## Submission to the Victorian Law Reform Commission

## MEDICINAL CANNABIS REFERENCE

Number	8	
Name	Dr Robert Kaldawi	
Date	23 March	2015

Dear Sir / Madam,

Re: Medicinal cannabis

I had already sent you my professional opinion re the above. However, I would like to reiterate in summary as follows:

•Who should be eligible to use cannabis for medicinal purposes? Cannabis is a drug.

It should be treated as such and in such circumstances, it can have clinical application and can be used under the same indications and contra-indications and clinical applications as is the case for other drugs or medication under prescription. This ought to be subject to the clinical papers and the latest research in this regard. I do believe that there is room to use cannabis in clinical practice under strict conditions as is applied for morphine or oxycontin and allied classes of medication.

There may even be a need for clinical trials to determine such optimal doses and toxicity levels in clinical practice, thus, there needs to be changes in laws to enable such research to be carried out.

•How extensive should any Victorian medicinal cannabis scheme be? As indicated above, the scheme ought to be similar to any other drug of addiction such as "benzes" or methadone for example.

Pharmacists ought to be legally able to dispense it as they do with methadone. Drs ought to be able to prescribe it as they do with methadone and tranquillisers.

However, there needs to be research to enable appropriate use and doses with optimum physiological effect with minimum unwanted side effects. Current prohibition needs to be removed ONLY as far as enabling Drs to prescribe it, Pharmacists to dispense it without enabling the community to access it without legal prescription. Again as is the case for "methadone or serepax".

## Regards,

Dr. Robert Kaldawi (Ph.D, Biochemistry) Accredited Clinical Director (DHS 92/003)