New York State Nurses Association

Medical Use of Marijuana

The intent of this position statement is to acknowledge the role of nurses to advocate for patient access to marijuana for therapeutic purposes and support legislation that would legalize medical marijuana for symptom relief.

Position

The New York State Nurses Association:

- Supports legislative efforts in New York State that would amend Article 33 of Public Health Law and allow the growth and use of marijuana for patients whose symptoms are within designated guidelines.
- Endorses the use of marijuana for serious and life-threatening medical conditions as defined by proposed New York State legislation.

Background

Marijuana has been used for centuries for medicinal purposes and was legal in the United States until the Marijuana Tax Act of 1937 prohibited its use (ANA, 2004). While federal laws provide no exception for the use of medical marijuana, as of 2007 twelve states have enacted laws that legalize medical marijuana; several other states have legislation pending (www.medicalmarijuanaprocon.org/pop/stateprograms.htm). A summary of U.S. government reports on marijuana can be found at www.medicalmarijuanaprocon.org/pop/govtreports.htm.

Anecdotal accounts from patients suggest that marijuana has antiemetic, sedative and analgesic effects as well as the stimulation of appetite and improved food intake. In 1997, a National Institutes of Health panel of experts called for more studies to properly evaluate marijuana’s medical potential in five specific areas (analgesia, neurological and movement disorders, nausea and vomiting associated with cancer chemotherapy, glaucoma, and appetite stimulation for persons with AIDS or cancer-related weight loss) (Mathias, 1997). In 1999, the Department of Health and Human Services announced the creation of a new mechanism to provide research-grade marijuana not only for NIH-funded research, but also for scientifically valid research that is funded by other sources (USDHHS, 2002).

An Institute of Medicine (IOM) study team examined reports of medical uses of marijuana for diseases sharing common symptoms such as pain, nausea and vomiting, and muscle spasms.
Conclusions from scientific data indicate the potential therapeutic value of marijuana and its active ingredient, tetrahydrocannabinol (THC; delta-9-THC) for the following:

- Pain relief
- Control of nausea

Since the IOM report of 1999 there is additional evidence to support the use of marijuana for the following:

- Pain and nausea following chemotherapy (Tramer, Carroll, Campbell, et al., 2001)

With support from the National Institutes of Health, cutting edge research related to this area is beginning to emerge. For example, Abrams and colleagues (2007) conducted a prospective randomized placebo–controlled trial to determine the effect of smoked cannabis on neuropathic pain. Smoked cannabis was well tolerated and effectively relieved chronic neuropathic pain from HIV–associated sensory neuropathy (Abrams, et al., 2007).

The New York State Nurses Association encourages elimination of barriers to the use of medicinal marijuana. When legalized, nurses will be allowed to advocate for patient use of marijuana for medicinal purposes. NYSNA joins the growing number of state nursing associations to support the therapeutic use of marijuana.

**Recommendations**

The New York State Nurses Association recommends that registered professional nurses:

- Advocate for legislation at state and federal levels that would provide patients safe and legal access to marijuana for medical use and protect licensed professionals who prescribe, dispense and administer medicinal marijuana from prosecution.
- Educate themselves about the current therapeutic and evidence-based uses of marijuana.
- Collaborate with other health professionals engaged in research efforts designed to investigate the scientific merits of medical marijuana.

Note: The use of the term “patient” anywhere in this document is intended to be generic and refers to a recipient of nursing care.
References


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