



Marijuana Policy Project Foundation
P.O. Box 77492
Washington, DC 20013
p: (202) 462-5747 • f: (202) 232-0442
info@mpp.org • www.mpp.org

“We change laws.”

Missouri’s Low-THC Law

In 2014, Missouri lawmakers approved a bill to authorize the use of “hemp extracts,” cannabis oils containing one of the primary components of medical marijuana — cannabidiol (also referred to as CBD) — for individuals with seizure conditions. The law requires that the cannabis oil contain at least 5% CBD and less than 0.3% of THC, the most common component of marijuana.

Under the law, the cannabis oil must be extracted in a laboratory in the state. The state has licensed private production facilities that cultivate marijuana and process it into cannabis oil, as well as “cannabidiol oil care centers,” which distribute marijuana extract to patients. The program is severely limited, in that only patients with intractable epilepsy qualify to receive the cannabis oil. To qualify, a neurologist must have found that the patient does not respond to three or more treatment options. Unfortunately, law leaves behind the vast majority of seriously ill patients in the state.

Low-THC, High CBD Laws Leave Behind Most Patients

CBD is one of approximately 85 active compounds — called cannabinoids — found in marijuana. While high-CBD marijuana has been effective at treating seizures, the number of individuals treating seizure disorders through medical marijuana programs is only a relatively low percent of the total patients who could benefit from marijuana. For example, only 2% of the registered patients in both Rhode Island and Colorado report seizures as their qualifying conditions. About 98% of patients in most state programs suffer from conditions other than seizure conditions — such as cancer, HIV/AIDS, Lou Gehrig’s disease, debilitating pain, Crohn’s disease, or severe nausea. Patients with conditions other than seizures will be left behind unless the legislation is amended.

Not only does Missouri’s program limit access to only those with seizure conditions, but it further limits it to those whose epilepsy is untreatable with three or more other treatment options — a narrow subset of those with severe seizure conditions that could be treated with medical marijuana.¹

Conclusion

While HB 2238 as a step forward for those with intractable seizure conditions, it is a far more limited bill than the laws that are protecting more than a million seriously ill patients nationwide. Thousands of patients will be counting on voters to approve New Approach Missouri’s medical marijuana initiative on November 8, 2016.

¹ See, i.e., <http://www.ladybud.com/2014/01/27/why-no-parent-should-support-cbd-only-legislation/>