Recommendation
Urge the Administration and Department of Justice to reinstate the Cole Memo to ensure that federal resources are not used to prosecute individuals or businesses following state cannabis laws; pass legislation like the Medical Marijuana Research Act and the Cannabidiol and Marihuana Research Expansion Act (S. 253) to facilitate federal research into the potential therapeutic benefits and harms of cannabis; and further address the restrictive Schedule I designation of cannabis to promote medical and scientific research of cannabis.

BACKGROUND
There is no “one size fits all” treatment for epilepsy, and around 30 – 40 percent of individuals living with epilepsy (over one million individuals) live with uncontrolled or intractable epilepsy, despite available treatments. Some people living with epilepsy and seizures and their providers have reported beneficial effects and reduced seizure activity when using medical cannabis or cannabidiol (CBD) and therefore turn to it when other treatments have failed. As with any other treatment regimen, it is critical that physicians have the ability to consult and closely monitor individuals using cannabis and/or CBD, and physicians must have the ability to legally do so.

Currently, the use of cannabis is legal in 34 states and the District of Columbia. However, without safeguards in place, individuals who legally use medical cannabis and/or CBD under state law are at a continual risk of federal prosecution. Federal protections for lawful state-level medical cannabis activities, like the reinstatement of the Cole Memo, would help ensure safe and reliable access to medical cannabis through state-regulated programs.

Despite some evidence that cannabis and CBD help reduce seizure activity in some individuals, it is currently difficult and expensive to conduct further, more robust research into this connection. There are significant obstacles for scientists and researchers to organize clinical trials and other research involving cannabis. There are also additional costs and infrastructure requirements due to the Schedule I designation that further limit innovation and investment. Legislation that addresses research needs must also address the Schedule I designation.

SAFE & LEGAL ACCESS TO MEDICAL CANNABIS AND CANNABIDIOL (CBD)

ABOVE THE EPILEPSIES
Epilepsy is a disease or disorder of the brain which causes reoccurring seizures. It is a spectrum disease comprised of many diagnoses including an ever-growing number of rare epilepsies. There are many different types of seizures and varying levels of seizure control.

3.4 million Americans live with active epilepsy including 470,000 children and teenagers. Thirty to forty percent of people with epilepsy live with uncontrolled seizures despite available treatments. Delayed recognition of seizures and inadequate treatment increase a person’s risk of subsequent seizures, brain damage, disability, and death. Epilepsy imposes an annual economic burden of $19.4 billion on the country.

34 states & DC have passed comprehensive medical cannabis laws

30 - 40% of individuals diagnosed with epilepsy have uncontrolled seizures despite available treatments

1 FDA approved therapy derived from cannabis for the treatment of seizures associated with three rare forms of epilepsy

FOR MORE INFORMATION, CONTACT:
ABBEY ROUDEBUSH Senior Manager, Government Relations & Advocacy, Epilepsy Foundation | 301.918.3784 aroudebush@efa.org
On June 30, 2008, when he was just two years and nine months old, Freeman Dando had his first seizure. Over the next 10 years, Freeman would experience thousands of seizures and countless trips to the hospital, unable to find a treatment to stop his seizures.

Freeman and his health care team tried to control his seizures with anti-seizure medications. He tried – and failed – on six different medications. Some medications failed to control his seizures despite being on the maximum dose, while other medications actually induced seizure activity. Despite being unable to completely control his seizures, Freeman and his health care team found a medication regimen that kept him from having seizures during the day. Freeman’s typical seizures happened while he slept and usually lasted about 45 seconds. Then, in spring 2018, Freeman began experiencing breakthrough seizures during the day while at school.

Soon, Freeman was experiencing hundreds of seizures day and night. He was unable to go to school and participate in his favorite sports. Having run out of other pharmaceutical options, Freeman’s parents worked with his health care team to access medical cannabis through the Texas Compassionate Use Program. After adding cannabidiol (CBD) to his existing medication regimen, Freeman’s life changed drastically and for the better. He went from having over 100 seizures daily to zero in just a matter of days. This has significantly improved his quality of life and ability to fully participate in school and activities. Freeman, now 15 years old, is a freshman in high school and excels on the Cross Country and track teams.

Freeman and his family are extremely relieved that through physician-directed care, they have found a treatment regimen that so far, has kept him almost seizure free. However, they would still like to more fully understand the benefits and risks associated with CBD and therefore urge Congress to help break down current research barriers and remove the Schedule I status for the entire cannabis plant. Simultaneously, it is vital that Freeman – and others like him – can continue to access safe and legal CBD. The consequences of stopping an effective treatment are too severe and Freeman deserves to continue on his successful and bright path.