



HIV/AIDS and Medical Marijuana Positions, Research and Statements

American Academy of Family Physicians

"Based on much evidence, from patients and doctors alike, on the superior effectiveness and safety of whole cannabis (marijuana) compared to other medicines for many patients – suffering from the nausea associated with chemotherapy, the wasting syndrome of AIDS, and the symptoms of other illnesses ... we hereby petition the Executive Branch and the Congress to facilitate and expedite the research necessary to determine whether this substance should be licensed for medical use by seriously ill persons."—1995

American Academy of HIV Medicine

"When appropriately prescribed and monitored, marijuana/cannabis can provide immeasurable benefits for the health and well-being of our patients."

Reference: deJong, B.C. et al, "Marijuana Use and its Association With Adherence to Antiretroviral Therapy Among HIV-Infected Persons With Moderate to Severe Nausea," *Journal of Acquired Immune Deficiency Syndromes*, January 1, 2005

AIDS Action Council

AIDS Action Council "AIDS Action Council supports the elimination of federal restrictions that bar doctors from prescribing marijuana for medical use by individuals with HIV/AIDS. ... AIDS Action Council supports reopening the U.S. Public Health Service's Investigational New Drug Compassionate Access program to provide access to medical-use marijuana for greater numbers of qualified patients.

Reference: "*Resolution in Support of Access to Medical-Use Marijuana*," adopted by the Public Policy Committee of AIDS Action Council: November 15, 1996

AIDS Treatment News

"The scientific case for medical [marijuana] use keeps growing stronger. Far more dangerous psychoactive drugs, like morphine, are successfully allowed in medical use. Somehow marijuana has become a symbolic or political hard line to be maintained by anti-drug believers regardless of human cost. The costs will mount until the public can organize itself to insist that those who urgently need this medicine can obtain and use it legally."

Reference: *AIDS Treatment News*, #287, January 23, 1998

HIV Medicine Association of the Infectious Diseases Society of America; American Medical Students Association; Lymphoma Foundation of America;

"[I]t cannot seriously be contested that there exists a small but significant class of individuals who suffer from painful chronic, degenerative, and terminal conditions, for whom marijuana provides uniquely effective relief."

–Dr. Barbara Roberts; and Irvin Rosenfeld, Amicus Curiae brief filed in the U.S. Supreme Court (in the case of *Gonzales v. Raich*), October 2004

An 11/25/03 article in the **Medical Post** noted:

"Almost one in three HIV patients [29%] in Ontario [Canada] is using marijuana for medical reasons, according to a study presented at the 2003 Ontario HIV Treatment Network research conference...

The main goals [for medical marijuana users] were to gain weight or increase appetite, aid sleep, and alleviate nausea and vomiting. Significantly more women than men (45% versus 5%) used the drug for pain management...

For the physician treating HIV patients, the study raises a red flag: 73% of the medical users thought their doctor was aware of their drug use, but only 23% of their medical charts reflected that fact. "

11/25/03 [MedPost](#)

In January 1997, the White House Office of National Drug Control Policy (ONDCP) asked the Institute of Medicine to conduct a review of the scientific evidence to assess the potential health benefits and risks of marijuana and its constituent cannabinoids. That review began in August 1997 and culminates in a 222-page report published in book form through the National Academy of Sciences.

Information for this study was gathered through scientific workshops, site visits to cannabis buyers' clubs and HIV/AIDS clinics, analysis of the relevant scientific literature, and extensive consultation with biomedical and social scientists.

This study was supported under Contract No. DC7C02 from the Executive Office of the President, Office of National Drug Control Policy.

From the Institute of Medicine 1999 report [Page 159](#):

"The profile of cannabinoid drug effects suggest that they are promising for treating wasting syndrome in AIDS patients. Nausea, appetite loss, pain, and anxiety are all afflictions of wasting, and all can be mitigated by marijuana. Although some medications are more effective than marijuana for these problems, they are not equally effective in all patients. "

(March, 1999) [IOM](#)

Dennis M. Israeliski, M.D., et. al, in their research study, "Marijuana use is associated with better adherence to ART among HIV-infected persons with moderate to severe nausea," presented at the July 2004 **XV International AIDS Conference**, reported:

"Adherence to antiretroviral therapy (ART) is essential to successful treatment of HIV-infection....

Our data suggest that medicinal use of marijuana may facilitate, rather than impede, ART adherence for patients with nausea..."

(7/04) [Israeliski](#)

A 2/12/04 article by **Reuters**, "**Marijuana Eases HIV-Related Nerve Pain**," stated:

"For people with nerve damage that can result from HIV infection, smoking marijuana seems to relieve the pain they experience, according to the results of a small pilot study.

...In a trial, 16 HIV-infected subjects with neuropathy were given three marijuana cigarettes each day for seven days...Twelve of the 16 participants reached the [optimal] 30 percent goal in reduction of pain..."
(2/12/04) Reuters

GW Pharmaceuticals stated on its website in January 2004;

"AIDS (Acquired Immune Deficiency Syndrome) wasting syndrome was a very frequent complication of HIV infection prior to the advent of protease-inhibitor drugs, and has been associated with major weight loss and cachexia, serving to further debilitate its victims, already weakened by immune system failure and opportunistic infections.

Cannabis has been a frequently employed alternative medicine for the condition, particularly in the USA, because of its reported benefits on appetite and amelioration of other AIDS symptoms."

01/04 GW Pharmaceuticals

American Society of Addiction Medicine

" Approved medical uses for marijuana or [THC] for treatment of glaucoma, illnesses associated with wasting such as AIDS, the emesis associated with chemotherapy, or other uses ... should be administered only under the supervision of a knowledgeable physician."

—April 16, 1997

Canadian AIDS Society (Societe canadienne du sida)

"The Canadian AIDS Society's Board of Directors believes that people living with HIV/AIDS should have access to cannabis for therapeutic purposes in the treatment of HIV/AIDS through a compassionate framework. ... [We] favor a controlled legalization system for cannabis in Canada, where the production, distribution and consumption are regulated, designated cannabis distribution centres are established and recognized, and appropriate prevention messages and harm reduction strategies are developed."

Reference: *position statement adopted by the CAS' Board of Directors: May 20, 2004*

Florida Governor's Red Ribbon Panel on AIDS

"Recommendations for care: The state should facilitate greater access to drug therapies for treatment as well as preventive therapy. This should include access to marijuana when medically indicated."

Reference: *Florida Governor's Report: January 1993*

San Francisco Mayor's Summit on AIDS and HIV

"Marijuana must continue to be available to persons living with AIDS and HIV and other diseases who wish to use it for pain management, appetite stimulation and other medicinal purposes."

Reference: *"Mayor's Summit on AIDS & HIV," preliminary report released January 27, 1998*

AIDS Survival Project

Signed the March 6, 2002 Coalition For Compassionate Access letter to President George Bush asking him to "allow people with AIDS, cancer, and other serious illnesses to use medical marijuana if they have the approval of their physician," which was placed in a full-page ad in the New York Times on March 6, 2002." (3/6/02)

Boulder County AIDS Project

Signed the March 6, 2002 Coalition For Compassionate Access letter to President George Bush asking him to "allow people with AIDS, cancer, and other serious illnesses to use medical marijuana if they have the approval of their physician," which was placed in a full-page ad in the New York Times on March 6, 2002

Maine AID Alliance

Signed the March 6, 2002 Coalition For Compassionate Access letter to President George Bush asking him to "allow people with AIDS, cancer, and other serious illnesses to use medical marijuana if they have the approval of their physician," which was placed in a full-page ad in the New York Times on March 6, 2002.

National Association of People with AIDS

"National Association of People with AIDS, to show their support of Medical Marijuana, joined a consortium of AIDS organizations (sponsored by the Marijuana Policy Project) in favor of rescheduling marijuana as medicine." (3/27/02)

Nebraska AIDS Project

Signed the March 6, 2002 Coalition For Compassionate Access letter to President George Bush asking him to "allow people with AIDS, cancer, and other serious illnesses to use medical marijuana if they have the approval of their physician," which was placed in a full-page ad in the New York Times on March 6, 2002. (3/6/02)

New York AIDS Coalition

"Legalizing medical marijuana is both the compassionate and logical course of action. It's use is beneficial to people with many types of illnesses. In the case of AIDS, numerous studies have proven that it can reduce nausea and vomiting, stimulate appetite and reduce the effects of wasting. Among physicians specializing in AIDS/HIV, there is widespread acknowledgement that marijuana represents a significant treatment component for those who have advanced-stage HIV symptoms, as well as for those with symptoms caused by the multiple-drug therapies used to control HIV." (12/13/02)

San Francisco AIDS Project

Signed the March 6, 2002 Coalition For Compassionate Access letter to President George Bush asking him to "allow people with AIDS, cancer, and other serious illnesses to use medical marijuana if they have the approval of their physician," which was placed in a full-page ad in the New York Times on March 6, 2002. (3/6/02)

New York State Association of County Health Officials

" Marijuana has proven to be effective in the treatment of people with HIV/AIDS, multiple sclerosis, cancer, and those suffering from severe pain or nausea ... The legalization of medical marijuana would be a step forward for the health of all New Yorkers."

—resolution, 2003

The New Mexico Medical Society

"... supports the medical use of marijuana for patients suffering from cancer, AIDS, and other serious or terminal conditions."

— January 21, 2002

Former U.S. Surgeon General Joycelyn Elders, M.D.,

" The evidence is overwhelming that marijuana can relieve certain types of pain, nausea, vomiting and other symptoms caused by illnesses like multiple sclerosis, cancer and AIDS – or by the harsh drugs sometimes used to treat them. And it can do so with remarkable safety. Indeed, marijuana is less toxic than many of the drugs that physicians prescribe every day."

— "Myths About Medical Marijuana," *Providence Journal*, March 26, 2004

Whitman-Walker Clinic

" Whitman-Walker Clinic supports the valid use of marijuana, under a physician's supervision, to help alleviate AIDS wasting syndrome and nausea associated with treatment regimes."

—April 1998
