Reclassifying cannabis for medical purposes is overdue

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GUEST COLUMNIST

Life with severe spasticity from cerebral palsy is far from easy. Spasticity is an abnormal muscle tightness from contraction that is related to damage to the body's neurological system.

Spasticity treatments are often invasive and require a team of caregivers. Treatments include physical therapy, intrathecal drugs or surgery. Despite these available treatments, it remains an area ripe for medical research, as none of the available treatments provide the necessary relief for some spasticity patients.

Despite more than a dozen years of physical therapy multiple times a week, I still suffer from significant ambulatory problems.

While credible medical authorities such as the National Academies of Sciences, Engineering and Medicine and the Journal of the American Medical Association have released publications indicating that evidence exists for marijuana's ability to treat spasticity, the U.S. remains behind in medical marijuana research for the condition.

This is largely due to marijuana's status as a Schedule I drug. Schedule I drugs, defined as having "no accepted medical use," face significant research barriers, including special DEA license registration, limited funding options, special federal funding barriers and a significant limitation in federally legal places for researchers to acquire marijuana for medical research.

Despite bipartisan calls for easing medical marijuana research restrictions, promises made during the Biden Administration, campaign promises from President Donald Trump, approximately 30,000 public letters of support for rescheduling and even a federal budget amendment that prevents the DOJ from pursuing medical marijuana cases, legal barriers to marijuana research continue to block medical research.

It's long past time for the federal government to act and remove marijuana from Schedule I, as suffering constituents were promised.

While American innovation has been stifled, UK-based GW Pharmaceuticals, now Jazz Pharmaceuticals, developed a marijuana-based nasal spray treatment for spasticity available in 29 countries — but not the United States.

I have been working on medical marijuana policy in Louisiana since 2014 when I first met state Sen. Fred Mills and testified in favor of his bill, which was designed to allow patients with spasticity and cancer access to medical marijuana, which was already legal for them for over 20 years.

Since graduating law school and helping to legalize medical marijuana in Louisiana, I have worked across the country and at home in the marijuana industry. I have seen and experienced the life-changing power of cannabis-based treatments, as well as the devastating consequences of marijuana's outdated classification under federal law. I have seen the limited research, patient access, insurance coverage and other barriers that cannot be allowed to continue.

Despite the support for rescheduling, little progress has been made. While the Department of Health and Human Services recommended medical marijuana rescheduling in 2023, the DEA subsequently canceled the marijuana rescheduling hearing.

Marijuana's medical research now again remains stalled, and I am calling on leaders in our federal agencies to make a change.

Rescheduling cannabis would begin a process of removing regulatory hindrances. Research institutions would be able to study cannabis the same as any other substance.

Schedule III would bring cannabis into the same regulatory frameworks used to evaluate other medicines, instead of drugs like heroin and meth, finally allowing researchers to apply for federal grants and conduct clinical trials.

Rescheduling means increased protection for patients as many remain concerned about legal gray areas. Veterans using cannabis through state programs risk losing benefits. Professionals worry about liability. Banks and credit card processors often won't work with retailers.

I've spent years fighting for a system where people don't have to choose between treatment and legality. Rescheduling cannabis is about recognizing what so many of us already know: Cannabis has medical properties that need to be researched immediately. This isn't just policy — it's personal.

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