
“the AAP recognizes that marijuana may currently be an option for cannabinoid administration for children with life-limiting or severely debilitating conditions and for whom current therapies are inadequate.”

Epilepsy Foundation (National) – February 10th, 2015

The Epilepsy Foundation is committed to supporting physician directed care, and to exploring and advocating for all potential treatment options for epilepsy, including cannabidiol (CBD) oil and medical cannabis. People with uncontrolled seizures live with the continual risk of serious injuries and loss of life. If a patient and their healthcare professionals feel that the potential benefits of medical cannabis for uncontrolled epilepsy outweigh the risks, then families need to have that legal option. Nothing should stand in the way of patients gaining access to this potentially lifesaving treatment.

Epilepsy Foundation (National) - Philip M. Gattone, President & CEO, Epilepsy Foundation, and Warren Lammert, Chair, Epilepsy Foundation Board of Directors

“Nothing should stand in the way of patients gaining access to potentially lifesaving treatment. If a patient and their healthcare professionals feel that the potential benefits of medical marijuana for uncontrolled epilepsy outweigh the risks, then families need to have that legal option now -- not in five years or ten years. For people living with severe uncontrolled epilepsy, time is not on their side. This is a very important, difficult, and personal decision that should be made by a patient and family working with their healthcare team.”

Orrin Devinsky, M.D. - Professor of Neurology, Neurosurgery and Psychiatry, Director, NYU Comprehensive Epilepsy Center

“There is an enormous unmet need for better treatments for children and adults with epilepsy. Approximately one-third of people with epilepsy continue to suffer from seizures despite the best medical, dietary, and surgical therapies. For those with treatment-resistant epilepsy, the enormous toll includes the direct and potentially deadly consequences of the seizures, which are compounded by the disabling physical, cognitive and behavioral side effects from high doses of multiple antiepileptic drugs. Despite advances in epilepsy therapy over the past decades, our progress remains painfully slow and disappointing. Medical care and research fails many patients. The statement by Phil Gattone and Warren Lammert of the Epilepsy Foundation strongly advocates that there should be legal access for all epilepsy patients and their doctors who feel that marijuana is their best treatment option. I agree”

He went on to emphasize…
“1) the need for randomized controlled trials, considered the gold standard for clinical trials, to better understand the safety and effectiveness of any drug or combination of drugs – whether derived from a marijuana plant or synthesized in a lab,
2) the need for changes in how the Drug Enforcement Agency classifies marijuana and its constituents as Schedule 1 drugs. This is much too restrictive based on the scientific data, especially for cannabidiol (CBD) – the major non-psychoactive component of marijuana, and
3) while we await scientific studies, that marijuana products be made available to pediatric and adult patients with treatment-resistant epilepsy.”

“Until we have the scientific data, we should make medical marijuana available to physicians who care for people with treatment-resistant epilepsy and their patients.”

Elizabeth Anne Thiele, MD, PhD - Director, Pediatric Epilepsy Program
Massachusetts General Hospital

“Based on a review of the literature and first-hand experience treating pediatric epilepsy patients, it is my opinion that medical marijuana—and, particularly, the non-psychoactive ingredient in medical marijuana, cannabidiol (CBD)—may have substantial medical benefit for pediatric epilepsy patients, as well as significantly fewer adverse side effects than many of the other anti-epileptic therapies available today.”

“Numerous studies performed in the past 40 years have demonstrated the anticonvulsant effects of CBD both in animal models\(^1\) and in human adults.\(^2\) In a double blind, placebo-controlled study showing that CBD reduces seizure activity, the most commonly reported side effect was somnolence, and no patients reported any psychotropic effects.\(^3\) Indeed, studies suggest that CBD has no negative impact on psychomotor or psychological functions.\(^4\)”


\(^3\) See Cunha et al., supra at Note 5.

“My colleagues and I have witnessed the dramatic effect of CBD on many of our pediatric patients. For example, I have a pediatric patient with severe intractable epilepsy who had been experiencing up to 100 seizures every day, despite trials of 18 antiepileptic drugs. After CBD was introduced into his treatment regimen, his seizures decreased dramatically. He now has between 0 and 5 seizures a day.

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5 This patient currently resides in California, where the use of marijuana for medicinal purposes is legal.