

Beyond the practice of medicine: How individual members can employ their talents to better fulfill ACP's mission

I urge colleagues to consider submitting a resolution to the New York Chapter ACP when an idea strikes them that they feel will be of benefit to ACP or society at large. Should you not be familiar with the on-line form in which the resolution may be prepared <http://www.nyacp.org/i4a/pages/index.cfm?pageid=3326> a brief telephone call to our office at 1-800-446-9746 or 518-427-0366 will get you started. If assistance is needed with the wording of the resolution, pertinent advice can be obtained from a member of our NYACP resolutions task force. Even if the resolution were not adopted, the authors would deserve plaudits for their efforts and can try again in subsequent years.

Three years ago I became aware of issues surrounding the use of marijuana in certain illnesses. I learned that 12 state governments had enacted legislation permitting appropriate use of marijuana, although such use is prohibited by federal law. Physicians even in those states that had legalized medical marijuana were in fear of the loss of their DEA license and possible other sanctions. Medical marijuana patients even in these states were realistically in fear of being arrested and jailed. I am talking about a relatively small number of seriously ill patients (such as patients with advanced AIDS or end-stage cancer), whose symptoms of constant nausea, vomiting and weight loss, or severe pain, fail to respond to conventional treatment. I learned that cannabis research was being obstructed, and in many cases prevented, by governmental agencies (for example, NIDA, DEA and FDA).

With the help of others, I drew up a proposed resolution in 2006, and sent it to the NYACP Executive Director who in turn submitted it to the Health and Public Policy Committee. The resolution was adopted by the NYACP Council with some changes, passed on to the ACP Board of Governors, which approved the resolution at the 2007 annual meeting. This led to its adoption by the ACP Board of Regents.

The result was a lengthy report prepared by the ACP professional staff in Washington. The report, entitled "Supporting Research into the Therapeutic Role of Marijuana," was adopted by the Board of Regents in January 2008 as an ACP Position Paper. The Position Paper not only included my original recommendations, but also, surprisingly, yet realistically, urged "review of marijuana status as a Schedule I controlled substance and reclassification into a more appropriate schedule, given the scientific evidence regarding marijuana's safety and efficacy in some clinical conditions." Imagine how gratified I was! Yet, if I had failed, I would have tried again.

Finally, I wish to emphasize that in no way does the Position Paper minimize the dangers of reckless and illegal use of marijuana for recreational purposes. ACP, as always, is concerned, firstly, with the relief of suffering and holds that the primary responsibility of physicians from the earliest days, indeed long before the time of Hippocrates, is to make the greatest efforts possible to relieve the suffering of their

patients; and, secondly, with the striving for better and better ways to pursue its mission by encouraging scientific research adhering to the highest principles of ethics.

I look forward to a large number of new resolutions containing ACP members' well-thought-out recommendations to be considered by the New York ACP Council this year, and, with the Council's approval, by the ACP National in the future.

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