

1 it in the first place, He put it here for us to
2 use. And I think medicine had a big, big chunk to
3 do with that.

4 Do you know it's the only plant in the
5 world that contains all the nutrients you need to
6 sustain life? It tastes like hell, but it's
7 sustaining of life if that's all you had to eat.

8 I'm -- I've had several people tell me
9 "Why don't you pack up and move out to one of the
10 states where it's legal?" Well, I got a wife, five
11 kids, seven grandkids, and one great-grandkid. How
12 many of them am I supposed to drag out there with
13 me? No. This is where I sit my roots. This is
14 where I raised my family.

15 We need your help. I'm like he is.
16 It really ticks me off that this wasn't done
17 30 years ago, whenever it was supposed to have been
18 done. I'm asking you now to pull up the slack, to
19 give this medicine -- by the way, the only one that
20 can't kill you, even -- people die from aspirin,
21 but cannabis ain't never killed nobody unless it
22 was that kid that got stoned and he was running
23 from a cop and they shot him in the back. That's
24 the only way it's ever killed anybody.

25 I don't have any paper written up or

1 Foundation publicly released a statement that is
2 about their stance on -- on medical use of
3 marijuana, and I won't read the whole thing, but
4 I'll just do a paragraph. "In countries where
5 medical use of marijuana is legal, a number of
6 people with epilepsy report beneficial effects from
7 using marijuana, including a decrease in seizure
8 activity. People who promote the medical use of
9 marijuana often include treatment of epilepsy in a
10 long list of disorders for which marijuana is
11 supposed to be beneficial."

12 Currently we are advocating for
13 increased research from the National Institute of
14 Science. Our epilepsy board, our national board,
15 is -- it consists of a neurologist, epileptologist,
16 pharmacist, drug companies, and people who have
17 been impacted by this -- this deadly disease.

18 In our upcoming board meeting, we will
19 be studying this stance that we put together in
20 2005, and I would suspect not only will we update
21 it, but it will be a more aggressive and that it
22 will probably come along the lines of advocating
23 more for the use of -- the legalized use of
24 marijuana for patients who have epilepsy.

25 Pharmacists, somebody who could

1 anything. I just talk from my heart. And I guess
2 the last thing that I got to say to you is written
3 on the back of my shirt. And you got to read it.

4 UNIDENTIFIED MALE: What's it say?

5 ANTHONY HARDEN: Food, clothing,
6 shelter, fuel, and medicine. It's not just a buzz.
7 God.

8 TERRY MITCHELL: Thank you for your
9 time.

10 LLOYD JESSEN: Speaker No. 14.

11 DALE TODD: Well, unfortunately, I
12 don't have a neat saying on the back of my shirt,
13 but my name is Dale Todd, and I'm the former chair

14 of the Iowa Epilepsy Foundation. I serve on the
15 board of directors at the Iowa-Illinois-Nebraska
16 Epilepsy Foundation, and I'm vice chair of legal
17 and public policy for the National Epilepsy
18 Foundation.

19 Epilepsy is the largest neurological
20 disease out there, and we represent hundreds of
21 thousands of patients across this country. I'm
22 here because I was asked to be here by people who I
23 know who use -- use marijuana for assistance with
24 their seizure control.

25 In 2005 the National Epilepsy

1 probably tell just as well as I could, the seizure
2 meds have similar impacts. Characteristics of
3 opiates and some of the benzos are similar to the
4 drugs that are found in THC. Those drugs are used
5 when you have random neuronal excitability, when
6 you have randomized firing that's not necessarily
7 controlled.

8 What we do in those cases with
9 legalized medication, we -- we mimic the -- the
10 actions that actually happen in a case, and so what
11 I would ask you to do is consider this.

12 You have, and I'm aware of people in
13 this state who unfortunately are afraid to say who
14 they are but who use marijuana to help with the
15 control of their seizure activity, and they are
16 still productive members of our society, and they
17 manage to lead a decent life, even though the
18 quality of their life has been impacted by this
19 deadly disease.

20 So thank you for your time. Best of
21 luck.

22 LLOYD JESSEN: Do we have a No. 15?

23 Thank you.

24 CHRIS ANDERSON: Hello. My name is
25 Chris Anderson. I don't have anything really

1 prepared, but my parents when I was younger, they
2 were -- well, they were alcoholic, and when I was a
3 kid, teenager, you know, I smoked pot and stuff,
4 and they really had a fit about that. They said
5 "Please, whatever you do, don't smoke the pot.
6 We'd rather see you drink than smoke."

7 Like, oh, okay. So drinking is okay.
8 Smoking is not. Okay. So I said "Fine. I'll
9 drink."

10 Well, drinking has bought me drunk
11 driving. I'm a recovering alcoholic of 16 years
12 now, but during the time that I drank, I was
13 incarcerated I don't know how many times because
14 of, you know, what drinking does. It makes me a
15 whole different person.

16 Well, anyway, since becoming recovered
17 and everything and going off of -- being clean, I
18 found out that I have adult ADD, bipolar. I'm
19 Type II, which there was a difference between the
20 two, Type I and Type II, and anxiety disorder, this
21 and that, which I didn't have when -- when I was
22 just smoking marijuana and, you know, not drinking.

23 Well, my doctors know about it. My
24 psychiatrist and stuff know about it, but when I do
25 smoke marijuana with the ADD, because they tried me

1 But it just -- to me it's just -- it's
2 funny how this is such an illegal thing, but yet
3 two of the most deadly things, alcohol, which you
4 can kill families with it, kill yourself with it,
5 and cigarettes, which they're advertising on TV
6 every day how many millions they kill -- my mother
7 for one died of lung cancer -- but yet we can keep
8 selling that as long as we keep taxing it, and
9 people will pay a higher and higher amount for it.
10 They're taxing alcohol now. People can still get
11 it. Just pay a higher amount.

12 But for the ones that it does do some
13 good for, we've got to go underground and be
14 careful and hope that we don't get ourselves in
15 trouble for trying to find something that is
16 beneficial to our diseases.

17 So like I said, I didn't really have
18 anything down, but as far as the ADD for me, it is
19 a godsend. And I never had to go see doctors until
20 I quit -- you know, went to rehab and everything,
21 quit smoking, everything, drinking, everything and
22 stuff. Then that's when all the problems start
23 popping up.

24 So now I have to go to a shrink, and I
25 have all these pills I take in the morning to be

1 on many drugs, and I'm -- I'm on a new drug now for
2 the ADD. I burned through it so fast, they always
3 have me on the highest dosage, but with the
4 marijuana, it slows the thoughts down in my head so
5 I really can become productive.

6 Obviously, I cannot -- I don't do it
7 at work, but if I want to get anything done,
8 anything done productive at home or whatever, it
9 does slow everything down so I can have one clear
10 thought going, and I don't have multiple thoughts
11 just flying in and out of my head, and -- and with,
12 like, depression, I have as well, that -- it just
13 seems to even everything out, and my doctors are
14 aware of it, and they have no problems with it.

15 And I don't change as a person when
16 I -- when I, you know, smoke cannabis or anything.
17 I -- I am the same person as I always am. My -- I
18 don't change as I -- as I would on alcohol, which
19 is legal.

20 You know, you can drink as much as you
21 want, get in your car, drive, and nobody is going
22 to stop you and tell you you can't do it unless,
23 you know, Officer Friendly stops you and gives you
24 a ticket and fines you and fines you and fines you,
25 and you know the vicious circle of that.

1 right and at night, you know, this and that. But I
2 guess that's my thing is why the stuff that they
3 tell us is so bad, is going to rot your liver out.
4 You know drinking and driving is bad. They're
5 going to put you in jail for that. Smoking,
6 they're telling us they're putting addictive stuff
7 in there to make you addicted to it. It's going to
8 kill you.

9 And marijuana, it's natural. What's
10 in there is, you know -- and like the man had said
11 earlier, you know, it has beneficial things in it
12 and stuff too, but I just know it does me wonders
13 to clear out all the things in my head that the
14 ~~ADD -- and anybody that has it knows all the things~~
15 that go on in your head all at one time, and it
16 does me wonders.

17 And that's really all I had to say.
18 Thank you.

19 LLOYD JESSEN: No. 16? Anyone here
20 with No. 16? If not, anyone else in the room that
21 would like to speak? If not, then we'll take a
22 break here.

23 ANN DU BOIS: Can I finish?
24 So I was talking about Robert
25 Lawrence's book, Drug Warriors and Their Prey, and

1 I was interrupted, saying that it draws detailed
2 comparisons of the War on Drug in the United States
3 today with the events of 1930s Germany that led to
4 Hitler's Third Reich and the attempted destruction
5 of the Jewish people.

6 Miller writes that "authoritarians are
7 manufacturing and manipulating the public fears
8 about drug use in order to create a police state
9 where a much broader agenda of social control can
10 be implemented using government power. I believe
11 the War on Drug uses -- I believe the War on Drug
12 users masks a war on democracy." Therefore, War on
13 Drugs is presented as a genuine form of
14 totalitarianism.

15 Ignorance is power. Power over the
16 people. Power to dominate minds. Power to make
17 money off of the suffering of others.

18 If the phrase "Ignorance is power"
19 seems familiar, it's also from 1984. This
20 philosophy, it turns out, is embedded in our
21 government today. Ignorance is power. The more
22 the population can be kept ignorant and illiterate,
23 the more easily they can be controlled by
24 advertisers, government regulators, and the
25 so-called authority figures like conventional

1 journals.

2 The American Medical Association was
3 one of the few organizations that raised the voice
4 in opposition to the Marihuana Tax Act of 1937.
5 Yet today, most physicians seem to take little
6 active interest in the subject. And their silence
7 is often cited by those who are determined that
8 marijuana shall remain forbidden medicine.

9 It is time for physicians to
10 acknowledge more openly that the present
11 clarification is -- that the present classification
12 is scientifically, legally, and morally wrong. The
13 few studies that the government drums into the
14 public mind over and over which claims to show
15 cannabis is a harmful drug are almost all the work
16 of the government's top hired gun, Dr. Gabriel
17 Nahas.

18 The New England Journal of Medicine
19 described Nahas's work as "psychopharmacological
20 assertions." The Journal of the American Medical
21 Association also condemned his work stating
22 "Examples of biased selection and omissions of
23 facts abound in every chapter."

24 They also point out that the federal
25 government has conducted only one long-term study

1 medical doctors.

2 As illiterates, they are ripe for
3 exploitation by powerful corporations and
4 governments. They have no real ability to question
5 what they're being told or to stand up for their
6 rights. They have no real ability to question what
7 they're being told. They have no ability to defend
8 themselves against campaigns of disinformation
9 promoted by those in power. People are trained to
10 be mind slaves to get along in society without
11 asking too many questions.

12 The truth is that even really smart
13 people are mind slaves too because you don't get

14 through the world of academia by asking lots of
15 questions. You survive academia by conforming.
16 You get through medical school and pharmacy school
17 by swallowing what you're told and shutting down
18 that part of your brain that used to ask skeptical
19 questions. People who ask too many questions get
20 flunked out.

21 Thus, all the people who become the
22 top doctors and academics and the leaders in our
23 nation are by definition conformists. That's how
24 they are so easily fooled by the disinformation
25 campaigns waged by big pharma, the FDA, medical

1 of medical marijuana, the IND program, that still
2 provides marijuana to four patients, but it's a
3 study only in name as "no clinical response data in
4 the patient cohort has ever been systemically
5 collected or disseminated."

6 Translation: If officials don't know
7 that marijuana is safe, effective medicine, it's
8 because they don't want to know. The concept of
9 double-think as described in Orwell's 1984 is being
10 used effectively by politicians today.

11 The power of holding two contradictory
12 beliefs in one's mind simultaneously and accepting
13 both of them, to tell deliberate lies while

14 genuinely believing in them, to forget any fact
15 that becomes inconvenient and then when it becomes
16 necessary again to draw it back from oblivion for
17 just as long as it's needed, to deny the existence
18 of objective reality, and all the while to take
19 account of the reality which one denies, all of
20 this is indispensably necessary.

21 By a fresh act of double-think, one
22 erases this knowledge and so on indefinitely with
23 the lie always one leap ahead of the truth.

24 Cannabis is both an effective medicine
25 and a safe drug, both chemo-preventative and

1 therapeutic and generally beneficial to health.
2 What this shows us most clearly in light of the
3 consensus to the contrary is the enormous power of
4 a big lie.

5 With its vast resources, the
6 government mainstream media are able to fabricate
7 and fob off a pharmacological fraud against both
8 cannabis and the public interest. Through sheer
9 repetition and consistent suppression of contrary
10 information, they are able to construct the edifice
11 of public consensus which even the hardest
12 scientific facts fail to topple.

13 The government has greater ability to
14 distribute the big lie than any other sector of
15 society has to distribute the truth. However, the
16 testimony of these hearings contain copious
17 quantities of carefully referenced scientific
18 fact -- facts that consistently, conclusively
19 confirm that cannabis is safe; thereby, exploding
20 the government's big lie. Big pharma is busy
21 applying for and has already received multiple
22 patents for marijuana.

23 This trend was most recently
24 summarized in a National Institute of Health's
25 paper. "The endocannabinoid system as an emerging

1 target of pharmacotherapy" which concluded "The
2 growing interest in the cannabis -- the growing
3 interest in the underlying science has been matched
4 by a growth in the number of cannabinoid drugs in
5 pharmaceutical development from two in 1995 to
6 twenty-seven in 2004."

7 In other words, at the same time the
8 American Medical Association is claiming that pot
9 has no medical value, big pharma is in a frenzy to
10 bring dozens of new cannabis-based medicines to
11 market.

12 Federal law concedes the safety of
13 industrial hemp by allowing it to be legally
14 imported for food. It is unfortunate that the

15 federal government has stood in the way of the
16 American farmer, including many who are struggling
17 to make ends meet, competing in the global
18 industrial hemp market.

19 Growing a safe and profitable crop on
20 their own land with the -- are inconsistent with
21 the constitutional guarantee of a limited,
22 restrained federal government. To realize the
23 crime of hemp is that America let a few people in
24 power bulldoze one of our greatest resources into
25 nonexistence.

1 The very concept of objective truth is
2 fading out of the world. Lies will pass into
3 history. During times of universal deceit, telling
4 the truth becomes a revolutionary act.

5 I'm in support of marijuana
6 relegalization. The model would allow any adult
7 over 18 to grow any -- all the marijuana they would
8 like without any taxation, regulation, or other
9 government interference.

10 It is important to understand that
11 this absolutely does not preclude the issuance of
12 commercial licensing or commercial taxation
13 regulation, but self-cultivation is protected as an
14 inalienable sacred right.

15 Such a system would self-regulate the
16 market without much need for regulation since the
17 current profit margins would be replaced by normal
18 profits where an ounce would probably not sell for
19 more than 100 percent over the cost of growing. In
20 other words, adults could grow their own marijuana
21 for free, and commercial growers would have to
22 compete in a free and open market, a regulated
23 legal market. Thanks.

24 BOARD MEMBER WHITWORTH: And I think
25 now we'll take the break we were talking about.

1 We'll do 15 minutes. Okay? Thank you.

2 (Short recess.)

3 LLOYD JESSEN: Do we have Speaker
4 No. 16? Okay. We can go ahead with you. Thank
5 you.

6 THOMAS O'CONNELL: Okay.

7 (Off-the-record discussion.)

8 THOMAS O'CONNELL: Hello. My name is
9 Thomas O'Connell. I live in Coralville, Iowa, and
10 I first of all want to thank the Board of Pharmacy
11 for the opportunity to come in and talk to you
12 today about medical marijuana and my feelings in
13 that regard. I won't use my full ten minutes, so
14 we won't have to worry about that.

15 Basically it was my understanding of
16 what we're doing is looking at the medical usage of
17 marijuana, and I can, you know, talk about some of
18 the experiences that I've -- that I've noticed.
19 They basically have to do with pain relief.

20 At this time I presently do not have
21 chronic pain, but I do occasionally have acute
22 pain. As I get older, I assume that chronic pain
23 will be more of an issue for me, and I'd like to
24 get this addressed now before I get to the point
25 where I'm going to have to be able to actually use

1 it for chronic purposes.

2 I'm a little different in that any
3 type of pain relief that I can use for
4 over-the-counter medications like aspirin, Tylenol,
5 Ibuprofen, anything that you can get
6 over-the-counter, I have an allergic reaction to.
7 I break out in hives.

8 Because of that, there's not really a
9 lot of things that are out there that are available
10 for me readily to really use for pain relief. So
11 basically having to kind of go at this on my own,
12 you know, like with my physician as well. My
13 physician, you know, has basically prescribed a
14 codeine cough syrup that I can use for pain relief,
15 which, you know, is fine, but if by chance I need
16 something over the course of a weekend, I got to go
17 to the emergency room. I have to make an
18 appointment to go get a prescription.

19 In Iowa City and most places
20 throughout the Midwest, marijuana is readily
21 available. I can get that much more readily than I
22 can by having to go to a pharmacy. What I've
23 noticed from using it is that I can easily titrate
24 the relief that I get.

25 By that, I'm able to -- if I feel like

1 I have pain -- and most of my pain really is
2 associated more with exercise, exertion. If by
3 chance I have pain, I can -- I can actually take
4 another puff and basically get myself in a
5 situation where I don't feel that pain.

6 So from that standpoint it's been very
7 good for me because I am able to get the -- I
8 believe a medical benefit out of it because
9 everything else is not really readily available for
10 me because of my allergies.

11 Actually then I use it primarily in
12 low dosage, and so -- so in the process of actually
13 exercising, I can use that to relieve my pain
14 basically from exertion.

15 So I guess as you look forward to
16 making a decision about how the board wants to
17 continue on with this, please take in mind not only
18 the evidence that you have seen, you know, through
19 all the literature that you guys have been
20 submitted but remember there are people like me
21 that are out there that actually could use this on
22 a medical basis.

23 Is there any questions? If not, thank
24 you very much.

25 LLOYD JESSEN: Thank you.

1 BOARD MEMBER WHITWORTH: Thank you.

2 DEBBIE JORGENSON: While we're
3 waiting, if there's anyone who would like to speak,
4 right outside the door at the tables, there's a gal
5 by the name of Becky, and you can get a speaker
6 badge from her.

7 (Off-the-record discussion.)

8 LLOYD JESSEN: Okay. No. 17.

9 DREW FISCHELS: Hi. My name is Drew
10 Fischels, and I just actually found out about this
11 today, so I don't have anything prepared, but just
12 sitting here, I had some thoughts I wrote down.

13 I'd first like to thank the
14 pharmaceutical board for listening to these
15 testimonies today. It's very much appreciated.
16 This is going to be very short and to the point.

17 This medicinal marijuana thing, while
18 it appears to be a very complicated issue, I think
19 it would be wise to remember that as humans, we
20 seem to have a propensity to unnecessarily
21 complicate issues beyond a reasonable story. Now,
22 while the legalization of medicinal marijuana would
23 certainly come with a multitude of legal,
24 regulatory, and cultural wrinkles that would have
25 to be ironed out, I think it would also be wise to

1 step back and look at the larger moral picture.

2 We've heard countless testimonies from
3 people today and past and I'm sure in the future
4 who are in a lot of pain and have had that pain
5 relieved by medicinal marijuana.

6 But I think it is our moral
7 responsibility to figure out a safe and regulated
8 way to get this relatively benign, natural medicine
9 into their hands so their pain can be relieved. I
10 think, you know, despite all the complications, in
11 a lot of ways it's just as simple as that with
12 people who are in a lot of pain right now, right
13 today, and if this helps them, we need to figure
14 out a way to get it to them.

15 So thank you.

16 DEBBIE JORGENSON: Thank you.

17 LLOYD JESSEN: We will be here until
18 7 p.m., but as of right now, I don't think we have
19 more speakers, do we, Debbie? No.

20 DEBBIE JORGENSON: Not that I'm aware
21 of.

22 LLOYD JESSEN: So we'll just take
23 people as they come, and we will be here until
24 seven.

25 (Short recess.)

1 LLOYD JESSEN: No. 18.

2 NICK MANNA: Just a second. Good
3 morning. My name is Nick Manna, N-i-c-k M-a-n-n-a.
4 I'd like to start off by thanking the pharmacology
5 board for having this meeting.

6 I always enjoy coming to meetings, you
7 know, just for the public to give my thoughts and
8 whatever. I enjoy going to city council meetings.
9 I'm a weird person with a lot of free time on my
10 hands. I work overnights, so I'm free all day and,
11 you know, don't need a lot of sleep.

12 I'm not completely swayed one way or
13 the other on the issue of the medicinal qualities
14 of medical marijuana. From my cursory and
15 layperson's review of a readily available Google
16 search version of medical studies and scientific
17 studies, I've come to the conclusion that marijuana
18 should not at least be in Schedule I of the
19 Controlled Substance Act.

20 Again, I'm a layperson, and I don't
21 really have the expertise to be dealing in these
22 matters. I do, on the other hand, have a
23 substantial amount of information -- a substantial
24 amount of expertise in issues of parliamentary
25 procedures. I'm an official member of the National

1 Association of Parliamentarians, and one of the
2 things that has confused me about this meeting is
3 the nature of the meeting in itself.

4 The pharmacology board, in my opinion
5 as an amateur parliamentarian, is to be an expert
6 body to provide resources and information to the
7 public. Expert information. So it confuses me
8 then when the pharmacology boards makes statements
9 such as "Well, there was no scientific research
10 presented at a public hearing."

11 The pharmacology board's duty by my
12 interpretation of Iowa Code is to provide that
13 expert research. When they have not done this, it
14 is not the public's job to stand in for them and
15 provide them with scientific research.

16 I'm also concerned that the fact that
17 scientific research not being presented to remove
18 marijuana from the Schedule I of the Controlled
19 Substance Act is somehow a reason to leave it
20 there.

21 My interpretation of the state code
22 and the Federal Controlled Substance Act is that we
23 have an affirmative burden of proof in our system
24 of law. That is to say that the state has
25 applied -- or that is to say that the State has

1 convened a pharmacology board to provide
2 affirmative recommendation and affirmative evidence
3 to restrict or control certain substances.

4 Where this evidence for control does
5 not exist or has not been presented by the
6 pharmacology board, the State should remove these
7 or not schedule these drugs or substances at all.

8 Because the state pharmacology board
9 today has not presented such evidence, I am left
10 only with the conclusion that we should remove it
11 from the Controlled Substance or the Schedule I.

12 I'm glad to hear the state board of
13 pharmacology present evidence, and I'm sure that
14 there is lots of evidence that marijuana should be
15 restricted in some light, but I have yet to see it.

16 Anyway, what I'm trying to say is that
17 I'm very confused as to why the public is being
18 held accountable for meeting a certain burden of
19 proof that in my opinion is not there in the law.

20 So I urge the state pharmacology board
21 to use the authority that it has and that it has
22 used as recently as June, I believe, when they
23 scheduled -- when they scheduled Tapentadol. I'm
24 terrible at pronouncing these things. As I said,
25 I'm a layperson.

1 On June 22, the Board of Pharmacy
2 temporarily investigated Tapentadol, a new
3 molecular entity with centrally acting analgesic
4 properties, as a Schedule II controlled substance.
5 This is their authority, and they have clearly, you
6 know, some level of evidence that they feel makes
7 it, you know, legal for them to classify it as
8 such.

9 So I'm just a little bit confused when
10 the state Board of Pharmacy turns to the public,
11 the lay public, to present evidence to them to
12 remove it from Schedule I.

13 Anyway, I urge the state pharmacy
14 board to do the work they are so good at and that
15 these people of Iowa trust them with, and I thank
16 them again for allowing people to have such an
17 excellent meeting to share their views on this
18 topic even if I'm a little bit confused as to what
19 views we're supposed to be sharing.

20 Thank you.

21 (Short recess.)

22 JIM GIERACH: Hi. Good afternoon,
23 folks. My name is Jim Gierach. I'm an attorney
24 from the Chicago area. I just came in. I'm
25 suffering from jet lag a little bit, but I'm here

1 to talk about why cannabis should be rescheduled by
2 the Iowa Board of Pharmacy.

3 By way of a little bit of background,
4 I'm a father. I'm a grandfather. I'm an attorney.
5 I'm a former prosecuting drug attorney from
6 Chicago. I helped write Illinois's constitution.
7 I'm the chairman of the church council. I have
8 never used an illicit drug.

9 I'm here also on behalf of an
10 organization called LEAP, Law Enforcement Against
11 Prohibition, a group of people who have come to the
12 same conclusion that I have as people in the front
13 lines of the War on Drugs. That conclusion by
14 judges, lawyers, prosecutors, former DEA agents,
15 customs agents, people who are in the front --
16 front lines of the War on Drugs is that the War on
17 Drugs doesn't work. It puts more drugs,
18 contaminated drugs, everywhere. It's the heart of
19 the drug problem.

20 Secondly, not only does it not help
21 with the drug problem, but it's the heart of any
22 other crisis you can name in America: the problem
23 of guns, gangs, crime, prisons, taxes, deficits,
24 AIDS, health care, trade imbalance, corruption, no
25 money for schools, job programs, the corruption of

1 The same thing is happening with illicit drugs.

2 Now, the good guys on the other hand,
3 the people who are building the prisons, the
4 hundred thousand policemen that we hired to stop
5 the crime, the prison contractors, the people who
6 supply the prisons, the TV, radio, and billboard
7 companies that are getting antidrug money to put up
8 these drug advertisements, in effect, these people
9 are all on the same side of the equation.

10 The guys who make the helicopters to
11 go spray Columbia, the Round-Up that manufactures
12 the substance to kill the plants, all of these
13 things end up with both the good guys and the bad
14 guys on the same side of the War on Drugs, so
15 nobody is fighting against it, and we have all
16 these problems continuing.

17 Now, I'm here today to suggest to you
18 that cannabis should be rescheduled. As you know,
19 it's a Schedule I drug, and it doesn't belong
20 there. I'm here to try to help the sick and the
21 dying.

22 I think the worst aspect of the War on
23 Drugs is not even all these other problems that
24 I've mentioned but the heartless, uncompassionate
25 use of a law to deny people medicine after we've

1 the kids, the corruption of the police, and the
2 funding of terrorism.

3 Just to give you an example of how it
4 doesn't work, I live in Palos Park in southwest
5 Cook County. Two weeks ago they seized
6 6,000 marijuana plants after 38 years of drug work.

7 I did a radio show in Missouri where
8 they just seized 500 plants. In -- two weeks ago
9 in another county in Illinois, they seized
10 500 plants. We have more of these drugs everywhere
11 now within a mile, 6,000 plants within a mile of my
12 14-year-old son.

13 I'm opposed to drug use, but I'm more
14 opposed to the War on Drugs, which causes these --
15 these headaches unending. When I was a prosecutor
16 in Chicago, the best heroin you could get was
17 2 percent. After 38 years of drug war, you can now
18 get 90 percent pure heroin. It's cut with
19 Fentanyl, often causing respiratory arrest. Why
20 has it been here for 38 years and continued without
21 relief? Because the good guys and the bad guys are
22 both in favor of it.

23 Al Capone was in favor of the
24 prohibition of the substance that he peddled
25 because it was the foundation for the business.

1 got some six centuries of history with the
2 substance causing people help and aid.

3 We then have 13 states where the
4 people themselves can see that the country is so
5 out of tune that they themselves through their
6 legislatures and through initiatives are passing
7 referendums, often 60 percent of the vote or more,
8 saying that what we're doing is wrong.

9 We arrest some 900,000 people in this
10 country a year for marijuana, spending money on
11 prisons to the point where we can't pay for
12 schools. It's just absolutely wrong.

13 Now, I'm sure that you've heard plenty
14 about the DEA, Judge Francis, 1988, who said that
15 it would be arbitrary, capricious, and unreasonable
16 to continue with the scheduling of marijuana as a
17 Class I drug. He was right in 1988, and we're
18 still struggling to try and right the wrong.

19 I'm sure that you're aware from having
20 heard -- this is about the third or fourth time
21 you've had hearings, I believe. You have heard
22 testimonials from individual people of how it's
23 helped MS or glaucoma or -- or tumors on the long
24 bone. Irving Rosenfeld who I met back in 1992
25 who's handling millions of dollars of business a

1 year on government-supplied marijuana. We have
2 millions of Americans who have used marijuana and
3 know that it's not some dread disease.

4 My father was a judge. End of his
5 life, he couldn't take his pills anymore. He had
6 so much pain, he couldn't keep them down. I said
7 "Dad, you want marijuana?"

8 And he said "No. I send people to
9 jail for prison (sic). I'm going to die by the
10 same rules that I lived by," which he did. I mean
11 a testament to his character but not a testament to
12 the rules that we put in place. Julie Falco, a
13 girl with MS who was on the verge of suicide until
14 she found medical marijuana.

15 Peter McWilliams, a best-selling
16 author who the government prosecutes in one of
17 these California marijuana raids and says "You're
18 going to jail unless you stop using your medicine."
19 He stops using it and chokes to death. Heartless.

20 We have 13 states who have already
21 seen the light and approved medical marijuana. We
22 have 14 more states, Illinois one of them, that's
23 on the verge. The Illinois Senate passed for the
24 first time this year medical marijuana. The House
25 will before the year is out, we expect.

1 address the question. We do note, however, even
2 more important is the democratic process in which
3 the voices of voters alive with these respondents
4 may one day be heard in the halls of Congress and
5 in the state legislatures."

6 They had to apologize because they by
7 the dictates of stare decisis and the need to
8 follow precedent and not to be an activist court
9 had no choice but to reach the conclusion that they
10 did but at the same time imploring all of us to
11 use our heads to let the states speak through the
12 legislatures as I hope the Board of Pharmacy will
13 to the Iowa board.

14 It's just essential that we restore
15 some semblance of sanity in the drug war which has
16 become the Achilles heel of this country where
17 we're rotting from the inside because of a rule
18 that causes disrespect for law and war, police,
19 society, and one another. I ask you to take the
20 lead in seeing that those things change.

21 I'd go on but I got to be near ten.
22 How am I doing?

23 DEBBIE JORGENSON: You got a minute
24 left but I'm not --

25 JIM GIERACH: Okay. I mean are there

1 We have a public consensus. I clipped
2 something out of the Tribune where they had the
3 seizure of drugs in a county, Dallas state,
4 McHenry, and I'm going to leave with you, if I may,
5 just the comments. The people writing in in
6 response to this seizure of 450 plants.
7 "Monumental waste of taxpayer dollars. Complete
8 waste of time and money. What a waste. What a
9 waste."

10 I mean it goes on for pages, every
11 single one, one after another. Madam Reporter, if
12 you would please circulate that among your seven
13 board members.

14 I would call your attention to the
15 case of Gonzales where the United States Supreme
16 Court said that because of the supremacy clause, we
17 have no choice but to enforce federal drug law,
18 notwithstanding referendums and initiatives in the
19 states that approved marijuana.

20 The court, so unhappy with its own
21 decision which he felt -- they felt compelled to
22 rule as they did, they conclude their opinion,
23 apologizing in effect for their ruling.

24 "Respondents in this case seek to avail themselves
25 of the medical necessity defense. We do not

1 any questions or concerns that you'd like to ask me
2 about based on -- on 40 years of practicing law and
3 prosecuting, putting people in jail?

4 Chicago today, we're having a meeting
5 with the secretary of education, Arnie Duncan, with
6 Mayor Daley, with the Attorney General Holder
7 because the violence is so bad in Chicago, we have
8 killed 40 children in this current school year. We
9 have -- we have shot 400 students. We have killed
10 500 people in the course of the year.

11 The War on Drugs, I give speeches
12 around the country at college campuses, at grade
13 schools, high schools, and more likely grade
14 schools let me in, and it's the same everywhere.

15 When I get off the plane or out of the car, I know
16 the problems in your community. You have more --
17 more crime than you've ever had. You've got more
18 drugs than you've ever had. You've got more
19 overdose than you've ever had. Your prisons are
20 expanding. In this state 4,800 people behind bars.
21 So much money spent there, there's no money left
22 for education.

23 Health care, we can't let them have a
24 clean needle because it will send the wrong
25 message. So as a result, we have new AIDS cases.

1 Well, because of the advancement in the
2 medicines -- thank you, pharmacology -- they're now
3 living 24 years on average, and it costs us
4 \$600,000 where it used to be 100,000, and we can't
5 afford the bills for -- for \$600,000 a year for the
6 lifetime of somebody with AIDS and then give them
7 no way to prevent the contraction of it.

8 It is imperative that the states stand
9 up where the federal government has failed and
10 implore our national leaders and our local leaders
11 to end this monstrosity, this albatross, which we
12 have tied around the neck of our citizens.

13 You have a great opportunity here in
14 Iowa through the Board of Pharmacy, through five
15 pharmacists and two civilian members, to lead that
16 fight further, to not get lost in the specious
17 claims that have been made about the horrors.

18 I had -- I was diagnosed as having
19 acid reflux, and so the doctor says "Take
20 omeprazole." I get the thing home, and I read the
21 thing, says "You might have complications of cough,
22 dizziness, back pain, headaches, stomach pain,
23 mental mood change, depression, agitation, chest
24 pain, irregular heart beat, severe dizziness,
25 trouble breathing, and if you're on the verge of

1 better. I can tell you heartbreaking stories of
2 clients that have overdosed and killed themselves,
3 of a relative who just graduated from law school
4 and overdosed on the way to a job interview on
5 cocaine, not knowing what he had in the stupid
6 drug.

7 I mean we have one heroin overdose
8 death every day in the city of Chicago. We had ten
9 ambulances collected on the west side of the city
10 picking up the bodies because they had cut the drug
11 with Fentanyl, and then -- then I have to tell you
12 all my medical stuff. Everything is confidential.

13 I have a -- what do you call it? An
14 endoscope, I'll call it, and when I get the bill,
15 aside from the bill being ridiculous, demanding
16 health care, \$6,000 for a couple hours or
17 something, they had Fentanyl as one of the drugs
18 that they used to put me out, now knowing that
19 that's how they killed all these people on the west
20 side.

21 Well, I mean I don't want to overstay
22 my welcome but --

23 ROBERT MANKE: Ask them for more time.

24 JIM GIERACH: The town -- the town
25 next to where I live is called Orland Park, and

1 suicide, stop taking it."

2 I mean you will not -- I mean I didn't
3 eat the stuff. Once I read the piece of paper, I
4 said "If my stomach hurts, I'm going to take an
5 antacid and get some rest, stop worrying about the
6 drug war for a little bit."

7 But I mean it's just so foolish. It's
8 so heartbreaking in so many ways every day. The --
9 when you -- when you prohibit a substance, you give
10 up the right to regulate and control it.

11 In the direction from your legislature
12 as to what your charge was as the Board of
13 Pharmacy, you were charged with investigating,
14 regulating, controlling, recommending. That's what
15 you can do until you prohibit something. When you
16 prohibit, you necessarily by definition give up the
17 right to control and regulate it.

18 So who controls the drugs right now
19 and what's on the streets? It's the gangs and the
20 drug cartels. There's no rules about how old you
21 have to be to buy it, how old you have to be to
22 sell it, how strong it is, what it's cut with.
23 There's no warning label. You don't have to be 21.

24 These are things that control and
25 regulation and taxation would enable us to do

1 it's one of the upper-scale communities in
2 southwest Cook County. And I live there. My
3 daughter who's an alum from here and now a lawyer
4 in health care, the think tank of D.C., that town
5 had kids who went to the same high school my
6 daughter did, end up robbing another house that had
7 marijuana to steal the cash and the marijuana. And
8 so we ended up with three Orland Park residents
9 killing another, shooting two all together, over
10 this wonderful cannabis product.

11 I mean we have to wake up as a nation.
12 Medical marijuana is the very, very least that we
13 can do to help people who are sick, dying,
14 suffering, and need help. And who better to lead
15 us than people who believe in science instead of
16 this whole notion of -- of using -- using people's
17 fears as a way to collect votes.

18 Every president from Nixon forward has
19 been in favor of the War on Drugs, but because
20 they're a politician, it's a way to collect votes.
21 "I'm going to save your children from drugs." I
22 want my children saved, but it doesn't save them.
23 It makes it worse.

24 So I also read this bill. It's a
25 wonderful -- is this the bill that you're working

1 from? It's sort of a base?
 2 LLOYD JESSEN: It's the one that was
 3 introduced last year, but it's not -- it's not
 4 anything --
 5 JIM GIERACH: Not necessarily --
 6 LLOYD JESSEN: Yeah. It's not the
 7 board's bill.
 8 JIM GIERACH: Okay. Well, it's in the
 9 ballpark. In Illinois what they're passing,
 10 they're talking about six plants or two ounces, and
 11 here you're talking about six ounces within a
 12 30-day period.
 13 There's things in here about zoning.
 14 There's -- I mean it's really -- really not a bad
 15 draft for somebody getting started and trying to do
 16 something that regulates something with thought and
 17 moderation.
 18 So I congratulate you for what you're
 19 doing. I hope you're getting testimonials one
 20 after another, and you certainly know far more than
 21 I do about pharmacology.
 22 I come here basically from the
 23 perspective of what is happening to our society
 24 because what we're doing and that we have to care
 25 about one another, and we have to provide medicine

1 when somebody can get help from something, even
 2 though Congress legislatively declared this has no
 3 medicinal value. Give them medicine. Thank you.
 4 LLOYD JESSEN: Thank you.
 5 DEBBIE JORGENSON: Do we have any
 6 other speakers?
 7 (Short recess.)
 8 BOARD MEMBER WHITWORTH: If Speaker 20
 9 could have your attention, please.
 10 DEBBIE JORGENSON: If you would just
 11 state your name for the record, please.
 12 CASEY CORT: My name is Casey Cort,
 13 and I live in Iowa City. In April of 2008 I was
 14 diagnosed with Hodgkin's lymphoma, classic type,
 15 lymphocyte-rich subtype, and as part of my
 16 treatment, I was recommended to have a six-month
 17 course of chemotherapy which involved a regimen
 18 called ABVD, a pretty toxic regimen, and on top of
 19 that, I was given an experimental drug called
 20 Rituxan.
 21 Now, to mitigate the side effects, one
 22 of the -- one of the side effects of the treatment,
 23 of course, is nausea, and I would be incapacitated
 24 for four days after my -- each treatment. My
 25 treatments lasted for six months, every two weeks.

1 It was on Thursday. I'd be incapacitated until
 2 Sunday.
 3 For -- to mitigate the side effects,
 4 they would give me -- we started off with
 5 Dexamethasone which is also Decadron, Lorazepam or
 6 Ativan, ondansetron, which is called Zofran which
 7 can cost \$20 a pill if you don't have insurance,
 8 and also Prochlorperazine which is Compazine.
 9 None of these drugs worked for me. I
 10 was absolutely incapacitated. I would come home,
 11 and all I would be able to do would be to lie on
 12 the couch or the bed for four days until people I
 13 knew that were also going through chemotherapy
 14 recommended that I use medical marijuana.
 15 And I did try that, and within five
 16 minutes of coming home from my chemotherapy
 17 session, I would be up and able to actually resume
 18 my life. Five minutes.
 19 So I'm done with my treatments now. I
 20 stopped using medical marijuana, but I encourage
 21 the board to reclassify this drug that can help so
 22 many people. Thank you.
 23 BOARD MEMBER WHITWORTH: Thank you.
 24 (Short recess.)
 25 PATRICIA BEAVER: My name is Patricia

1 Beaver, and I live in North Liberty, and I do
 2 believe in the medical use of marijuana, and my
 3 husband and I both have used medical marijuana in
 4 the past. It was illegal, and we were arrested for
 5 it.
 6 We grew some plants for our own
 7 personal use, and that was the problem with it. We
 8 did have a lot of medical and health problems,
 9 which is why we probably did not end up -- we would
 10 still be in prison to this day if they had
 11 prosecuted us to what the penalties would have
 12 been.
 13 My husband, Richard, is a disabled --
 14 hundred percent disabled from Vietnam. A lot of
 15 his illnesses and health problems stem from his
 16 time there. He has a lot of digestive and colon
 17 problems, and he used it to help have an appetite
 18 so he even wants to eat, and he's still very thin,
 19 but it does help his appetite, helps with nausea
 20 when he's sick and doesn't feel well.
 21 For myself, I have a lot of chronic
 22 back pain, and I have some health issues with
 23 migraines. I now know I have what's called
 24 cervical dystonia, which is a type of muscle
 25 spasms, and I think a lot of my health problems I