Submission No 335

INQUIRY INTO IMPACT OF THE REGULATORY FRAMEWORK FOR CANNABIS IN NEW SOUTH WALES

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Date Received: 30 July 2024

NSW Inquiry into Cannabis

Thank you for the opportunity to make this submission.

Below please find some reasons why cannabis should be legal for responsible adult use.

Melinda Wilson

Cannabis Use Does Not Cause Psychosis

The 2023 study in the Psychiatry and Clinical Neurosciences journal: "Influence of cannabis use on incidence of psychosis in people at clinical high risk."

Aims: The study aimed to examine the association between cannabis use and the incidence of psychotic disorders in individuals at clinical high risk of psychosis.

Methods: The researchers assessed current and previous cannabis use in 334 individuals at clinical high risk of psychosis and 67 healthy controls. Participants were followed up for 2 years.

"There was no significant association between any measure of cannabis use at baseline and transition to psychosis, persistence of symptoms, or functional outcome."

Source: https://onlinelibrary.wiley.com/doi/10.1111/pcn.13555

Medicinal Cannabis for Psychiatric Disorders

A Clinical Focused Systematic Review

Sarris, J., Sinclair, J., Karamacoska, D. et al. Medicinal cannabis for psychiatric disorders: a clinically focused systematic review. BMC Psychiatry 20, 24 (2020).

Source: https://doi.org/10.1186/s12888-019-2409-8

In 2020, a clinically focused systematic review was conducted to evaluate the emerging medical application of cannabis across major psychiatric disorders. This report combined the findings of various studies investigating the value of cannabinoids in the treatment of psychiatric conditions.

There is currently encouraging evidence for medicinal cannabis in the treatment of a range of psychiatric disorders.

Social Anxiety

Studies included in the review provide support for the use of cannabinoids, specifically CBD, in reducing social anxiety.

"While the evidence is preliminary, the results suggest potential therapeutic benefits that warrant further investigation."

Source: https://doi.org/10.1186/s12888-019-2409-8

Schizophrenia

The review found mixed but generally positive evidence for using cannabinoids as a complementary treatment for schizophrenia. This suggests that while cannabinoids may not be effective as a standalone treatment, they could enhance existing therapeutic approaches.

Source: https://doi.org/10.1186/s12888-019-2409-8

Insomnia

Medicinal cannabis may be beneficial for improving sleep. These findings highlight the potential of cannabis-based treatments in enhancing the quality of life for individuals suffering from these conditions.

The Study “Treating insomnia symptoms with medicinal cannabis” is a world first randomized, double blind, placebo-controlled crossover trial evaluating the safety and efficacy of 2 weeks of nightly sublingual cannabinoid extract (ZTL-101) in treating chronic insomnia (symptoms lasting more than 3 months). The study found that ZTL-101 significantly decreased insomnia symptoms relative to placebo. ZTL-101 decreased insomnia severity (Insomnia Severity Index [ISI]). It improved self-reported sleep onset latency (SOL), total sleep time (TST), sleep quality (sSQ), and feeling rested upon waking.

ZTL-101 also decreased wake after sleep onset (WASO) and increased sleep efficiency (SE).

Source: https://academic.oup.com/sleep/article/44/11/zsab149/6296857

Attention Deficit Hyperactivity Disorder (ADHD)

One study in the review indicates potential efficacy of an oral cannabinoid/terpene combination in treating ADHD. Continued research is essential to substantiate these initial results and to fully explore the benefits that medicinal cannabis may offer.

"This early stage finding underscores the importance of ongoing clinical studies to validate the therapeutic use of medicinal cannabis."

Source: https://doi.org/10.1186/s12888-019-2409-8

Post-Traumatic Stress Disorder (PTSD)

The systematic review found that cannabis use was associated with a reduction in overall PTSD symptoms and an improvement in quality of life. This clinically focused review provides evidence for the use of cannabinoids in treating psychiatric disorders, including mood disorders, anxiety disorders, and PTSD.

Source: https://doi.org/10.1186/s12888-019-2409-8

Opioids the Hidden Threat on Our Roads

Opioids include legal prescription pain relievers like oxycodone, hydrocodone, codeine, and morphine, the potential for addiction and misuse has led to widespread concern about the impact of opioids on driving skills, posing a severe threat to road safety.

Opioids can significantly impair motor skills and reaction times and are not screened for in random drug testing by police, increasing the risk of accidents.

The fatal Hunter Valley wedding bus crash that killed ten people and injured 25 others shows us the terrible tragedy caused when drivers use opioids when driving.

Study: The Prevalence of Alcohol and Other Drugs in Fatal Road Crashes in Victoria, Australia

Jennifer Schumann, Monica Perkins, Paul Dietze, Dhanya Nambiar, Biswadev Mitra, Dimitri Gerostamoulos, Olaf H. Drummer, Peter Cameron, Karen Smith, Ben Beck

This peer reviewed study aimed to examine how the presence of alcohol and other drugs in fatal road trauma in Victoria has changed over time in different road users.

Methods: A population based review of road trauma deaths was performed over the period of **01 July 2006 to 30 June 2016** in Victoria, Australia, using data from the National Coronial Information System (NCIS) and the Victorian State Trauma Registry (VSTR). Drugs were grouped according to type and analysed accordingly.

Results: There were **2287 road traffic fatalities with complete toxicology data (97% of all road traffic fatalities**).

- Alcohol (blood alcohol concentration, BAC) was the most commonly detected drug (>0.001 g/100 mL: 21.1%; >0.05 g/100 mL: 18.4%),
- followed by **opioids (17.3%)**,
- THC (13.1%),
- antidepressants (9.7%),
- benzodiazepines (8.8%),

- amphetamine-type stimulants (7.1%),
- ketamine (3.4%),
- antipsychotics (0.9%)
- cocaine (0.2%).

Trends demonstrated changing use over time with specific drugs.

- Alcohol positive road fatalities declined 9% per year.
- The incidence of strong opioids (oxycodone, fentanyl, morphine, and methadone) increased 6% per year (IRR = 1.06; 95% CI: 1.02–1.10).
- Methylamphetamine was detected in 6.6% of cases and showed a yearly increase of 7% (IRR = 1.07; 95% CI: 1.01–1.13).
- The incidence of THC remained unchanged over the period, observed in 13.1% of cases.

"Increases were observed in the incidence of other potentially impairing drugs including opioids indicating a concerning trend in road safety."

Source: https://research.monash.edu/en/publications/the-prevalence-of-alcohol-and-other-drugs-in-fatal-road-crashes-i

17.3% of road fatalities involved opioids, that number is growing by 6% each year and they are not tested for at RDT. This is astounding and dangerous and needs to be changed. People using medicinal cannabis are being blamed for the high fatality on our roads, when the real danger is people taking opioid's unopposed.