PharmaCannis strives to enhance the lives of patients through quality products and impeccable service, while maintaining a clean, safe, and peaceful environment. We seek to improve our community’s understanding of medical marijuana and its effects through reliance on science-based research.

_We take pride in the professionalism, compassion, security and privacy we provide to patients and caregivers._
Everyone has a story ...

• From Fat to Fit
• From Fit to Well
• Medical Cannabis Success Story
Agenda

- The History of Cannabis
- The Science of Cannabis
- Administration methods
- IL Medical Cannabis Program
The History of Cannabis
The Prescriptions of the 1930’s
The New Marijuana Act

1937 Marijuana Tax Act

American Medical Association opposes proposed Marihuana Tax Act & supports research
## Scheduled Drugs

### Schedule 1
- Heroin
- LSD
- Ecstasy
- Marijuana

*Highly addictive and no medicinal uses*

### Schedule 2
- Morphine
- Methadone
- OxyCotin
- Cocaine

*Potential for high addiction, but doctors can write Rx*
Statistics

**Tobacco**
- DEA non-scheduled substance
- Addiction rate of 32%*
- Deaths: 480,000/year

**Alcohol**
- DEA non-scheduled substance
- Addiction rate of 15%*
- Deaths: 125,000/yr

*Institute of Medicine of the National Academy of Science*
Statistics

Every day in the United States, 44 people die as a result of prescription opioid overdose

www.cdc.gov/drugoverdose/data/overdose.html

Prescription pain relievers are safe and effective when used correctly .... But they can cause serious side effects if not used correctly.

www.fda.gov/Drugs/ResourcesForYou

No death from overdose of marijuana has been reported.

www.dea.gov/druginfo/factsheets.shtml
The Science of Cannabis
CBD to THC
Our Endocannabinoid System

• Discovered in 1992
• Our body naturally produces
• CB1 & CB2 – main receptors mostly found in brain and immune system
• Cannabis fits like a key into these receptors
Concentrations of CB1 Receptors

play a role in memory, mood, sleep, appetite and pain sensation.
Medical Cannabis
Administrative Methods
<table>
<thead>
<tr>
<th>ORAL</th>
<th>INHALATION</th>
<th>ORAL</th>
<th>TOPICAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Oil</td>
<td>- Pipe</td>
<td>- Edibles</td>
<td>- Ointment</td>
</tr>
<tr>
<td>- Tincture (drops, spray)</td>
<td>- Vapor</td>
<td></td>
<td>- Lotion</td>
</tr>
<tr>
<td>- Pill or liquid (swallowed)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Faster effect compared to edible
- Onset: 15-40 min
- Duration: 2-3hrs

- Rapid onset of effects
- Shorter lasting effects
- Onset: 2-30min
- Duration: 2-3hrs

- Slower onset of effects
- Longer lasting effects
- Onset: 30min-2hrs
- Duration: 5-8hrs

- Absorbed at specific location
- No psychoactive effect
- Onset: 30min-2hrs
- Duration: 5-8hrs

*dbhds.virginia.gov M. Burnett

** hashbook.com
Overview of the Program
# Qualifying Conditions

- Acquired Immunodeficiency Syndrome (AIDS)
- Agitation of Alzheimer's disease
- Amyotrophic Lateral Sclerosis (ALS)
- Arnold-Chiari malformation & Syringomelia
- Cachexia/wasting syndrome
- Cancer
- Causalgia
- Chronic Inflammatory Demyelinating Polyneuropathy
- Crohn's disease
- CRPS (Complex Regional Pain Syndromes Type II)
- Dystonia
- Fibromyalgia (severe)
- Fibrous dysplasia
- Glaucoma
- Hepatitis C
- Human Immunodeficiency Virus (HIV)
- Hydrocephalus
- Interstitial Cystitis
- Lupus
- Multiple Sclerosis
- Muscular Dystrophy
- Myasthenia Gravis
- Myoclonus
- Nail-patella syndrome
- Neurofibromatosis
- Parkinson's disease

- Post-concussion syndrome
- PTSD
- RSD (Complex Regional Pain Syndromes Type I)
- Residual limb pain
- Rheumatoid arthritis (RA)
- Seizures, including those characteristic of epilepsy
- Sjogren's syndrome
- Spinal cord disease
- Spinal cord injury
- Spinocerebellar Ataxia (SCA)
- Terminal Illness
- Tourette’s syndrome
- Traumatic brain injury (TBI)
1. Physician & Patient must have a bona fide relationship.

2. Physician must have at least 12 months of a patient's medical records.

3. Physician must mail certification directly to the Illinois Department of Public Health.
How to Talk to your Doctor

• Be prepared

• Explain IDPH Committed to Program

• Explain it is Not a Rx

• Bring Medical Records

• Describe specifically:
  – Your symptoms
  – Diagnosed conditions
  – What you are currently doing to treat your condition and/or symptoms
  – How often you are medicating
  – In what form are you medicating

• Explain what you hope to gain and you are aware of the possible side effects

• Use professional language

• Discuss any dose adjustments
Patient Information

• Completed application
  – Check made payable to the IDPH
  – Discounted rate for Vets or those with Social Security Disability
  – Card valid for 1, 2 or 3 years

• Background/fingerprint check

• 2 x 2 Color Passport photo

• Two Proofs of residency

• Identity Verification (Drivers License, State ID or Passport)
Patient Information

Caregiver

• Only for one patient
• Must apply for a card through the IDPH
  – Same application process as the patient, minus the doctor certification.
• $25, $50 or $75 fee for card to IDPH
• Caregiver card valid for 1, 2 or 3 years
Summary

• The History of Cannabis
• The Science of Cannabis
• Administration Methods
• Overview of the Program
Thank You!

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