffer from chronic pain. I may need this
8 drug in my repertoire of other drugs to help
9 alleviate that pain. I'm not sure. That's a
10 decision between me and my doctor, I hope, but we
11 need your help for us to make informed decisions
12 that we can move on into that prescribed treatment.

13 There are reasons why I appeal to you
14 today to remove this from a nonmedical use to a
15 medical use purpose. First off is the legalities
16 of it. We don't need to -- I first started my
17 first growing operation for a friend with cancer
18 back in 1980. We did this because we wanted to.
19 Again, Reason No. 2 I would like you to consider
20 removing this, because the drugs out there were of
21 inferior quality and oftentimes poison. I refer
22 back to if any of the stoners here today would
23 remember the paraquat marijuana on which was
24 infested the marketplace.

25 And you know, today you heard

1 from sleep disorders to the anxiety disorders to
2 chronic pain relief to antinausea. These are all,
3 in my humble opinion, legitimate reasons to remove
4 this drug from its nonmedical use to a significant
5 use, to treatment of patients who need this for
6 their use.

7 Again, I appeal to you guys to put
8 this into a legal use because since 1980, it's been
9 an illegal use. That does not justify it as a
10 legitimate use or a use or maybe even convince you
11 that it needs more penalties associated with it.

12 I don't know what's in your heads
13 today. I would like to see that this consideration

14 be given an adequate, open -- And thank you today
15 for having a discourse of communication in which we
16 are given a chance to let you folks know that this
17 drug does have -- and the homework is in. I mean
18 the studies have been done. The individual
19 testimonies are here today, so you know, it does,
20 and please consider the use for this particular
21 drug for medical use. And with that I pass.

22 LLOYD JESSEN: Thank you. And we'll
23 have George next.

24 GEORGE McMAHON: Thank you. I'm
25 George McMahon, M-c-M-a-h-o-n. And I've heard

1 every story today that I've ever heard. You know,
2 it runs the gamut in society. Every one of us is
3 out there.

4 What they need is what we've given
5 them, scientific evidence and human intercourse.
6 We need to -- excuse me -- social intercourse. We
7 need to show them what this section -- this
8 section -- we need to show them in a way, not to
9 say that the men and women on this board don't
10 understand. It's to say they do understand, but up
11 until now, we've not given them a reason to make
12 any decision anyway.

13 And now that's what we can do, and in
14 my mind, we're helping them by backing them in the
15 decision we want. Let's hope that's the decision
16 they come to.

17 I think in my mind -- it's not as
18 analytical as most pharmacists I know, but in my
19 mind the scientific studies will be the final
20 chapter in this book. I don't think they can read
21 them any more than I could and read the terms and
22 the things that these compounds are doing in the
23 body and not understand that they are exactly what
24 they do except without harm.

25 So do you want my name spelled and

1 stuff, you guys? Would that be -- okay. And I'm
2 going to get out of here and let the people go on
3 because this is a good meeting. Thanks a lot.

4 LLOYD JESSEN: Thank you, George. Do
5 we have a No. 23?

6 MR. COHN: Right here. Good
7 afternoon, ladies and gentlemen. My name is
8 Mr. Cohn, C-o-h-n. I'm Speaker No. 23. I'm not
9 here today to plead for myself. I want to talk
10 about my wife, Connie.

11 My wife has very bad arthritis. She
12 has high blood pressure. She has eating disorders.
13 She's been put on different pain medications. My
14 wife and I are originally from California, and we
15 have been exposed to legalized marijuana. I'm not
16 saying that marijuana is bad. I've seen a lot of
17 good.

18 After being prescribed medications
19 that were dangerous for my wife and being taken off
20 and put on other dangerous medications, we asked
21 her doctors in California about medical marijuana,
22 and they agreed for her to check it out and to see
23 if it helped relieve her pain and her discomforts.

24 We went to a -- regular doctors in
25 California do not prescribe medical marijuana.

1 They're afraid of retribution. They're afraid to
2 have their medical licenses taken away from them,
3 so you end up going to holistic doctors,
4 alternative medicine doctors.

5 If you do do this, please try to help
6 regulate how the doctors dispense prescriptions.
7 These doctors in California will sell a
8 prescription for \$150 for six months, \$300 for a
9 year, and they expect patients to come back every
10 year and pay them these fees.

11 I've seen 15, 20 patients waiting for
12 prescriptions in the waiting room. They get the
13 diagnostic from the actual doctors. They review
14 it. They say "Okay. You can have medical
15 marijuana." They collect their fee. There's no
16 medication. You have your permit.

17 Then you go to the health department.
18 It's \$150 at the health department to get a card to
19 say that you're a patient, and you can smoke
20 medical marijuana and have possession of marijuana.
21 You go to a compassion club, which is a joke,
22 because you go to the compassion club, and they
23 want 150 to \$250 to join their club, no medication.
24 Medication is sold for \$10 to \$220 a gram.

25 The State of California says that they

1 want to legalize marijuana. They want a \$50 tax
2 per ounce for marijuana. I don't see compassion
3 there.

4 The one plus of Proposition 215 and
5 Senate Bill 420 is that they allowed patients to
6 grow their own medicine in small batches. In San
7 Diego they were allowed to grow 28 plants, a couple
8 of mother plants, some clones, and some plants
9 allowed for -- to fully mature for their medicine.

10 After my wife had been on a medical
11 marijuana patient for five months, we were
12 approached by two different doctors referred by her
13 doctor about supplying medical marijuana to cancer
14 patients, patients with HIV, and people that we've
15 come to know and care about, and their medications
16 would mess them up, and they couldn't eat, but
17 after they started using cannabis, they started to
18 gain weight. They started to stabilize, and it was
19 an amazing transformation in their lives.

20 People want to help people. We all
21 have hearts. And I've listened to the stories, and
22 I know that people hurt. There are people that are
23 just greedy, you know. If you do go along with
24 medical marijuana, watch out for the patients. Be
25 compassionate for the patients. Okay?

205

1 The putting people in jail, putting
 2 people -- giving people criminal records because
 3 they're trying to seek allevement for their
 4 ailments, that's wrong. It's gone on for too long,
 5 the horror stories, the propaganda put forward by
 6 the government because they don't know how to
 7 regulate this.

8 If people were allowed to grow their
 9 own cannabis, the therapeutic value of working in
 10 the garden, it's not a plant that just pops up
 11 overnight. It's a plant that takes five months to
 12 grow out. It takes a couple of months to dry. It
 13 takes another two, three months to properly cure it
 14 to a medicinal cannabis state. Okay?

15 They're not going to turn around and
 16 going to sell their medications. If they go out
 17 and they just buy their medications, they have a
 18 tendency -- they may run short of money, and they
 19 may want to sell some of their medicine. People do
 20 it with regular pharmaceutical medicines also.

21 But if they grow it themselves and
 22 they learn to respect the plant, it's therapeutic
 23 for them, and they're less likely to actually sell
 24 their medications at that point.

25 I thank you for giving me this time.

206

1 Thank you.

2 LLOYD JESSEN: Thank you. Do we have
 3 a 24? No. 24 or higher? Okay.

4 ADDY: Could we ask a question in
 5 between?

6 LLOYD JESSEN: Yes.

7 ADDY: So the hearings are over --
 8 when do you anticipate those being over?

9 LLOYD JESSEN: The final hearing will
 10 be November 4.

11 ADDY: And will you make your
 12 recommendation -- are you trying to make a
 13 recommendation to the new legislature?

14 LLOYD JESSEN: Yes. It's our goal to
 15 have our recommendation done by the end of December
 16 so that it's ready when they come into session in
 17 January.

18 DEBBIE JORGENSON: Do you want to come
 19 on up here?

20 ADDY: Do you need or do you want any
 21 additional written testimony or --

22 LLOYD JESSEN: We'll take --

23 ADDY: -- documents?

24 LLOYD JESSEN: We'll take any written
 25 comments that people want to give us, yes.

207

1 ADDY: Okay. So if other people could
 2 not make it today, they could write something.

3 LLOYD JESSEN: Surely, yes.

4 Would you just please state your name
 5 for us?

6 PAT BRENO: Yeah. My name is Pat
 7 Breno.

8 LLOYD JESSEN: Can you spell your last
 9 name?

10 PAT BRENO: B-r-e-n-o.

11 LLOYD JESSEN: Thank you.

12 PAT BRENO: And I've never done this,
 13 so you just kind of have to tell me. I read a
 14 little bit in the paper about what you're trying to
 15 do and get some input on medical marijuana.

16 I came up in the age of the hippies
 17 and the marijuana and the drugs. I never in my
 18 life ever used anything. A couple years ago I was
 19 deathly ill, and as a last resort, they did the
 20 medical marijuana. I think it helped me to certain
 21 degrees.

22 At that point a lot of the people that
 23 use marijuana said that smoking it is the best way
 24 of doing it, but there's also methods of using it
 25 in tea and in food and stuff, and I think that if I

208

1 were that ill again, I would go to whatever
 2 measures it took to get that if that's what was
 3 going to help me.

4 And I think that it should be
 5 legalized for, you know, instances such as what I
 6 was in, and I think that, you know, not being a
 7 drug user, that takes a lot for me to say that, so
 8 I really think that you should look at it for
 9 medical purposes. Anything else?

10 LLOYD JESSEN: Thank you. Any numbers
 11 25 or higher?

12 GLENN R. STEINE: My name is Mr. Glenn
 13 R. Steine, and I am the national political scout
 14 for the National Republican Party. My job here is
 15 to be the final speaker. Is that --

16 LLOYD JESSEN: We'll be here until
 17 seven tonight, so I can't guarantee you'll be the
 18 final speaker.

19 GLENN R. STEINE: I'll wait for any
 20 other person that wants to speak ahead of me. I
 21 have a job to do that we like to have the last word
 22 if it's possible.

23 LLOYD JESSEN: That's fine. We'll be
 24 here until seven, though, so if you speak now, you
 25 may not be the final speaker. You may be if we

1 don't have any more speakers, but we don't know
2 because we advertised that we would be here until
3 seven.

4 UNIDENTIFIED MALE: Let him talk. Let
5 him talk.

6 UNIDENTIFIED MALE: Come on with it.

7 UNIDENTIFIED MALE: Well, he don't
8 have to do that. If he has something to say, let
9 him say it.

10 GLENN R. STEINE: My name is Mr. Glenn
11 R. Steine, spelled G-l-e-n-n R. S-t-e-i-n-e. And
12 as I said before, I am a national political scout
13 for the National Republican Party, and my job for
14 the Republican Party is to know what is going on,
15 what is coming off, and who and what are coming
16 down the road.

17 What I would like to discuss with you,
18 I majored in economics at the University of Iowa in
19 Iowa City, graduated in August of 1961 with a B.A.
20 in economics. I also have one year in aeronautical
21 engineering at Iowa State University and one year
22 at John Marshall Law School in Chicago.

23 I would like to discuss the
24 economical -- or the economic facts of legalizing
25 medical marijuana. I believe that there is a very

1 slight danger of abuse of medical marijuana and a
2 much greater abuse of marijuana for recreational
3 purposes, so I believe that if you make some
4 changes in the classification of marijuana for
5 medical purposes and for the restrictions on
6 recreational use of marijuana that the public and
7 the users as well would be protected from abuses or
8 dangers from using medical marijuana, but there
9 would be much less use of marijuana if it was
10 legalized for medical use under the right
11 circumstances.

12 The economic, physiological,
13 psychological, and sociological uses of marijuana
14 for medical purposes would depend on the number of
15 people that use this drug and the amount that they
16 use and the length of time that they use, and there
17 are no statistics on any of those factors at the
18 present time, at least that I could find available
19 in the public record or research sources.

20 There are a number of factors on a
21 personal level that I believe would support the
22 medical use of marijuana in my own family. My
23 father died from extreme arthritis, severe
24 arthritis, as well as kidney failure, and my mother
25 died from a number of types of cancer, and both

1 were very painful, and they had a very difficult
2 period in their -- at the end of their lives, and
3 so I personally am in favor of legalizing marijuana
4 for medical uses, especially at the time of the end
5 of life.

6 Basically, you have three different
7 choices about what your policy will be. You can
8 keep the present policy. You can postpone any
9 decision until 2010, or you can indefinitely
10 postpone any decision for, say, one day, one week,
11 one month, one year, or longer periods than that,
12 but I believe it's time to take -- bite the bullet
13 and make a decision.

14 I think that you have the right or the
15 amount of discretion to change the classification
16 for marijuana for medical uses. I don't think as
17 the present law is written, the legislature has to
18 pass a new bill to legalize medical use for
19 marijuana.

20 I want to thank you for your time and
21 consideration, and I sure appreciate your having
22 these open forums or this hearing for the change in
23 the status of use of marijuana for medical
24 purposes. Thank you again. Have a good day.

25 LLOYD JESSEN: Thank you. Do we have

1 anyone else in the room who would like to speak?
2 Sure.

3 CARL OLSON: My name is Carl Olson,
4 and I'm from Des Moines, Iowa. I'm a Web
5 developer. But I have an opinion, so I'm going to
6 give it. Dr. Hertko talked about the 1972 Shafer
7 Commission report, and I have a copy of that report
8 that I'm going to give you later.

9 And Dr. Hertko also talked about a
10 case called State vs. Helmers, 1997. Judge John
11 Fister in Waterloo decided not to revoke a
12 patient's probation because he was using marijuana
13 on probation because his doctor swore out an
14 affidavit saying that it was the only thing that
15 would treat his pain. This doctor was a pain
16 specialist in Waterloo.

17 And in that decision, the judge noted
18 that marijuana was in both Schedule I and
19 Schedule II in Iowa and said that was so confusing
20 that he wasn't going to hold that against a medical
21 user because he couldn't see that the law made any
22 sense, and that was when I first realized that
23 there was a legal argument to be made.

24 And other people talked about a patent
25 that the federal government has on the

1 cannabinoids, the naturally extracted cannabinoids
2 in the plants. I have a copy of that patent that
3 I'm going to submit later.

4 And then finally, there's been some
5 talk about driving, and I have DOT driving studies
6 that show that marijuana is relatively safe, that
7 they haven't been able to show that it impairs
8 driving, so I'm going to submit those studies
9 later.

10 And that's all I have. Thank you.

11 LLOYD JESSEN: Thank you.

12 CARL OLSON: Thank you.

13 TIM HARPER: Hello. My name is Tim
14 Harper. I'm staying with Merlyn there, help to
15 take care of him. I don't have a lot to say about
16 myself. I mean I use marijuana, and I always have,
17 and I probably always will, but I also used a lot
18 of other things that I never really wanted to use,
19 but I mean it helped me stop. I was an addict of
20 cocaine and alcoholic my whole life.

21 I mean I come from a large family of
22 eight kids, and I was -- I've lived here since I
23 was five years old. I've had both my legs crushed.
24 I've experienced a lot of things in my life that a
25 lot of people in this room wouldn't dream of.

1 his cousin called and wanted him to try that, you
2 know, and it's just made remarkable -- helped him.
3 I mean it brought him to this day.

4 When I came back to his house, I was
5 staying at my mom's, and he was on his death bed.
6 I mean he was -- he was on the chemo. He had
7 nothing. He had nobody really with him or
8 anything, and he started smoking that. He was able
9 to eat. He lost over -- like he said, 65 pounds in
10 a very, very short time. And he's gained that
11 back. He's maintained his weight.

12 It helps with his blood pressure. He
13 was on four or five blood pressure pills. I mean
14 it's ridiculous. I'm on blood pressure pills, and
15 I don't even take them now because I use marijuana
16 also.

17 And I mean if you were to see his
18 blood pressure, it was 200 over 200, you know, and
19 five minutes later, it's like a teenager.

20 MERLYN CORDES: I would be willing to
21 be a guinea pig for you just so you could see that
22 the blood pressure pills don't help me, but the
23 marijuana brings my blood pressure down, and it's
24 not that I like to smoke because I don't drink, and
25 I don't smoke.

1 But I've helped him with his mother
2 after she had a massive stroke ten years ago, and
3 it changed her, of course, you know. It paralyzed
4 her right side. She couldn't speak.

5 During that time I had three strokes
6 helping take care of her, paralyzed my right side,
7 and I couldn't speak, and I might not be able to do
8 very good now, but words don't come out sometimes.

9 But I care about a lot of people, and
10 I've known -- I've known the fight has been on a
11 long time about this, and I think it should be -- I
12 think it should be legal completely. I mean
13 medical or otherwise because, I mean, it's out
14 there anyway. Kids are going to do it, just like
15 they do anything else. Government has made alcohol
16 legal.

17 I hear about -- every day I hear --
18 and I live on a busy street, and there's drunk
19 driving wrecks every day on Euclid there.

20 But he didn't get out a lot he wanted
21 to say, and I know -- I go to the doctors with him,
22 and I'm there for his pain, his crying, and his
23 moaning and crying and bathroom and have to wash
24 him up when he can't make it. I've got to do all
25 kinds of things, and since his -- I think it was

1 TIM HARPER: He's not a drinker or
2 smoker, him or his mother.

3 MERLYN CORDES: My father, my
4 biological father, died of cirrhosis of the liver
5 when I was very young because he drank a fifth of
6 whiskey, at least, a day. So I have a real problem
7 with alcohol. I don't like it. I don't like to be
8 around people that drink.

9 I don't enjoy smoking, and I don't
10 enjoy smoking marijuana, but I like the effect that
11 I get where I can eat. I don't have pain. That
12 pain I get, I can't describe it to you, but it is
13 awful, and I take two hits of marijuana -- that's
14 all I want, just two -- and I can feel that pain
15 just leaving my body, and I feel comfortable. I
16 can enjoy the rest of my day.

17 And I am terminal. I'm in Hospice of
18 Central Iowa. I'm a veteran. I go see
19 Dr. Shiimoto who's the oncologist at the VA
20 Hospital here in Des Moines. I have spoken to her
21 about it. She wished she could write a
22 prescription, but she can't. I've talked to my
23 primary-care doctor at the VA Hospital who also
24 said to me "If you can do it, do it." He said
25 "Just go ahead and do it." He can't write a

1 prescription.

2 TIM HARPER: My point is I've just
3 seen a lot of suffering with his mother, you know.
4 She gave her -- when she got diagnosed with cancer,
5 they gave her a week to a month, you know, and I
6 stuck with them, and I hung in there, and we kept
7 her alive over -- over a year, a year -- was it a
8 year and eight months she lived past that.

9 MERLYN CORDES: She lived to be
10 90 years old.

11 TIM HARPER: I wish there was
12 something there for her because the pain the cancer
13 brought her made her delusional. I mean you guys
14 talk about drugs and different things. I mean
15 these pills that they gave him and give me now -- I
16 guess I'm -- my body isn't functioning right now
17 from all the medicine I've had to take for
18 cholesterol and blood pressure, and what I have
19 now, my liver and everything is gone too now, I
20 guess, not doing right, so I don't even know about
21 that yet.

22 But it's just the suffering people are
23 going on. I know -- I'm going to go to the VA with
24 him, and I talk to people daily. I mean daily.
25 There's hundreds of people just in five minutes

1 that have family members dying from cancer.

2 All the people up there that have
3 cancer and anybody you talk to, anybody in this
4 room looks next to them knows somebody with cancer.
5 And I don't know whether it's in the food or
6 whether it's this or that. I mean there's so many
7 things to worry about than marijuana. You know
8 what I mean? When people are dying and children
9 are suffering and elderly people lose their homes
10 and everything else because they'll get in trouble
11 for trying to get something that will relieve their
12 pain. And it's --

13 MERLYN CORDES: I had -- 11 years ago
14 I had kidney cancer, so I lost my left kidney. And
15 at that time they cut you almost in half. I was in
16 intensive care.

17 TIM HARPER: My brother Joel just got
18 cancer. They took his kidney too.

19 MERLYN CORDES: Cancer is kind of a
20 friend of mine. It keeps coming back to me. I
21 don't know.

22 TIM HARPER: I'm sorry. I don't have
23 a whole lot to say, but I just wanted to put my two
24 cents in and do what I can to get it passed because
25 I think it's the only fair thing to do, you know,

1 for legitimate people that are sick. You know what
2 I mean?

3 And in my case it's helped me. I
4 haven't used street drugs for two years now, you
5 know, and I don't know where I'd be if I didn't
6 even use it because I'm like some other people that
7 I got an addictive personality. I was always
8 hyper. It's always mellowed me out and kept me in
9 place. You know what I mean? Or I could have been
10 in prison or dead probably.

11 You know, and I just want you guys to
12 understand there's more different things than just
13 people think -- people just want to get high.
14 There's a lot more to it than that.

15 ADDY: I have a quick question. Are
16 these practitioners that these people are talking
17 about who are saying --

18 TIM HARPER: Thank you.

19 ADDY: -- you know, "I wish I could
20 give you medical marijuana," are they talking to
21 you, or are they just -- is this just talking out
22 of the side of their mouth? Are they saying this
23 in their office?

24 MERLYN CORDES: They're talking
25 directly to me.

1 TIM HARPER: They can't do it legally
2 but --

3 ADDY: Are they talking to you also
4 saying that they want this for their patients?

5 UNIDENTIFIED FEMALE: You betcha.

6 ADDY: I'm not sure if they are.

7 LLOYD JESSEN: We want to kind of
8 maintain some order here. We don't want it to
9 just --

10 ADDY: Sure. Well, that's just a
11 question I have for you.

12 LLOYD JESSEN: Sure. And the board
13 does not really receive that type of input from
14 physicians in Iowa, no.

15 ADDY: Okay.

16 LLOYD JESSEN: We don't get that
17 request because I think they know federally --

18 MERLYN CORDES: They're afraid.

19 LLOYD JESSEN: -- it's illegal, so
20 they don't raise the question.

21 ADDY: They're afraid?

22 LLOYD JESSEN: Well, they know that
23 under federal law it's illegal, so they don't raise
24 the question.

25 ADDY: No, but I mean do they say that

1 they are for it?

2 LLOYD JESSEN: We don't hear that. We
3 don't get that input, and so that's part of the
4 purpose of these hearings, is if physicians want to
5 come and tell us their opinion, we want to hear it
6 so -- Any other numbers, 25 or above, to speak or
7 anyone else in the room who would like to speak at
8 this point?

9 Okay. We will stay here until
10 seven -- I'm sorry. Yes.

11 SEBASTIAN DONNER: I'll go ahead and
12 say something.

13 LLOYD JESSEN: Okay.

14 SEBASTIAN DONNER: Hi. I'm
15 Dr. Sebastian Donner. I have a Ph.D. in analytical
16 chemistry, and I work at Iowa State University,
17 actually in charge of a wine laboratory up there.

18 And first of all, I do appreciate that
19 you're taking the time and effort to listen to
20 people, and I know it's been a long day for you
21 guys.

22 But the basic -- if you take a look at
23 the whole issue of marijuana and whether it helps
24 people, there are a number of studies out there
25 that do document this, and I do intend on

1 this particular issue, not just marijuana overall
2 and legalization of it but keeping the focus of the
3 help that is out there for people and that's being
4 currently denied to a lot of individuals who could
5 very much benefit from this.

6 And that's all I can think of right
7 now. Thanks.

8 LLOYD JESSEN: Thank you. Anyone else
9 in the room? I think we'll take a break now for
10 about ten minutes, and we'll come back, and we'll
11 be here until seven, but we don't know if we'll
12 have more speakers or not.

13 (Short recess.)

14 LLOYD JESSEN: We're ready to start up
15 again, and I think we've got a No. 26.

16 DON BURNETT: How about 25?

17 LLOYD JESSEN: Or 25. Yes. Thank
18 you. Oh, yes, and if you could state your name and
19 spell it for us.

20 DON BURNETT: Sure. Don Burnett,
21 B-u-r-n-e-t-t. Start anytime?

22 LLOYD JESSEN: Yeah.

23 DON BURNETT: I'm a little bit angry
24 today that you're even holding these meetings
25 because I don't understand in all the past that

1 submitting some actual papers. Do you guys need
2 just references or the actual papers printed out?
3 Do you prefer --

4 LLOYD JESSEN: You can do it either
5 way.

6 SEBASTIAN DONNER: Okay. And
7 considering all the different people, I mean, that
8 are out there, I'm sure you've had a lot of
9 comments today from individuals who have utilized
10 medical marijuana and the differences that it can
11 make for people. I think it's -- it's important to
12 take a look at -- at the issue, which you're doing.

13 In terms of reclassification into what
14 schedule you will recommend and to put it in,
15 whether it be Schedule I, Schedule II, I took a
16 look at some of the drugs that are represented in
17 the different categories that the DEA has different
18 schedules for, and I was actually quite surprised
19 that even Schedule III and even some Schedule IV
20 drugs were, in my personal opinion, perhaps
21 addictive, you know, not -- not necessarily as
22 controlled as I would have thought compared to
23 medical marijuana.

24 I do think it's important to keep the
25 focus of that we're looking at medical marijuana in

1 we've let Fen-Phen go by. We've let gay marriage
2 go by. We've let gambling go by. All because a
3 few years ago -- to me a few years ago -- J. Edgar
4 Hoover demonized marijuana.

5 There's nothing that I have ever heard
6 of in the negative like some of these
7 pharmaceutical drugs that are approved by the FDA,
8 used by pharmaceutical companies, researched, big
9 dollar buck, and I'm guessing -- I don't understand
10 why they're having these hearings, why we don't go
11 ahead and have it. There's already 13 states that
12 do have it, and I'm wondering why Iowa is even
13 bothering. Is it just a big PR thing that we're
14 trying to go over here?

15 It's J. Edgar Hoover was a
16 cross-dresser. It's well known. Why are we going
17 by what he did 50 to 60 years ago?

18 The reaction with marijuana, people
19 need it for medical reasons. It's not like we're
20 going to legalize it for every high school kid.
21 We're not going to legalize it for the selling on
22 street corners.

23 I watched an article on the History
24 Channel just a few days ago where opium was used in
25 the Civil War, and it was called the Army's

1 Disease. It was legal. It was prescribed by
2 doctors.

3 Then they tried to give out heroin.
4 They would rather have opium and heroin per their
5 story on the History Channel given out by doctors,
6 prescriptions, than the alcohol that we now have
7 legal along with cigarettes, legalized by the State
8 and backed by the State, that they'd rather do
9 those than a gentleman go and get in fights in
10 bars, go up and beat his wife, his girlfriend,
11 whatever. That's all fine and dandy. They passed
12 that. Didn't have any kind of hearings on a drug
13 that would help people get through cancer or any
14 other disease. It's only medical marijuana that
15 we're asking, and I don't understand why Iowa is
16 even bothering with this.

17 You got Ritalin. Ritalin was for
18 small children. At the time my kid is now in the
19 military service and in Baghdad, Iraq, we didn't
20 know, but the counselor before the school tried to
21 prescribe it, found out the school districts of
22 Iowa got kickbacks from the pharmaceutical
23 companies to put kids on Ritalin. The school got
24 funds. They didn't have any studies. She said
25 "Don't let them put on studies" because you have

1 pharmaceutical companies are getting for these
2 drugs like the RU whatever, the day-after pill.
3 They didn't have any problems passing that right
4 through.

5 They now have got this new drug for
6 young girls for venereal disease. They're
7 questioning that. The doctors are not -- as of
8 last night, NBC News said they're no longer --
9 doctors are no longer going to prescribe it because
10 they're afraid of the aftereffects being sued, and
11 their insurance for malpractice is going up, and
12 the doctors are stopping that. That was FDA
13 approved.

14 Fen-Phen. Miracle drug for people
15 overweight. Recalled because the heart -- it was
16 damaging people's hearts and killing them. Has
17 marijuana ever come out in any study and killed
18 someone from taking it as far as for medical use?
19 I have yet to hear from anyone. I wasn't here all
20 day. If there was, I apologize.

21 Let's see. I guess I'm just so upset,
22 it isn't even funny. I'll let No. 26, my ex-wife,
23 speak. Or yeah. Thank you very much.

24 LLOYD JESSEN: Do we have another
25 speaker?

1 yet to study it. There is no studies for Ritalin,
2 but yet we're stopping marijuana for medical
3 treatment that's been around since the 1600s people
4 have used it, according to the History Channel.

5 I'm extremely upset, as you can hear
6 in my voice. I'm nervous, but the FDA has not
7 tried to recall. The CDC has not come out and said
8 anything about marijuana, trying to get it away
9 from these other 13 states for medical use.

10 It sounds a lot like -- in my
11 statement here it's a lot like the kettle calling
12 the skillet black. Why are we doing this one and
13 not these others? Why are we not pulling

14 cigarettes right off, alcohol off? Because
15 prohibition didn't work. We found that out. It
16 couldn't work.

17 You might as well get it on the market
18 and get it in the medical, and you'll get the
19 almighty buck back to the state dollar is the only
20 thing I can feel that these hearings are about is
21 to get the State their money for their share of the
22 percentage of sales.

23 I feel it's a big hypocritical deal to
24 have these hearings and why it's even -- we're even
25 having these. The multimillion dollars that the

1 KATHLEEN BURNETT: Yes. Hi. I'm
2 Kathleen Marie Burnett. I am a patient. I'm
3 currently on Marinol. Marijuana has been known for
4 many years to increase the appetite which would
5 help the anorexic and AIDS-affected patients.

6 It is known to calm sour stomach, you
7 know, upset stomach, and patients with
8 chemotherapy, it's been known to help them and
9 others with stomach problems. It's known to kill
10 pain, which that's why I'm on the Marinol. No side
11 effects.

12 All these other medications that I've
13 been on have a list a mile long of side effects,
14 and a lot of them, one of the side effects includes
15 death. I've never heard of that on marijuana, and
16 there's no proof that marijuana can cause death.

17 I just don't understand why you can
18 prescribe all these medications to me and have all
19 these different adverse effects. They gave me a
20 prescription for Ibuprofen. I was so sick, I ended
21 up in the hospital. They had to flush it out of my
22 system. But yet it's legal, you know.

23 But marijuana, they have to fight over
24 it to get it legalized. They didn't have to fight
25 over Ibuprofen or any of these others that have

1 been recalled, as my ex-husband has mentioned.

2 I sure appreciate your time, and
3 hopefully we get this passed. Thank you.

4 LLOYD JESSEN: Thank you. Do we have
5 anyone else waiting to speak?

6 CHUCK CHILDERS: Hi. My name is Chuck
7 Childers. And I'm not mad about nothing. I'm not
8 happy about it. I think marijuana should be
9 legalized for medicinal purposes. It does kill
10 pain.

11 I used to smoke marijuana because my
12 back, I have deteriorating disks. I have several
13 problems. But of course, at the time I was smoking
14 it, the stuff was coming up from Mexico, and the
15 United States Government was spraying it with
16 paraquat, and that's a defoliant, which I don't
17 know. Ended up really screwing up my lungs. And
18 that's because it wasn't legal.

19 So by not legalizing it, all you're
20 doing is backing the cartels. You're giving money
21 to dope dealers. You know, give it to the State.
22 Give people something that will kill the pain. I
23 mean, you know, you prescribe drugs that will kill
24 people, and I never heard of anybody dying from
25 marijuana. I mean you might overeat, but you know,

1 doctors have given him are steroids, opiates, and
2 things that have tore up his stomach lining.

3 He has been smoking since -- since he
4 was probably 15 or 16. He found it from a friend.
5 There again, just like this older gentleman over
6 here, I've tried to educate him on the factor that,
7 you know, the cartels that are bringing in some of
8 that illegal dope, it's sprayed with illegal, you
9 know, things that will kill you. It's not good for
10 you.

11 But at the same time, the opiates have
12 not done anything good for him, and just like the
13 other older lady here that had to have her system
14 flushed out, I had to rush my brother to the
15 hospital at 16 years old for taking too many
16 Ibuprofen because they prescribed him 800 milligram
17 Ibuprofens.

18 And I'm four years older than my
19 younger brother. To rush your younger brother when
20 you're a mere 20 years old to the hospital and not
21 knowing if he's going to die from Ibuprofen, not
22 even knowing the dangers of Ibuprofen, it's kind
23 of -- it kind of makes me sick to my stomach.

24 I'm not really angry. I'm not here to
25 get angry at nobody. I'm not here to -- I'm just

1 that's about as far as it goes. And that in itself
2 is helping the economy because you're going to the
3 grocery store more often.

4 But I don't know. I don't have a
5 whole lot to say. I didn't prepare anything or
6 anything. And I didn't even know this meeting was
7 going until this afternoon.

8 But for the people's sake, I hope you
9 guys can see it in your heart to help the people.
10 Help the State. I mean we're in enough trouble
11 now. Why keep helping the cartels and killing us
12 off from the poison dope? Thank you very much.

13 LLOYD JESSEN: Thank you. Do we have
14 anyone else wanting to speak?

15 DONALD GILMORE: Do we have to have a
16 number, or can we just go up and speak?

17 LLOYD JESSEN: If you're going to
18 speak, we'd like you to come down and use the
19 microphone, please.

20 DONALD GILMORE: My name is Donald
21 Gilmore. I came to this -- I heard about it this
22 morning -- for my brother. His name is Justin
23 Gilmore. He's been diagnosed with rheumatoid
24 arthritis since he was nine.

25 Since then, the only thing that the

1 here to speak out and speak my opinion. I'm not
2 even here to really say that we should be
3 legalizing it for everybody on the streets like
4 myself or anybody else. I'm currently at DMACC in
5 college.

6 I'm just here to speak out on, like we
7 said, medicinal uses for people who have cancer,
8 whoever has arthritis, to help them with the pain.
9 The steroids have done him some good, but they
10 create nausea that he cannot deal with. He just
11 plain flat-out cannot deal with it.

12 I just basically want to voice my
13 opinion because like they've said, I mean everybody
14 has seen it on GEL or anywhere else,

15 440,000 Americans die from tobacco use every year.
16 I mean and I'm not saying here to say tobacco use
17 should be illegal either, but it's their choice to
18 go and use it for no reason, and there's reasons
19 for medical marijuana.

20 I've currently done papers in college
21 over it because of the things that it's helped him
22 with. He currently -- because Iowa has it
23 illegally, he hasn't been able to get Marinol or
24 anything of that sort because we don't have the
25 resources, but there's -- I mean, like he's

1 mentioned with alcohol or anything else, that it's
2 done that, but there's studies out that it's helped
3 with Alzheimer's disease. It hasn't been 100
4 percent proven yet that the plaque that's created
5 by that enzyme, that it's helped with that.

6 It's helped with appetite stimulation,
7 of course the pain relief. It's also -- they're
8 still doing a study, but it was in Popular Science
9 magazine two years ago about people with diabetes.
10 It's helped kind of regulate their sugar just a
11 little, not -- not 100 percent, but I just think
12 that we should definitely consider it for medical
13 use.

14 That's about all I have to say. Thank
15 you.

16 LLOYD JESSEN: Thank you. Well, we'll
17 basically stay here one more hour, and if we have
18 more people come in, we will take their comments,
19 and we will wrap it up at 7 o'clock so --

20 KIRK STEVENS: Can I say something?

21 LLOYD JESSEN: Sure.

22 KIRK STEVENS: My name is Kirk
23 Stevens. I'm a high school teacher at Hoover High
24 School. This is an issue I have my students debate
25 in the classroom, both in government class and in

1 psychology class, and it's a complex one.

2 Is there good to marijuana? Yes.
3 There's a lot of things. You guys have done a
4 great job of saying that it helps with pain, helps
5 with glaucoma. There are -- there are definitely
6 some benefits to it.

7 The thing is, where do we close the
8 can of worms once we legalize it? How do we say
9 it's distributed? Who's to say it isn't going to
10 be illegally prescribed like other drugs, and how
11 is that going to shut off the market and make it
12 less for other people?

13 I'm not saying we shouldn't do it, but
14 I'm just saying I think there's a lot of things we
15 should think through. You know, and there are side
16 effects to it. Attention, usually more socially
17 inactive kids, more, like, with dropout.

18 As far as the lung cancer and that, I
19 do think that it is, you know, part of, you know,
20 when it's not natural, but man, there's just a lot
21 of things to consider, and I hope we don't rush
22 into it, that we think through it, that we keep it
23 just for certain cases, and I'd be real careful
24 because, you know, we have to draw a line somewhere
25 with drugs, and I don't know necessarily marijuana

1 is the line, you know, because you can make a case
2 that cigarettes should be the line, but you know,
3 obviously, there are drugs out there we can't let
4 people have access to, and we have to think about
5 the greater good.

6 There's obviously some good medicinal.
7 What good would there be with increased access to
8 kids getting it illegally through the medical
9 system? It's something to consider.

10 DEBBIE JORGENSON: Thank you.

11 LLOYD JESSEN: Thank you.

12 JENNIFER KLAGES: Hello. My name is
13 Jennifer Klages. Thank you for taking the time to
14 listen.

15 DEBBIE JORGENSON: Jennifer, would
16 mind spelling your last name, please?

17 JENNIFER KLAGES: Klages. It's
18 K-l-a-g-e-s.

19 I'm a patient who suffers from chronic
20 pain, and I am in a rush for medical marijuana. I
21 take more pills a day than I care to admit, and
22 I've had three brain surgeries, a tumor in my
23 spinal cord, and I do not use marijuana because I
24 do not have a safe connection for it, a way to get
25 it that I know hasn't been sprayed or that the

1 police will not arrest me.

2 So I do think it's important that we
3 look at this issue from a medical standpoint and
4 not as a pro-legalization overall and really take
5 into consideration patients that are currently in
6 need. There's a lot of hospice patients, a lot of
7 chronically ill patients that could really benefit.

8 I don't have a lot of research to tell
9 you about or anything, but I just wanted to put a
10 face with it and say that there are people who are
11 hurting. Thank you.

12 LLOYD JESSEN: Thank you.

13 SEBASTIAN DONNER: Hi. I'm Sebastian
14 Donner again. I wanted to take another

15 opportunity. I wasn't prepared at all for this,
16 but when I was sitting there, I had a few thoughts
17 that I wanted to share with you guys and ladies.

18 And one thing that struck or that
19 is -- I feel is one reason why there's not as many
20 people here today, especially from the medical
21 community, is it seems to me that physicians in
22 general are quite worried about the whole going
23 public with their opinion.

24 My wife and I, we have had plenty of
25 discussions with physicians, and folks are, like,