

The DEA Raids Again

Marijuana Advocates Protest DEA Raids In Michigan & California

Coordinated and lively protests were carried out Wednesday by medical marijuana patient advocates both in Saginaw, Diego, Michigan, and San California, against the Drug Enforcement Administration for raids it conducted earlier this month.

The raids were made despite an official Justice Department policy issued in October 2009 discouraging such enforcement.

The Michigan Medical Marijuana Association organized the Saginaw protest march, and Americans for Safe Access (ASA) organized a rally at the federal courthouse in San Diego.

More than 100 medical marijuana supporters demonstrated in Saginaw, coming from across Michigan after hearing about police raids on medical marijuana growers and patients in Saginaw County, reports Kim Russell of NBC 25.

The DEA raided John Roberts and Stephanie Whisman, two licensed medical marijuana caregivers from Thomas Township, Mich., on July 6. The next day, on July 7, the DEA raided the Covelo, Calif.,

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V.A. EASING RULES FOR USERS OF MEDICAL MARIJUANA

DENVER -- The Department of Veterans Affairs will formally allow patients treated at its hospitals and clinics to use medical marijuana in states where it is legal, a policy clarification that veterans have sought for several years.

A department directive, expected to take effect next week, resolves the conflict in veterans facilities between federal law, which outlaws marijuana, and the 14 states that allow medicinal use of the drug, effectively deferring to the states.

The policy will not permit department doctors to prescribe marijuana. But it will address the concern of many patients who use the drug that they could lose access to their prescription pain medication if caught.

Under department rules, veterans can be denied pain medications if they are found to be using illegal drugs. Until now, the department had no written exception for medical marijuana.

This has led many patients to distrust their doctors, veterans say. With doctors and patients pressing the veterans department for formal guidance, agency officials began drafting a policy last fall.

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Washington, DC: Medical Marijuana Dispensaries Not Likely Until Mid-2011

Washington, DC, USA: Qualified patients will not be legally able to obtain or possess medical marijuana in the District until at least next summer, according to draft regulations recently issued by Mayor Adrian Fenty's office.

Under the law, which took effect in late July, the Department of Health and the D.C. Alcohol Beverage Control Board will establish and oversee regulations for the licensed cultivation and distribution of marijuana registered to patients. However, according to draft version of the regulations circulated by the Mayor's office, the regulatory framework for the District's dispensaries and cultivation centers won't be completed until January 2011. It is anticipated that the facilities will be up and running for several months afterward.

As amended, the District's medical marijuana law only permits patients to possess marijuana legally if they are registered with the Health Department and have obtained

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The MERCY News

Report is an allvolunteer, not-for-profit
project to record and
broadcast news,
announcements and
information about medical
cannabis in Oregon,
across America and
around the World.

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in Salem, Oregon area thru Capital Community Television, Channel 23. See us on Wednesdays at 06:30pm, Thursdays at 07:00pm, Fridays at 10:30pm and Saturdays at 06:00pm. Visit –

http://mercycenters.org/tv/

About MERCY – The Medical Cannabis Resource Center

MERCY is a not-for-profit, grass roots organization founded by patients, their friends and family and other compassionate and concerned citizens in the area and is dedicated to helping and advocating for those involved with the Oregon Medical Marijuana Program (OMMP). MERCY is based in the Salem, Oregon area and staffed on a volunteer basis.

The purpose is to get medicine to patients in the short-term while working with them to establish their own independent sources. To this end we provide, among other things, ongoing education to people and groups organizing clinics and other Patinet Resources, individual physicians and other healthcare providers about the OMMP, cannabis as medicine and doctor rights in general.

The mission of the organization is to help people and change the laws. We advocate reasonable, fair and effective marijuana laws and policies, and strive to educate, register and empower voters to implement such policies. Our philosophy is one of teaching people to fish, rather than being dependent upon others. Lasting change will require that each citizen be active enough to register and effectively vote. You, and only you, the people, can make it happen. Work with us to make this your resource guide and all-around "tool shed" to successful medical cannabis utilization and activism.

* Want To Get Your Card? MERCY is hosting Medical Cannabis Consultations in Salem. Please call 503-363-4588 or email – info@mercycenters.org - to begin the process of transferring records and scheduling an appointment.

Meetings and Meet-Ups

* Every Wednesday (except Holidays), 7:00pm to 9:00pm * CardHolders MeetUp hosted by MERCY at The Almost Home restaurant in Salem. Located at 3310 Market St. NE, Salem, Oregon, 97301, This one will happen every Wednesday. * for more info, call MERCY at: 503.363-4588 -or- visit:

mercycenters.org/events/AlmostHome.htm

Other Medical Cannabis Resource NetWork Opportunities for Patients as well as CardHolders-to-be. * whether Social meeting, Open to public -or- Cardholders Only * visit: mercycenters.org/events/Meets.html ! Also Forums - a means to communicate and network on medical cannabis in Portland across Oregon and around the world. A list of Forums, Chat Rooms, Bulletin Boards and other Online Resources for the Medical Cannabis Patient, CareGiver, Family Member, Patient-to-Be and Other Interested Parties. Resources > Patients (plus) > Online > Forums * Know anv? Let everybody else know! Visit: mercycenters.org/orgs/Forums.html and Post It!

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<continued from DISPENSARY INITIIATIVE, page 1 > home of Joy Greenfield, operator of the first collective to apply for the Mendocino County Sheriff's cultivation permit program. Greenfield even had county-issued "zip-ties" on her plants, designating their legality under state and local law.

Then, on July 9, the DEA conducted multiple raids on medical marijuana dispensaries in the San Diego area, resulting in the arrests of 12 people. Among other items seized in the raids, the DEA took money, medical marijuana and cultivation equipment, as well as financial and private patient records.

"Patients are fed up with platitudes and half promises from the Obama Administration," said Eugene Davidovich of the San Diego chapter of ASA. "We're here at the federal courthouse to vocally oppose continued attempts to subvert state law, and to push for a federal policy that actually protects patients in this country."

John Roberts, who was well below the legal marijuana limit as a Michigan caregiver, produced a medical marijuana oil that was used by seriously ill patients, including one six-year-old girl with brain cancer. The young girl, who because of the DEA raid will now go without her medication, successfully used the cannabis oil to treat her headaches, to help her sleep, and as an appetite stimulant.

Roberts had held a protest less than a week before the July 6 DEA raid to bring attention to ongoing law enforcement harassment of patients in the Saginaw area.

"The fact of the matter is I'm innocent," Roberts said. "I was in full compliance with the law."

Roberts believes Saginaw County Sheriff William Federspiel encouraged the DEA to raid him after Roberts held a protest targeting the sheriff. Sheriff Federspiel denies any involvement in the raid, claiming he is "just doing his job."

The most recent federal raids and subsequent protests came as Acting DEA Administrator Michele Leonhart is preparing to be confirmed by the Senate Judiciary Committee.

Leonhart is a Bush Administration appointee who was deputy administrator under then-DEA Administrator Karen Tandy. Both were responsible for more than 200 raids in California and other medical marijuana states during the Bush Administration.

In her capacity as acting administrator, Leonhart also blocked medical marijuana research in January of this year by refusing to grant a research

application from the University of Massachusetts that would have expanded therapeutic studies in the United States. Source:

http://www.tokeofthetown.com/2010/07/marijuana advocates protest dea raids in michigan.php

THOMAS TOWNSHIP RAID IS AT THE INTERSECTION OF CONFLICTING STATE, FEDERAL MARIJUANA LAWS

Michigan's Medical Marijuana Act of 2008 doesn't matter.

White House attitudes toward medical marijuana don't matter, nor does a U.S. Attorney General's directive in October ordering federal prosecutors to back off.

U.S. Drug Enforcement Adminstration agents continue to bust up medical marijuana growing operations around the country.

In Thomas Township last week, they struck again.

Federal agents assisted by township police stormed out of their vehicles last week, guns drawn, and took the marijuana and an estimated \$10,000 in equipment that John Roberts and Stephanie Whisman had in their state-registered medical marijuana growing operation.

Their Bay City attorney, Ed Czuprynski, charged that the raid was harassment for the rally that Roberts organized the week before against Saginaw County Sheriff's Department raids, which included his operation in April. The rally also called for the recall of the sheriff.

The timing of the DEA action was, indeed, stinky. Although, DEA officials deny that their execution of a federal search warrant had anything to do with the rally.

Whatever.

The point is that Michiganders who voted in November 2008 overwhelmingly said the medical use of marijuana is A-OK with them.

But any marijuana use, possession and sale is against federal law.

What we appear to have in Thomas Township is the intersection of conflicting state and federal laws.

It's a place where U.S. Attorney General Eric R. Holder told federal prosecutors last fall not to go. He told them to back away from pursuing cases against medical mariuana patients.

Roberts is a patient registered in Michigan to grow

<continued from previous page> and use marijuana for medical reasons. He and his fiancee are also stateregistered caregivers allowed to grow marijuana for up to five patients each. Roberts has said the marijuana they had on hand was less than the amount that state law allows them to have.

So, while it may appear that they were well within the dictates of Michigan's law, DEA agents have made a federal case out of them.

State law vs. federal law: Who's right?

The wishes of Michigan voters vs. a long-dead Congress that passed drug laws more than 30 years ago: Which lawmaking voice should prevail?

The attorney general says feds should concentate their war on marijuana on high-level traffickers, those using state laws as a cover for illegal activity and on money launderers.

Did local DEA agents get that memo?

Because the search warrant in Thomas Township would seem to contradict that directive. It's passing strange, too, that township police accompanied federal agents on this search. Is their prime responsibility to enforce state laws, or federal laws regarding marijuana?

Lots of questions here, and not nearly enough answers.

With all the confusion - and ensuing excuses - in the law enforcement community regarding the status of marjuana in Michigan, raids such as this one probably are inevitable. And it isn't just because Michgan authorities are still trying to figure out this new twist in the will of the people.

With 14 states, including Michigan, giving the OK to the therapeutic use of this drug, it's time for a federal referendum on medical marijuana.

It's probbaly too much to hope for Washington to go along wth these states.

But can we get some sort of law or executive order from the White House ordering federal agents to stand down in states where the people have voted, and given their OK?

Otherwise, this intersection of conflicting state and federal laws is going to end up in a crash, with more people caught up in a fight that they may not have seen coming. Source: Saginaw News (MI) Website: http://www.mlive.com/saginaw/ - US MI: Editorial: Thomas Township Raid Is at the Intersection of Conflicting Sta... http://www.mapinc.org/drugnews/v10/n553/a04.html ml?397 - Pubdate: Thu, 15 Jul 2010

DEA Invades Mendocino County 99 Plant Collective Farms!

The federal Drug Enforcement Administration has flouted Mendocino County, California's newly enacted medical marijuana ordinance by raiding the first collective that had applied to the sheriff's cultivation permit program. A multi-agency federal task force descended on the property of Joy Greenfield, 689, the first Mendo patient to pay the \$1,050 application fee under the ordinance, which allows collectives to grow up to 99 plants provided they comply with certain regulations.

Greenfield had applied in the name of her collective, "Light The Way," which opened in San Diego earlier this year. Her property had passed a preliminary inspection by the Mendo sheriff's deputies shortly before the raid, and she had bought the sheriff's "zip-ties" intended to designate her cannabis plants as legal. In the days before the raid, Greenfield had seen a helicopter hovering over her property; she inquired with the sheriff, who told her the copter belonged to the DEA and wasn't under his control. The agents invaded her property with guns drawn, tore out the collective's 99 plants and took Greenfield's computer and cash. Joy was not at home during the raid, but spoke on the phone to the DEA agent in charge. When she told he she was a legal grower under the sheriff's program, the agent replied, "I don't care what the sheriff says." When she returned to her house she found it in disarray with soda cans strewn on the floor. "It was just a mess," she said. "No one should be able to tear your house apart like that." Greenfield called the raid a "slap in the face of Mendocino's government.

The DEA has been tight-lipped about the raid, but claims it was part of a larger investigation involving other suspects. "Here Mendo is trying to step out in front by passing this ordinance, and what do the Feds do but raid the first applicant," said Greenfield's attorney, Bob Boyd of Ukiah. "The DEA is stepping all over local authorities trying to tax and regulate," Boyd said. Neither Boyd nor other locals believe that the sheriff tipped off the DEA or gave them any information about permit applicants. Mendocino County Sheriff Tom Allman confirmed Friday that the property owner had the proper paperwork and the marijuana was legal in the eyes of the county. "This was a federal operation and had nothing to do with local law enforcement," Allman said. "The federal government made a decision to go ahead and eradicate it."

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<continued from previous page> Mendocino County Sheriff Tom Allman has been supportive of medical marijuana cultivators who go by the rules. Sheriff Allman has been highly supportive of efforts to bring local growers into the permit program. Nonetheless, observers fear the raid will have a chilling effect on cultivators, possibly causing problems for local patients. "This raid is clear evidence that the DEA is out of control," said California NORML director Dale Gieringer. "A change in federal law is long overdue." "In the meantime, the DEA needs a new director who will enforce Attorney General Holder's pledge not to interfere in state medical marijuana laws," Gierigner said. The DEA is currently directed by Michele Leonhart, a Bush Administration holdover who has presided over numerous medical marijuana raids, obstructed research efforts to develop marijuana for medicine. President Obama has renominated Leonhart to head the agency — a move strongly opposed by drug reformers, who are calling on the administration to honor its pledge of change. Source: THE EMERALD TRIANGLE NEWS AGENCY MARIJUANA NEWS AND CULTURE FROM **COUNTIES** HUMBOLDT AND MENDOCINO http://mendonews.wordpress.com/ Sharel http://www.addthis.com/bookmark.php?v=250&us ername=EMERALDTRIANGLENEWS> More info: *DEA Invades Mendocino County, Eradicates and * *Busts Mendocino County Approved Marijuana Collectives!* http://mendonews.wordpress.com/2010/07/12/de a-invades-mendocino-county-99-plant-collective-News farms/> Junky http://newsjunkiepost.com/2010/07/10/dea- flouts-medical-marijuana-ordinance-by-raiding-firstapplicant/> - Legalized HOAX: Marijuana Supporters Mendocino's Oppose 99 Plant Ordinance http://mendonews.wordpress.com/2010/07/12/20 10/03/29/legalized-hoax-marijuana-supportersoppose-mendocinos-99-plant-ordinance/>

So, Who's to Blame for DEA Medical Marijuana Raids?

Yesterday half a dozen drug policy reform groups asked President Obama to withdraw his nomination of Michele Leonhart to head the DEA, citing her continued enthusiasm for raids on medical marijuana suppliers as the agency's acting administrator. "Under Leonhart's leadership," says the joint statement by the National Organization for the Reform of Marijuana Laws, California NORML, the Marijuana Policy Project, the Drug Policy Alliance, Law Enforcement Against Prohibition, and Students

for Sensible Drug Policy, "the DEA has staged Law Enforcement Against Prohibition, and Students medical marijuana raids in apparent disregard of Attorney General Eric Holder's directive to respect state medical marijuana laws."

As an example, the statement cites a recent raid on Mendocino County, California, grower Greenfield, who "paid more than \$1,000 for a permit to cultivate 99 plants in a collective garden that had been inspected and approved by the local sheriff." When told that Greenfield had approval from local law enforcement, the DEA agent in charge of the raid reportedly replied, "I don't care what the sheriff says." NORML et al. argue that "the DEA's conduct is inconsistent with an October 2009 Department of Justice memo directing officials not to arrest individuals 'whose actions are in clear and unambiguous compliance with existing state laws providing for the medical use of marijuana."

Far be it from me to defend Leonhart, but her raids are not necessarily inconsistent with the DOJ's policy, which (as I've noted before) leaves lots of wiggle room for continued raids, seizures, arrests, and prosecutions. If there is any disagreement atall about the meaning of the relevant statutes, the DOJ can (and does) argue that growers and distributors are not "in clear and unambiguous compliance with existing state laws providing for the medical use of marijuana."

In California, for example, local officials continue to argue with each other and with state officials about issues such as the definition of a patient "collective" (or "cooperative"), what kind of cultivation is permitted, and whether over-the-counter sales are legal. So while Mendocino County's sheriff may have been satisfied that Joy Greenfield was complying with state law, officials in other jurisdictions might have taken a different view. Even if every law enforcement official in California were of one mind about the requirements for marijuana cultivation, the DOJ could still choose to interpret state law differently. It is not even clear that the DOJ would defer to the California Supreme Court's interpretation of the law.

Like I said: lots of wiggle room. And you can't blame Leonhart for that. It was Attorney General Eric Holder who formulated the new policy, and it was President Obama who let him do it, despite his repeated campaign promises to leave medical marijuana patients and their suppliers alone.

The definitive test of whether anything has changed will be in jurisdictions such as Maine, Rhode Island,

<continued from previous page> New Jersey, and the District of Columbia, which have laws that explicitly authorize and regulate the production and distribution of medical marijuana. In Colorado, which had a law that, like California's, left crucial issues related to cultivation and sale unresolved, the state legislature recently enacted new regulations that clarify the law's requirements.

If the DEA nevertheless continues to raid medical marijuana suppliers in Colorado, including dispensaries that are licensed, regulated, and taxed by the government, Obama's bad faith will be clear and unambiguous. Source: Opinion by Reason Foundation - in Society / Drug Law - By Jacob Sullum, visit http://www.opposingviews.com/i/who-s-to-blamefor-dea-medical-marijuana-raids. Posted by Suzy of

Drug Policy Forum of Texas - www.dpft.org

"From a physician's perspective, marijuana is a minor ailment. The supposed cure, criminalization, is like the IV administration of a toxic, expensive antibiotic to treat a cold." - Larry A. Bedard, MD, past president of the American College of Emergency Medicine, "DECRIMINALIZE MARIJUANA: IT'S FAR LESS HARMFUL THAN ALCOHOL," San Jose Mercury News, 16 Jul 2010

"In the 40 years since U.S. President Richard Nixon declared a "war on drugs," the supply and use of drugs has not changed in any fundamental way. The only difference: a taxpayer bill of more than \$1 trillion." - David Luhnow, SAVING MEXICO, Wall Street Journal, 26 Dec 2009

And, why should we care? Because, sometimes ... Cops Raid The Wrong House Georgia Drug Bust Gone Bad: Elderly Woman Hospitalized

An elderly woman is in Georgia hospital after suffering a heart attack during a mistaken drug raid at her house — a house police had under surveillance for two years. This incident comes on the heels of a highly publicized Missouri drug-bustgone-bad that was captured on video and ended with a dead dog.

Helen Pruett, 76, was home alone in her trailer Tuesday morning, when Polk County policed officers and DEA agents went to her house — with guns drawn — to serve an arrest warrant.

"It was not a search warrant," Polk County police

Chief Kenny Dodd told *WSB Radio*. "She came to the door, opened it and talked with us on the steps. The house was never breached."

After speaking with Pruett at the front door, officers "realized that the subject we were looking for was not there," Dodd said.

However, the woman's daughter tells a slightly different story. Machelle Holt says officers swarmed the house.

"She was at home and a bang came on the back door and she went to the door and by the time she got to the back door, someone was banging on the front door and then they were banging on her kitchen window saying 'police, police,'" Holl told WSB.

Holl says the house was surrounded and she was scared to open the door. When Dodd finally convinced her she was safe, she let them in.

Hey, everybody makes mistakes. It just gets problematic when those mistakes end up with <u>dead</u> <u>mothers</u>, hospitalized grandmothers, and <u>dead pets</u> – not to mention <u>billions and billions of dollars</u> of taxpayer money <u>flushed down the proverbial toilet</u> each year. I should probably say something about the definition of insanity at this point.

In any case, if you keep your eyes and ears open you'll see that these instances are hardly unique. This kind of thing happens all across the country, every single day. And there is no end in sight, even when 81% of Americans have come to the belief that medical marijuana should be legal. Source: By E.D. KAIN, This is your war on drugs: visit - http://trueslant.com/erikkain/2010/05/14/seventy-six-year-old-woman-hospitalized-after-cops-raid-the-wrong-house/

<continued from VA EAES RULES, page 1 > "When states start legalizing marijuana we are put in a bit of a unique position because as a federal agency, we are beholden to federal law," said Dr. Robert Jesse, the principal deputy under secretary for health in the veterans department.

At the same time, Dr. Jesse said, "We didn't want patients who were legally using marijuana to be administratively denied access to pain management programs."

The new, written policy applies only to veterans using medical marijuana in states where it is legal. Doctors may still modify a veteran's treatment plan if the veteran is using marijuana, or decide not to

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<continued from previous page> prescribe pain medicine altogether if there is a risk of a drug interaction. But that decision will be made on a case-by-case basis, not as blanket policy, Dr. Jesse said.

Though veterans of the Vietnam War were the first group to use marijuana widely for medical purposes, the population of veterans using it now spans generations, said Michael Krawitz, executive director of Veterans for Medical Marijuana Access, which worked with the department on formulating a policy.

Veterans, some of whom have been at the forefront of the medical marijuana movement, praised the department's decision. They say cannabis helps soothe physical and psychological pain and can alleviate the side effects of some treatments.

"By creating a directive on medical marijuana, the V.A. ensures that throughout its vast hospital network, it will be well understood that legal medical marijuana use will not be the basis for the denial of services," Mr. Krawitz said.

Although the Obama administration has not embraced medical marijuana, last October, in a policy shift, the Justice Department announced that it would not prosecute people who used or distributed it in states where it was legal.

Laura Sweeney, a spokeswoman for the Justice Department, would not comment spefically on the veterans department policy. "What we have said in the past, and what we have said for a while, is that we are going to focus our federal resources on large scale drug traffickers," she said. "We are not going to focus on individual cancer patients or something of the like."

Many clinicians already prescribe pain medication to veterans who use medical marijuana, as there was no rule explicitly prohibiting them from doing so, despite the federal marijuana laws.

Advocates of medical marijuana use say that in the past, the patchwork of veterans hospitals and clinics around the country were sometimes unclear how to deal with veterans who needed pain medications and were legally using medical marijuana. The department's emphasis on keeping patients off illegal drugs and from abusing their medication "gave many practitioners the feeling that they are supposed to police marijuana out of the system," Mr. Krawitz said.

"Many medical-marijuana-using veterans have just abandoned the V.A. hospital system completely for this reason," he said, "and others that stay in the system feel that they are not able to trust that their doctor will be working in their best interests." In rare cases, veterans have been told that they need to stop using marijuana, even if it is legal, or risk losing their prescription medicine, Mr. Krawitz said.

David Fox, 58, an Army veteran from Pompey's Pillar, Mont., uses medical marijuana legally to help quiet the pain he experiences from neuropathy, a nerve disorder. But he said he was told this year by a doctor at a veterans' clinic in Billings that if he did not stop using marijuana, he would no longer get the pain medication he was also prescribed.

A letter written to Mr. Fox in April from Robin Korogi, the director of the veterans health care system in Montana, explained that the department did not want to prescribe pain medicine in combination with marijuana because there was no evidence that marijuana worked for noncancer patients and because the combination was unsafe.

"In those states where medical marijuana is legal, the patient will need to make a choice as to which medication they choose to use for their chronic pain," Ms. Korogi wrote. "However, it is not medically appropriate to expect that a V.A. physician will prescribe narcotics while the patient is taking marijuana."

Mr. Fox was shocked by the decision, he said.

"I felt literally abandoned," he said. "I still needed my pain meds. I thought they were supposed to treat you. It was devastating for me."

Mr. Fox, who said that at one point he was weaning himself off his pain medication for fear of running out, has held one-man protests in front of the clinic, carrying signs that read "Abandoned by V.A., Refused Treatment."

Veterans officials would not comment on specific cases, citing medical privacy laws.

This month, Dr. Robert A. Petzel, the under secretary for health for the veterans department, sent a letter to Mr. Krawitz laying out the department's policy. If a veteran obtains and uses medical marijuana in accordance with state law, Dr. Petzel wrote, he should not be precluded from receiving opioids for pain management at a veterans facility.

Dr. Petzel also said that pain management agreements between clinicians and patients, which are used as guidelines for courses of treatment, "should draw a clear distinction between the use of illegal drugs, and legal medical marijuana.

<continued from VA EAES RULES, previous page> Dr. Jesse, the veterans department official, said that formalizing rules on medical marijuana would eliminate any future confusion and keep patients from being squeezed between state and federal law.

Steve Fox, director of government relations for the Marijuana Policy Project, which favors the legal regulation of the drug, called the decision historic. "We now have a branch of the federal government accepting marijuana as a legal medicine," he said.

But Mr. Fox said he wished the policy had been extended to veterans who lived in states where medical marijuana was not legal.

He said it was critical that the veterans department make its guidelines clear to patients and medical staff members, something officials said they planned on doing in coming weeks.

Said Dr. Jesse, "The whole goal of issuing a national policy is to make sure we have uniformity across the system." Source:

http://www.nytimes.com/2010/07/24/health/policy/ 24veterans.html - Author: Dan Frosch , Pubdate: Sat, 24 Jul 2010 - New York Times (NY), Website: http://www.nytimes.com/

Cited: Veterans for Medical Marijuana Access http://www.veteransformedicalmarijuana.org/

Referenced: The letter Mr. Krawitz to http://drugsense.org/url/qWkiEgE5

http://www.mapinc.org/find?253 Bookmark:

(Cannabis - Medicinal - U.S.)

<continued from DC DISPENSARIES, page 1 > cannabis from a licensed dispensary.

NORML Legal Counsel Keith Stroup criticized the delay. "Many of the patients that this law is specifically designed to protect -- such as D.C. residents with HIV, cancer, and multiple sclerosis -- need medical cannabis now, not a year from now. These people should not be subject to arrest and incarceration for using a medicine that helps them. Who knows how long D.C. politicians and regulators may drag their feet on this issue? Why should patients have to suffer in the interim?" information, please contact Keith Stroup, at: (202) 483-5500.

Marijuana Compound Halts Breast Cancer Tumor Growth

Madrid, Spain: The administration of THC reduces the tumor growth of metastatic breast cancer and "might constitute a new therapeutic tool for the treatment" of cancerous tumors, according to preclinical data published online in the journal Molecular Cancer.

Investigators from Complutense University in Madrid assessed the anti-tumor potential of THC and JWH-133, a non-psychotropic CB2 receptor-selective agonist, in the treatment of ErbB2-positive breast tumors – a highly aggressive form of breast cancer that is typically unresponsive to standard therapies.

Researchers reported, "[B]oth Delta-9tetrahydrocannabinol and JWH-133 ...reduce tumor growth [and] tumor number [in mice]. ... [T]hese results provide a strong preclinical evidence for the use of cannabinoidbased therapies for the management of ErbB2positive breast cancer."

In 2007, investigators at the California Pacific Medical Center Research Institute reported that the administration of the nonpsychoactive cannabinoid CBD limited breast cancer metastasis in a manner that was superior to comparable synthesized agents.

Previous preclinical studies assessing the anticancer properties of cannabinoids have shown that they inhibit the proliferation of a wide range of cancers, including brain cancer, prostate cancer, oral cancers, lung cancer, skin cancer, pancreatic cancer, biliary tract cancers, and lymphoma.

For more information, please contact Paul Armentano, NORML Deputy Director, paul@norml.org. Full text of the study, "Cannabinoids reduce ErbB2-driven breast cancer progression through Akt inhibition," is available online at: http://www.molecularcancer.com/content/9/1/196.