

History of Marijuana as Medicine - 2900 BC to 2018

Source: <https://medicalmarijuana.procon.org/view.timeline.php?timelineID=000026>
reprinting policy

2900 BC-1599 AD	1990-1999
1600-1899	2000-2004
1900-1949	2005-2009
1950-1969	2010-2015
1970-1989	2016-present

2900 BC-1599 AD

2900 BC - Chinese Emperor Fu Hsi References Marijuana as a Popular Medicine



Emperor Fu Hsi
Source: jaars.org

"The Chinese Emperor Fu Hsi (ca. 2900 BC), whom the Chinese credit with bringing civilization to China, seems to have made reference to **Ma**, the Chinese word for **Cannabis**, noting that Cannabis was very popular medicine that possessed both **yin and yang**."

[Robert Deitch](#) *Hemp: American History Revisited: The Plant with a Divided History*, 2003

2700 BC - Chinese Emperor Shen Nung Said to Discover Healing Properties of Marijuana

"According to Chinese legend, the emperor **Shen Nung** (circa 2700 BC; also known as Chen Nung) [considered the Father of Chinese medicine] discovered marijuana's healing properties as well as those of two other mainstays of Chinese herbal medicine, ginseng and ephedra."

[Janet Joy, PhD Alison Mack](#) *Marijuana as Medicine: Beyond the Controversy*, 2001

1500 BC - Earliest Written Reference to Medical Marijuana in Chinese Pharmacopeia

"The use of cannabis for purposes of healing predates recorded history. The earliest written reference is found in the 15th century BC Chinese Pharmacopeia, the Rh-Ya."

[National Institute on Drug Abuse \(NIDA\)](#) *Marijuana Research Findings: 1976, 1977*

1450 BC - Book of Exodus References Holy Anointing Oil Made from Cannabis

"Holy anointing oil, as described in the original Hebrew version of the recipe in **Exodus (30:22-23)**, contained over six pounds of kaneh-bosem, a substance identified by respected etymologists, linguists, anthropologists, botanists and other researchers as cannabis, extracted into about six quarts of olive oil, along with a variety of other fragrant herbs. The ancient anointed ones were literally drenched in this potent mixture."

[Chris Bennett](#) "Was Jesus a Stoner?," *High Times Magazine*, Feb. 10, 2003

"Marijuana proponents suggest that the recipe for the anointing oil passed from God to **Moses** included **cannabis, or kaneh-bosm in Hebrew**. They point to versions calling for fragrant cane, which they say was mistakenly changed to the plant calamus in the King James version of the Bible."

[Shannon Kari](#) "Cannabis Involved in Christ's Anointment?," *National Post*, Apr. 22, 2010

[Editor's Note: The *Revell Bible Dictionary* (1990), by Lawrence O. Richards, estimates that the events of the Book of Exodus occurred around 1450 BC.]

1213 BC - Egyptians Use Cannabis for Glaucoma, Inflammation, and Enemas

Cannabis pollen is found on the mummy of **Ramesses II**, who died in 1213 BC. Prescriptions for cannabis in Ancient Egypt include treatment for the eyes (glaucoma), inflammation, and cooling the uterus, as well as administering enemas.

[Lise Manniche, PhD](#) *An Ancient Egyptian Herbal*, 1989

1000 BC - Bhang, a Drink of Cannabis and Milk, Is Used in India as an Anesthetic

Bhang, a cannabis drink generally mixed with milk, is used as an anesthetic and anti-phlegmatic in India. Cannabis begins to be used in India to treat a wide variety of human maladies.

[US National Commission on Marihuana and Drug Abuse](#) "Marihuana, A Signal of Misunderstanding," [druglibrary.org](#), 1972

700 BC - Medical Use of Marijuana in the Middle East Recorded in the Venidad



Persian Prophet and Philosopher Zoroaster
Source: foreignpolicyjournal.com (accessed July 21, 2011)

"The *Venidad*, one of the volumes of the Zend-Avesta, the ancient Persian religious text written around the seventh century BC purportedly by Zoroaster (or Zarathustra), the founder of Zoroastrianism, and heavily influenced by the Vedas, mentions *bhang* and lists cannabis as the most important of 10,000 medicinal plants."

Martin Booth *Cannabis: A History*, 2005

600 BC - Indian Medicine Treatise Cites Cannabis as a Cure for Leprosy

"Cannabis was used in India in very early medical applications. People believed it could quicken the mind, prolong life, improve judgment, lower fevers, induce sleep and cure dysentery... The first major work to lay out the uses of cannabis in [Indian] medicine was the Ayurvedic [a system of Indian medicine] treatise of Sushruta Samhita written in 600 BC... Within the Sushruta, cannabis is cited as an anti-phlegmatic and a cure for leprosy."

Jonathon Green *Cannabis*, 2002

200 BC - Medical Cannabis Used in Ancient Greece

In ancient Greece, cannabis is used as a remedy for earache, edema, and inflammation.

US National Commission on Marihuana and Drug Abuse "Marihuana, A Signal of Misunderstanding," druglibrary.org, 1972

1 AD - Ancient Chinese Text Recommends Marijuana for More Than 100 Ailments



Chinese ideogram for marijuana ("ma")

Source: *Marijuana as Medicine: Beyond the Controversy*, 2000

"In a compendium of drug recipes compiled in 1 AD [*Pen Ts'ao Ching*], based on traditions from the time of Shen Nung, marijuana is depicted as an ideogram [pictorial symbol] of plants drying in a shed. This ancient text... recommends marijuana for more than 100 ailments, including gout, rheumatism, malaria, and absentmindedness."

Janet Joy, PhD Alison Mack *Marijuana as Medicine: Beyond the Controversy*, 2001

30 - Jesus Allegedly Used Anointing Oil Made with Cannabis

"In the Bible's New Testament, Jesus... anointed [his disciples] with [a] potent

entheogenic [psychoactive substance] oil, sending out the 12 apostles to do the same [around the year 30 AD]...

Likewise, after Jesus' passing, James suggests that anyone of the Christian community who was sick should call to the elders to anoint him with oil in the name of Jesus..."

Chris Bennett "Was Jesus a Stoner?," *High Times Magazine*, Feb. 10, 2003

"So, did Jesus use cannabis? The word **Christ** does mean '**the anointed one**' and Bennett contends that Christ was anointed with **chrism, a cannabis-based oil, that may have caused his spiritual visions**. The ancient recipe for this oil, recorded in Exodus, included over 9lb of flowering cannabis tops (known as *kaneh-bosem* in Hebrew), extracted into a hin (about 11? pints) of olive oil, with a variety of other herbs and spices. The mixture was used in anointing and fumigations that, significantly, allowed the priests and prophets to see and speak with **Yahweh**.

Residues of cannabis, moreover, have been detected in **vessels from Judea and Egypt** in a context indicating its medicinal, as well as visionary, use. Jesus is described by the apostle Mark as casting out demons and healing by the use of this holy chrism. Earlier, from the time of Moses until the later prophet Samuel, holy anointing oil was used by the shamanic Levite priesthood to receive the 'revelations of the Lord'. The chosen ones were drenched in this potent cannabis oil."

Carl Ruck, PhD "Did Jesus Use Cannabis?" *The Sunday Times*, Jan. 12, 2003

70 - Roman Medical Text Cites Cannabis to Treat Earaches and Suppress Sexual Longing



Illustration of a cannabis plant from *De Materia Medica*

Source: *Der Wiener Dioskurides: Codex Medicus Graecus 1 der Österreichischen Nationalbibliothek*, 1998

"Pedanius Dioscorides (circa AD 40-90), a Greek physician who was a Roman army doctor and traveled widely on campaigns throughout the Roman empire, studied many plants, gathering his knowledge into a book he titled *De Materia Medica* (*On Medical Matters*). Published about AD 70 it became the most important medical tome of the next 1500 years. Irrefutably included in it was cannabis, both *kannabis emerosand kannabis agria*, the male and female respectively. Dioscorides stated bluntly that the plant which was used in the making of rope also produced a juice that was used to treat earache and suppress sexual longing."

Martin Booth *Cannabis: A History*, 2005

79 - Pliny the Elder Writes about Medicinal Properties of Cannabis Plant

"Pliny the Elder, an ancient Roman nobleman, scientist, and historian, author of *Naturalis Historia* (79 AD), [writes] that 'The roots [of the cannabis plant] boiled in water ease cramped joints, gout too and similar violent pain.'"

Lumír Ondrej Hanuš, Doctor of Sciences, CSc, RNDr "Discovery and Isolation of Anandamide and Other Endocannabinoids," *Chemistry and Biodiversity*, Aug. 2007

200 - Chinese Surgeon Hua T'o Uses Cannabis Resin and Wine as Anesthetic

Chinese surgeon Hua T'o performed surgeries such as "organ grafts, resectioning of intestines, laparotomies (incisions into the loin), and thoracotomies (incisions into the chest)... rendered painless by means of *ma-yo*, an anaesthetic made from cannabis resin and wine."

Ernest L. Abel, PhD *Marihuana, the First Twelve Thousand Years*, 1980

800-900 - Cannabis Used as Medicine in Arabic World by Some, Labeled "Lethal Poison" by Others

"Cannabis was used medicinally across the Arabic world in Roman times, applied to a wide variety of ailments (from migraines to syphilis) and as an analgesic and anaesthetic. The great ninth-century Islamic physician Rhazès... prescribed it widely; a contemporary, the Arab physician Ibn Wahshiyah, warned of the potential effects of hashish which he wrote was a lethal poison."

Martin Booth *Cannabis: A History*, 2005

1500 - Muslim Doctors Use Marijuana to Reduce Sexuality

"After the 1500s, once Islam spread to India, Moslem doctors used the Persian theories to guide their use of cannabis. Their applications tended to stress the late effects, rather than the early ones, so they used it, for instance, as a means of reducing sexuality rather than increasing it."

Mia Touw "The Religious and Medicinal Uses of Cannabis in China, India, and Tibet," *Journal of Psychoactive Drugs*, Jan.-Mar. 1981

1538 - Hemp Used During Middle Ages

"During the Middle Ages, hemp was central to any herbalist's medicine cabinet. William Turner, the naturalist considered the first English botanist, praises it in his *New Herball*, published in 1538."

Martin Booth *Cannabis: A History*, 2005

1578 - Chinese Medical Text Describes Medical Uses for Marijuana

"A Chinese medical text (1578 AD) [*Bencao Gangmu Materia Medica*, by Li Shizhen] describes the use of marijuana to treat vomiting, parasitic infections, and hemorrhage. Marijuana continues to be used in China as a folk remedy for diarrhea and dysentery and to stimulate to appetite."

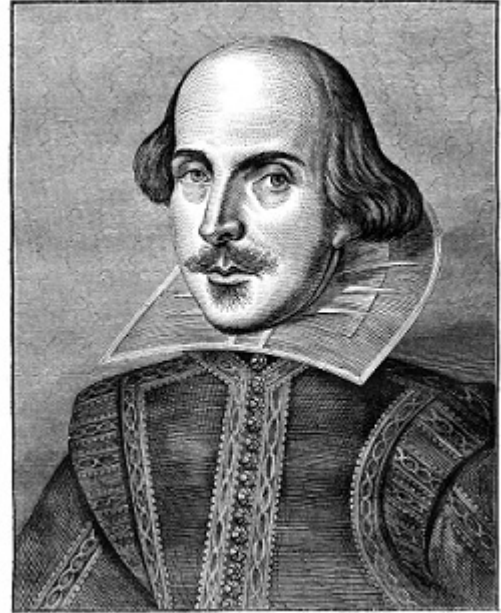
Janet Joy, PhD Alison Mack *Marijuana as Medicine: Beyond the Controversy*, 2001

1600s - William Shakespeare May Have Smoked Cannabis

"Thackeray et al. reported in the *South African Journal of Science* the results of chemical analyses of plant residues in 'tobacco pipes' from Stratford-upon-Avon and environs, dating to the early 17th century... The pipe bowls and stems had been obtained by Thackeray on loan from the Shakespeare Birthplace Trust in Stratford-upon-Avon. Several of the pipes had been excavated from the garden of William Shakespeare.

Results of this study (including 24 pipe fragments) indicated Cannabis in eight samples, nicotine (from tobacco leaves of the kind associated with Raleigh) in at least one sample, and (in two samples) definite evidence for Peruvian cocaine...

Thackeray (unpublished manuscript) suggests that Shakespeare preferred Cannabis as a stimulant which had mind-stimulating properties."



[Shakespeare, Plants, and Chemical Analysis of Early 17th Century Clay 'Tobacco' Pipes from Europe \(71KB\)](#)  *South African Journal of Science*, July 2015

1611-1762 - Jamestown Settlers Bring Marijuana to North America



Illustration of the Jamestown colony
Source: ushistormimages.com

"The Jamestown settlers brought the marijuana plant, commonly known as hemp, to North America in 1611, and throughout the colonial period, hemp fiber was an important export. Indeed, in 1762, 'Virginia awarded bounties for hemp culture and manufacture, and imposed penalties on those who did not produce it.'"

[Bernard Segal, PhD](#) *Perspectives on Drug Use in the United States*, 1986

1621 - Popular English Mental Health Book Recommends Cannabis to Treat Depression

English Clergyman and Oxford scholar Robert Burton suggests cannabis as a treatment for depression in his influential and still popular 1621 book *The Anatomy of Melancholy*.

[Lester Grinspoon, MD](#) "History of Cannabis as a Medicine," Statement for hearing by DEA Law Judge, Aug.16, 2005

1652 - Herbalist Nicholas Culpeper Writes about Medical Uses for Hemp

"The great British herbalist Nicholas Culpeper (1616–1654) wrote in his [1652] *The English Physitian* (sic) that hemp extract 'allayeth Inflammations in the Head ... eases the pains of the Gout ... Knots in the Joynts, [and] the pains of the Sinews and Hips'. Culpeper's preparation probably had little psychoactivity as native cannabis grown in northern latitudes has relatively low tetrahydrocannabinol (THC) content."

John P. Zajicek, PhD "Therapeutic Potential of Cannabis in Pain Medicine," *British Journal of Anaesthesia*, May 29, 2008

1745-1775 - George Washington Grows Hemp

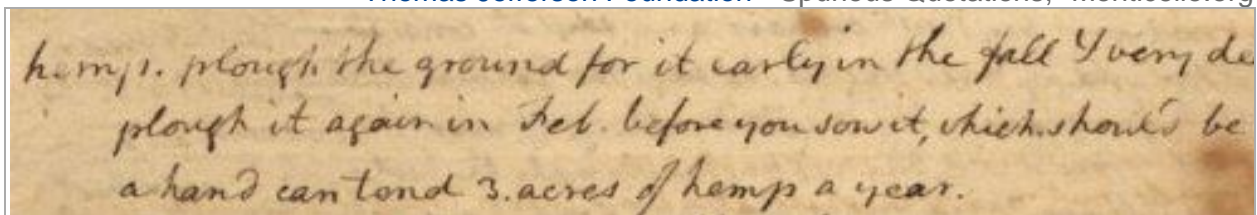
"[George] Washington's diary entries indicate that he grew hemp at Mount Vernon, his plantation, for about 30 years [approximately 1745-1775]. According to his agricultural ledgers, he had a particular interest in the medicinal use of Cannabis, and several of his diary entries indicate that he indeed was growing Cannabis with a high Tetrahydrocannabinol (THC) content - marijuana."

Robert Deitch *Hemp American History Revisited: The Plant with a Divided History*, 2003
Page from George Washington's diary dated Aug. 1765. Click picture for full page. Source: *Library of Congress* (accessed Aug. 31, 2011)

1774-1824 - Thomas Jefferson Grows Hemp at Monticello

"Thomas Jefferson did grow hemp [as noted in his farming diaries from 1774-1824], but there is no evidence to suggest that Jefferson was a habitual smoker of hemp, tobacco, or any other substance. Some have pointed to a supposed reference in Jefferson's Farm Book to separating male and female hemp plants as evidence that he was cultivating it for purposes of recreational smoking; no such reference exists in Jefferson's Farm Book or any other document, although George Washington did record such a thing in his own diary..."

Thomas Jefferson Foundation "Spurious Quotations," Monticello.org



Thomas Jefferson's Farm Book, 1774-1824, page 95. Click for full page.
Source: *Thomas Jefferson Papers: An Electronic Archive*, Massachusetts Historical Society, 2003

1799 - Napoleon's Forces Bring Marijuana from Egypt to France

Napoleon invades Egypt with forces that include a scientific expedition team. In addition to discovering the Rosetta Stone, the team brings cannabis back to France in 1799. The

cannabis was investigated for its pain relieving and sedative effects in Europe and became more widely accepted in Western medicine.

[US National Commission on Marihuana and Drug Abuse](#) "Marihuana, A Signal of Misunderstanding," [druglibrary.org](#), 1972

1840 - Medical Marijuana Comes to United Kingdom via William O'Shaughnessy and Reportedly Used by Queen Victoria for Menstrual Cramps



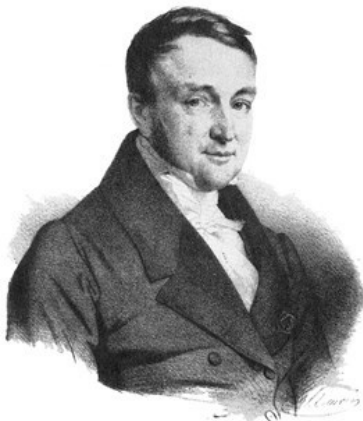
Queen Victoria

Source: [Project Gutenberg, gutenber.org](#)
(accessed Aug. 18, 2011)

"Cannabis was reintroduced into British medicine in 1842 by Dr. W[illiam] O'Shaughnessy, an army surgeon who had served in India. In Victorian times it was widely used for a variety of ailments, including muscle spasms, menstrual cramps, rheumatism, and the convulsions of tetanus, rabies and epilepsy; it was also used to promote uterine contractions in childbirth, and as a sedative to induce sleep. It is said to have been used by Queen Victoria against period pains: there is no actual proof of this at all, but Sir Robert Russell, for many years her personal physician, wrote extensively on cannabis, recommending it for use in dysmenorrhoea [menstrual cramps]. It was administered by mouth, not by smoking, but usually in the form of a tincture (an extract in alcohol). Cannabis extracts were also incorporated in many different proprietary medicines."

[House of Lords Select Committee on Science and Technology](#) "Ninth Report: Cannabis," UK Parliament website, Nov. 11, 1998

1840s - Marijuana Becomes Mainstream Medicine in the West



Jacques-Joseph Moreau

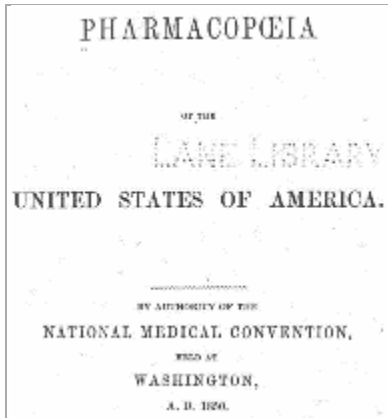
Source: [American Journal of Psychiatry](#)

(accessed Aug. 17, 2011)

"In the 19th Century, marijuana emerged as a mainstream medicine in the West. Studies in the 1840s by a French doctor by the name of Jacques-Joseph Moreau [a French psychiatrist] found that marijuana suppressed headaches, increased appetites, and aided people to sleep."

[Richard Glen Boire, JD](#) and [Kevin Feeney, JD](#) *Medical Marijuana Law*, 2007

1850 - Marijuana Added to US Pharmacopeia



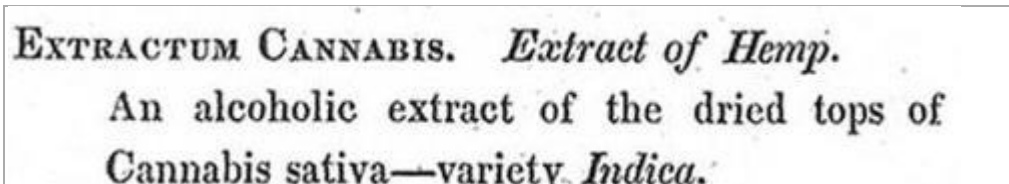
Cover of the 1851 United States Pharmacopeia

Source:

antiquecannabisbook.com

"By 1850, marijuana had made its way into the United States Pharmacopeia [an official public standards-setting authority for all prescription and over-the-counter medicines], which listed marijuana as treatment for numerous afflictions, including: neuralgia, tetanus, typhus, cholera, rabies, dysentery, alcoholism, opiate addiction, anthrax, leprosy, incontinence, gout, convulsive disorders, tonsillitis, insanity, excessive menstrual bleeding, and uterine bleeding, among others. Patented marijuana tinctures were sold..."

Richard Glen Boire, JD and Kevin Feeney, JD *Medical Marijuana Law*, 2007



Page 50 of the 1851 United States Pharmacopeia

Source: antiquecannabisbook.com

1889 - Article in *The Lancet* Outlines Use of Cannabis for Opium Withdrawal

"In 1889, an article by Dr. E. A. Birch in *The Lancet*, then as now one of the world's leading medical journals, outlined the application of cannabis for the treatment of opium and chloral hydrate withdrawal symptoms: the mixture reduced the opium craving and acted as an anti-emetic [drug that is effective against vomiting and nausea]."

Martin Booth *Cannabis: A History*, 2005

1893-1894 - Indian Hemp Commission Mentions Several Medical Uses of Cannabis

"Concern about cannabis as an intoxicant leads the government of India to establish the Indian Hemp Commission of 1893-1894 to examine the question of cannabis use in India."

The report mentions the use of cannabis as an "analgesic, a restorer of energy, a hemostat, an ecboic [to induce contractions], and an antidiaretic." Cannabis is also "mentioned as an aid in treating hay fever, cholera, dysentery, gonorrhoea, diabetes, impotence, urinary incontinence, swelling of the testicles, granulation of open sores, and chronic ulcers. Other beneficial effects attributed to cannabis are prevention of insomnia, relief of anxiety, protection against cholera, alleviation of hunger and as an aid to concentration of attention." [US National Commission on Marihuana and Drug Abuse](http://druglibrary.org) "Marihuana, A Signal of Misunderstanding," druglibrary.org, 1972

1900 - Cannabis Used for Asthma, Bronchitis, and Loss of Appetite in South Asia

"Cannabis was one of the more important drugs in the Indian *Materia Medica* at the turn of the century. It was, and still is, widely used in rural areas of the Indian subcontinent [South Asia] for asthma, bronchitis and loss of appetite."

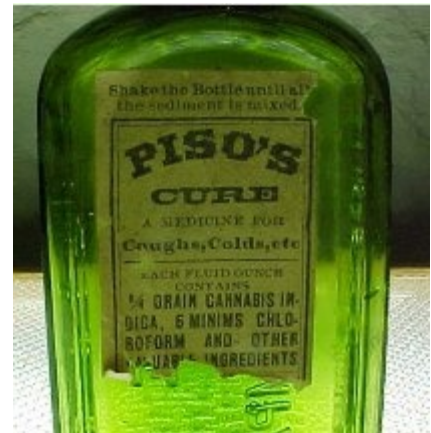
[National Institute on Drug Abuse \(NIDA\) Marijuana Research Findings: 1976](#),
NIDA website, 1977

1906 - Pure Food and Drugs Act Requires Labeling of Medicine, Including Cannabis

Label for Piso's Cure, a cannabis-based medicine, after the passage of the 1906 Pure Food and Drug Act
Source: [antiquecannabisbook.com](#)


"[O]n 30 June 1906 President Roosevelt signed the Food and Drugs Act, known simply as the Wiley Act... The basis of the law rested on the regulation of product labeling rather than pre-market approval."

[US Food and Drug Administration \(FDA\) "FDA History - Part I," FDA website](#)




"An Act for preventing the manufacture, sale, or transportation of adulterated or misbranded or poisonous or deleterious foods, drugs, medicines, and liquors, and for regulating traffic therein, and for other purposes..."

That for the purposes of this Act an article shall also be deemed to be misbranded... if the package fail to bear a statement on the label of the quantity or proportion of any alcohol, morphine, opium, cocaine, heroin, alpha or beta eucaine, chloroform, cannabis indica, chloral hydrate, or acetanilide, or any derivative or preparation of any such substances contained therein."

[Pure Food and Drug Act \(1906\)](#)  (35 KB), National Center for Biotechnology Information website, June 30, 1906

1911 - Massachusetts Becomes First State to Outlaw Cannabis

"Bolstered by Progressive Era faith in big government, the 1910s marked a high tide of prohibitionist sentiment in America. In 1914 and 1916, alcohol prohibition initiatives would make the state ballot. Meanwhile, the legislature was tackling such morals issues as prostitution, racetrack gambling, prizefighting, liquor, and oral sex. Amidst this profusion of vices, Indian hemp [aka cannabis] was but a minor afterthought... states banned cannabis in the 1910s: [Massachusetts in 1911](#)  (150 KB); Maine, Wyoming and Indiana in 1913; New York City in 1914; Utah and Vermont in 1915; Colorado and

Nevada in 1917. As in California, these laws were passed not due to any widespread use or concern about cannabis, but as regulatory initiatives to discourage future use."

Dale Gieringer, PhD "The Forgotten Origins of Cannabis Prohibition in California," *Contemporary Drug Problems*, Summer 1999

Jan. 1915 - President Wilson Signs Harrison Act, the Model for Future Drug Regulation Legislation

President Woodrow Wilson
Source: nobelprize.org



"Representative Francis B. Harrison (D-NY) introduced three bills in 1913 to remedy the [drug] problem by controlling the domestic manufacture of opium and by regulating the international opium trade. According to his bills, opium could be imported or exported only for medicinal purposes. Harrison also proposed that the government '...impose a special tax upon all persons who... sell, distribute or give away opium or coca leaves...'

President Woodrow Wilson signed all three of Harrison's measures into law by Jan. 1915.

The Harrison Act, as the final proposal was known, required every physician who prescribed opium or any of its derivatives to put a serial number, which could only be obtained from the Internal Revenue Department, on each prescription... Every doctor who wished to prescribe narcotics was required to register annually with the federal government."

Although it does not apply to marijuana, the Harrison Act becomes the model for drug regulation on the federal level and is considered the basis for the Marihuana Tax Act of 1937.

Dennis Joseph Pfennig, PhD "Early Twentieth Century Responses to the Drug Problem," *OAH Magazine of History*, Fall 1991

1915-1927 - 10 States Pass Marijuana Prohibition Laws

"[In 1915] Utah passes state anti-marijuana law..."

Other states quickly followed suit with marijuana prohibition laws, including Wyoming (1915), Texas (1919), Iowa (1923), Nevada (1923), Oregon (1923), Washington (1923), Arkansas (1923), and Nebraska (1927)." The state of New York outlaws cannabis in 1927.

[Drug WarRant.com](http://DrugWarRant.com) "Why Is Marijuana Illegal?," [Drug War Rant.com](http://DrugWarRant.com)

1918 - US Pharmaceutical Farms Grow 60,000 Pounds of Cannabis Annually

"Up to World War I, pharmaceutical supplies of cannabis indica were entirely imported from India (and occasionally Madagascar), in accordance with the U.S. Pharmacopoeia, which specified that it come from flowering tops of the Indian variety..."

Finally, in 1913, the U.S. Department of Agriculture Bureau of Plant Industry announced it had succeeded in growing domestic cannabis of equal quality to the Indian. When foreign supplies were interrupted by World War I, the United States became self-sufficient in cannabis. By 1918, some 60,000 pounds were being produced annually, all from pharmaceutical farms east of the Mississippi."

[Dale Gieringer, PhD](#) "The Forgotten Origins of Cannabis Prohibition in California," *Contemporary Drug Problems*, Summer 1999

Feb. 19, 1925 - League of Nations Sign Multilateral Treaty Restricting Cannabis Use to Scientific and Medical Only

At the Second Opium Conference and the International Opium Convention, sponsored by the League of Nations and signed in Geneva on Feb. 19, 1925, Egypt proposes that hashish (cannabis resin) be added to the list of narcotics covered by the convention.

The convention authorizes the use of "Indian hemp" (cannabis) only for scientific and medical purposes. Restrictions on importing and exporting cannabis resin are put into place.

This convention is the first multilateral treaty that deals with cannabis.

[United Nations Office on Drugs and Crime \(UNODC\)](#) "The Cannabis Problem: A Note on the Problem and the History of International Action," UNODC website, Jan. 1, 1962

1928 - Cannabis Added to the UK's "Dangerous Drugs Act"

Cannabis is added to the list of prohibited drugs in the UK's "Dangerous Drugs Act in 1928." Cocaine was added in 1920.

[The Observer](#) "100 Years of Altered States," observer.guardian.co.uk, Apr. 21, 2002

1930s - Use of the Word "Marijuana" Increases in the US

"The currency of the word [marijuana] increased greatly in the United States in the 1930s in the context of the debate over the use of the drug, the term being preferred as a more exotic alternative to the familiar words hemp and cannabis..."

Influence of a folk etymology from the Spanish personal name *María-Juana* or its familiar form *Mari-Juana* has frequently been suggested; if so this would appear to have occurred within English."

[Oxford English Dictionary \(OED\)](#) "Marijuana"

1930s - American Pharmaceutical Firms Sell Extracts of Marijuana as Medicines

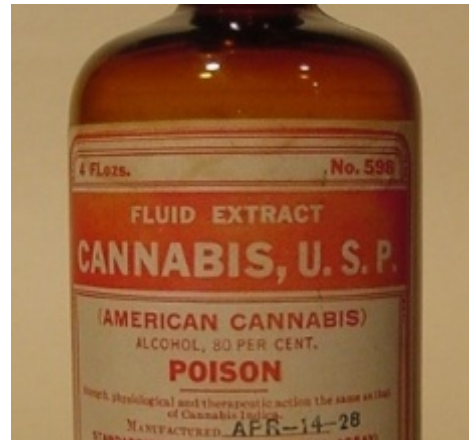
"As demand for marijuana-based medications accelerated, pharmaceutical firms attempted to produce consistently potent and reliable drugs from hemp. By the 1930s at least two American companies – Parke-Davis and Eli Lilly – were selling standardized extracts of marijuana for use as an analgesic, an antispasmodic and sedative. Another manufacturer, Grimault & Company, marketed marijuana cigarettes as a remedy for asthma."

[Janet Joy, PhD](#) [Alison Mack](#) *Marijuana as Medicine: Beyond the Controversy*, 2001

Parke-Davis cannabis tincture bottle
Source: antiquecannabisbook.com

1930 - Harry J. Anslinger Appointed Commissioner of the Federal Bureau of Narcotics

"In 1930, Congress consolidated the drug control effort in the Federal Bureau of Narcotics, led by the endlessly resourceful commissioner, Harry Jacob Anslinger, who became the architect of national prohibition. His case rested on two fantastical assertions: that the drug caused insanity; that it pushed people toward horrendous acts of criminality."



[New York Times](#) "The Federal Marijuana Ban Is Rooted in Myth and Xenophobia," *New York Times*, July 29, 2014

1933 - William Randolph Hearst Plays Role in Denouncing Marijuana

"[I]n 1933, marijuana became the target of government control. Sensationalistic stories linked violent acts to cannabis consumption... Many of the most outlandish stories appeared in newspapers published by William Randolph Hearst. Hearst reportedly had financial interests in the lumber and paper industries. He may have sought to eliminate competition from hemp."

[Mitchell Earleywine, PhD](#) *Understanding Marijuana: A New Look at the Scientific Evidence*, 2005

"The first laws against cannabis in the United States were passed in border towns with Mexico... William Randolph Hearst was an up-and-coming newspaper tycoon, owning twenty-eight newspapers by the mid-1920s... Hearst then dropped the words cannabis and hemp from his newspapers and began a propaganda campaign against 'marijuana,' (following in Anslinger's footsteps)..."

[Julie Holland, MD](#) *The Pot Book: A Complete Guide to Cannabis: Its Role in Medicine, Politics, Science, and Culture*, 2010

1936 - Bureau of Narcotics Urges Federal Action to Control Marijuana

"It is difficult to know precisely the extent of marijuana use in the 1930s. The Narcotics Bureau itself never provided any official estimate. The Bureau spoke only of 'widespread use...'

[Commissioner Harry] Anslinger maintained that all drug use was a plot of 'civic corruption,' a public enemy seeking to destroy the community...

During 1936 the Bureau headlined the marijuana danger in its report ["Traffic in Opium and Other Dangerous Drugs," 1936]. For the first time it urged federal controls and presented a description of the vice, describing dire mental and moral changes among users."

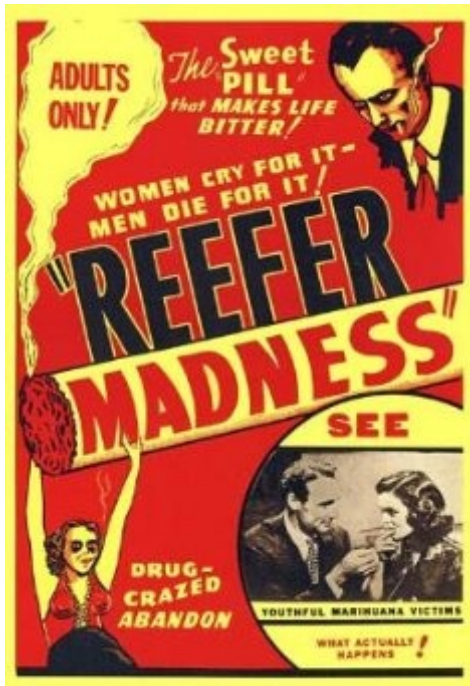
[Michael Schaller, PhD](#) "The Federal Prohibition of Marijuana," *Journal of Social History*, Autumn 1970

1936 - New Medications Supplant Marijuana as Treatment for Pain

"By the end of 1936... all 48 states had enacted laws to regulate marijuana. Its decline in medicine was hastened by the development of aspirin, morphine, and then other opium-derived drugs, all of which helped to replace marijuana in the treatment of pain and other medical conditions in Western medicine."

Mark Eddy CRS Report for Congress: "Medical Marijuana: Review and Analysis of Federal and State Policies"  (515 KB) Apr. 2, 2010

1936 - *Reefer Madness* Film Cautions Against Marijuana



Original movie poster for *Reefer Madness*
Source: Amazon.com (accessed Dec. 15, 2011)

"*Reefer Madness* is a morality tale of how Reefer Addiction ruins the life of its young protagonist and gets a lot of other people killed, sexually compromised and committed to lunatic asylums..."

Reefer Madness began its cinematic life as a 1936 cautionary film entitled *Tell Your Children*. It was financed by a small church group, and was intended to scare the living bejeezus out of every parent who viewed it. Soon after the film was shot, however, it was purchased by the notorious exploitation film maestro Dwain Esper (*Narcotic, Marihuana, Maniac*), who took the liberty of cutting in salacious insert shots and slapping on the sexier title of *Reefer Madness*, before distributing it on the exploitation circuit...

Today, the film is a cult phenomenon dwarfed only by *The Rocky Horror Picture Show*, and 'Reefer Madness' is a bona fide catch phrase."

Kevin Murphy Dan Studney "Reefer Madness History," www.reefer-madness-movie.com
Watch the entire film on YouTube.

May 4, 1937 - American Medical Association Opposes the Proposed Marihuana Tax Act and Supports Research on Medical Cannabis

"Hearings on the proposed taxation of marihuana were held before the Committee on Ways and Means between 27 April and 4 May 1937.

The last witness to be heard was Dr. William C. Woodward, legislative counsel of the American Medical Association (AMA). He announced his opposition to the bill... [and] sought to dispel any impression that either the AMA or enlightened medical opinion sponsored this legislation. Marihuana, he argued, was largely an unknown quantity, but might have important uses in medicine and psychology."

Michael Schaller, PhD "The Federal Prohibition of Marihuana," *Journal of Social History*, Autumn 1970

"There is nothing in the medicinal use of Cannabis that has any relation to Cannabis addiction. I use the word 'Cannabis' in preference to the word 'marihuana', because Cannabis is the correct term for describing the plant and its products. The term 'marihuana' is a mongrel word that has crept into this country over the Mexican border and has no general meaning, except as it relates to the use of Cannabis preparations for smoking...

To say, however, as has been proposed here, that the use of the drug should be prevented by a prohibitive tax, loses sight of the fact that future investigation may show that there are substantial medical uses for Cannabis."

William C. Woodward, MD Statement to the US House of Representatives Committee on Ways and Means  (260 KB), May 4, 1937

Oct. 1937 - "Marihuana Tax Act" Leads to Decline in Marijuana Prescriptions

Commissioner Harry J. Anslinger inspects a drug seizure.

Source: DEA exhibit "Target America: Opening Eyes to the Damage Drugs Cause," posted on drugwarrant.net

"Spurred by spectacular accounts of marijuana's harmful effects on its users, by the drug's alleged connection to violent crime, and by a perception that state and local efforts to bring use of the drug under control were not working, Congress enacted the *Marihuana Tax Act of 1937*. Promoted by Harry



Anslinger, Commissioner of the recently established Federal Bureau of Narcotics, the act imposed registration and reporting requirements and a tax on the growers, sellers, and buyers of marijuana. Although the act did not prohibit marijuana outright, its effect was the same. (Because marijuana was not included in the Harrison Narcotics Act in 1914, the Marihuana Tax Act was the federal government's first attempt to regulate marijuana.)"

Mark Eddy CRS Report for Congress: "Medical Marijuana: Review and Analysis of Federal and State Policies"  (515 KB) Apr. 2, 2010

"By the time the federal government passed the *Marihuana Tax Act* in [Oct.] 1937, every state had already enacted laws criminalizing the possession and sale of marijuana. The federal law, which was structured in a fashion similar to the 1914 Harrison Act, maintained the right to use marijuana for medicinal purposes but required physicians and pharmacists who prescribed or dispensed marijuana to register with federal authorities and pay an annual tax or license fee...

After the passage of the Act, prescriptions of marijuana declined because doctors generally decided it was easier not to prescribe marijuana than to deal with the extra

work imposed by the new law."

Rosalie Liccardo Pacula, PhD "State Medical Marijuana Laws: Understanding the Laws and Their Limitations," *Journal of Public Health Policy*, 2002

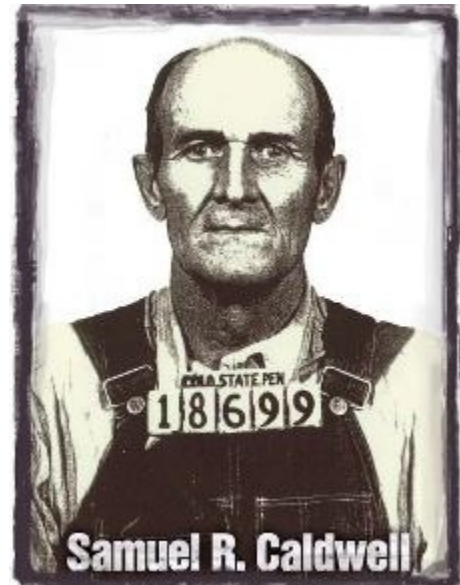
Oct. 2, 1937 - First Marijuana Seller Convicted under US Federal Law Is Arrested

Mug shot of Samuel R. Caldwell.

Source: *NORML.org* (accessed Feb. 21, 2012)

"On the day the Marijuana Tax Stamp Act was enacted -- Oct. 2, 1937 -- the FBI and Denver, Colo., police raided the Lexington Hotel and arrested Samuel R. Caldwell, 58, an unemployed labourer and Moses Baca, 26. On Oct. 5, Caldwell went into the history trivia books as the first marijuana seller convicted under U.S. federal law. His customer, Baca, was found guilty of possession..."

Caldwell was sentenced to four years of hard labour in Leavenworth Penitentiary, plus a \$1,000 fine. Baca received 18 months incarceration. Both men served every day of their sentence. A year after Caldwell was released from prison, he died."



[National Organization for the Reform of Marijuana Laws \(NORML\)](#) "The First Pot POW," *norml.org* (accessed Feb. 21, 2012)

1938 - Canada Prohibits Cannabis Cultivation

"In 1938, Canada prohibited cannabis cultivation. The aim there was... to prevent the leisure use of marijuana. Doctors were still permitted to prescribe tincture of cannabis, but the bureaucracy that came with every prescription discouraged many from offering it to patients."

[Martin Booth](#) *Cannabis: A History*, 2005

1942 - Marijuana Removed from US Pharmacopeia

"Marijuana was removed from the US Pharmacopeia in 1942, thus losing its remaining mantle of therapeutic legitimacy."

[American Medical Association \(AMA\)](#) "Report 10 of the Council on Scientific Affairs," 1997

1938-1944 - LaGuardia Report Concludes Marijuana Less Dangerous Than Commonly Thought



New York Academy of Medicine Headquarters in New York City, *Source: nyc-architecture.com*

In 1938, New York City Mayor Fiorello LaGuardia requests that the New York Academy of Medicine conduct an investigation of marijuana. The 1944 report, titled "The Marihuana Problem in the City of New York," but commonly referred to as the "LaGuardia Report," concludes that many claims about the dangers of marijuana are exaggerated or untrue.

[Roger A. Roffman, DSW](#) [Robert S. Stephens, PhD](#) *Cannabis Dependence: Its Nature, Consequences, and Treatment*, 2006

"The practice of smoking marihuana does not lead to addiction in the medical sense of the word... The use of marihuana does not lead to morphine or heroin or cocaine addiction and no effort is made to create a market for these narcotics by stimulating the practice of marihuana smoking... Marihuana is not the determining factor in the commission of major crimes... The publicity concerning the catastrophic effects of marihuana smoking in New York City is unfounded."

[LaGuardia Committee Report on Marihuana](#) "The Marihuana Problem in the City of New York"  1944

1950-1969



1951 - Boggs Act Establishes Minimum Prison Sentences for Simple Possession

"In 1951, Congress established mandatory minimum prison sentences for drug crimes. Named for its sponsor, Representative Hale Boggs (D-La.), the Boggs Act imposed two-to-five year minimum sentences for first offenses, including simple possession. The Act made no distinction between drug users and drug traffickers for purposes of sentencing. The driving force behind the Boggs Act was a mistaken belief that drug addiction was a contagious and perhaps incurable disease and that addicts should be quarantined and forced to undergo treatment."

[Families Against Mandatory Minimums](#) [Correcting Course: Lessons from the 1970 Repeal of Mandatory Minimums](#)  (3 MB), 2008

1956 - Inclusion of Marijuana in Narcotics Control Act Leads to Stricter Penalties for Marijuana Possession

Congress includes marijuana in the Narcotics Control Act of 1956, which results in stricter mandatory sentences for marijuana-related offenses. A first-offense marijuana possession carries a minimum sentence of 2-10 years with a fine of up to \$20,000.

[Frontline](#) "Busted: America's War on Marijuana," [www.pbs.org](#) (accessed July 21, 2010)

1961 - UN Convention Provides Basis for Future Federal Prohibition of Marijuana

The 1961 UN Single Convention on Narcotic Drugs establishes the following rule in Article 49: "The use of cannabis for other than medical and scientific purposes must be discontinued as soon as possible but in any case within twenty-five years..."

["UN Single Convention on Narcotic Drugs, 1961"](#)  (500 KB), 1961

"In 1961, the United Nations adopted the Single Convention on Narcotic Drugs, the terms of which state that each participating country could 'adopt such measures as may be necessary to prevent misuse of, and illicit traffic in, the leaves of the Cannabis plant.' Congress approved participation in the convention in 1967 and three years later passed the Comprehensive Drug Abuse Prevention and Control Act, which provides the basis for current federal prohibitions regarding marijuana use."

[National Academy of Sciences](#) "An Analysis of Marijuana Policy," 1982

1964 - THC, Main Psychoactive Component of Cannabis, First Identified and Synthesized

In 1964 Dr. Raphael Mechoulam, Professor of Medicinal Chemistry at the Hebrew University of Jerusalem, is the first to identify delta-9-tetrahydrocannabinol (THC), as the main psychoactive component of cannabis. He is also the first to synthesize THC.

[GW Pharmaceuticals](#) "GW to Develop New Cannabinoid Opportunities with Professor Raphael Mechoulam," [GW Pharmaceuticals website](#), Jan. 21, 2003

1968 - University of Mississippi Becomes Official Grower of Marijuana for Federal Government



Marijuana grown at the University of Mississippi for the US government.

Source: National Geographic website (accessed Aug. 31, 2011)

"Since about 1968 the University of Mississippi has held a registration from the DEA or its predecessor agency to cultivate marijuana for government use and research activities... [as] the only DEA-registered cultivator of marijuana. The University of Mississippi... supplies marijuana to researchers for studies ranging

from chemical research to preclinical toxicology in animals to clinical work on humans."

[Mary Ellen Bittner, JD](#) [Ruling in the Matter of Lyle E. Craker, PhD](#)  (6.5 MB), Feb. 12, 2007

Apr. 8, 1968 - President Johnson Creates Bureau of Narcotics and Dangerous Drugs (BNDD)

"The dramatic increase in the use of marihuana and other drugs during the latter 1960's was a matter of high public visibility. In response, President Johnson offered Reorganization Plan No. 1 of 1968. This reorganization was effective on April 8, 1968 and placed the Federal Bureau of Narcotics (of Treasury) and the Bureau of Drug Abuse Control (of FDA) in the Department of Justice and designated it the Bureau of Narcotics and Dangerous Drugs."

[US National Commission on Marihuana and Drug Abuse](#) "Marihuana, A Signal of Misunderstanding," [druglibrary.org](#), 1972

Nov. 1, 1968 - UK Wootton Report Finds Cannabis Is Less Dangerous Than Alcohol, Other Drugs

The Nov. 1, 1968 Wootton Report, written by the UK government's Advisory Committee on Drug Dependence, finds that "the long term consumption of cannabis in moderate doses has no harmful effects... Cannabis is less dangerous than the opiates, amphetamines and barbiturates, and also less dangerous than alcohol..."


The report's influence is seen in future British drug policies that reduce penalties for possession of marijuana by 50%.

[Stephen Abrams, PhD](#) "Soma, the Wootton Report and Cannabis Law Reform in Britain During the 1960s and 1970s," *A Cannabis Reader: Global Issues and Local Experiences*, [www.emcdda.europa.eu](#), 2008

1970-1989



1970 - Controlled Substances Act Classifies Marijuana as a Drug with "No Accepted Medical Use"

Congress passes the [Controlled Substances Act \(CSA\)](#)  (750 KB) as part of the Comprehensive Drug Abuse Prevention and Control Act of 1970. This law establishes a "single system of control for both narcotic and psychotropic drugs for the first time in US history." The CSA creates five [schedules](#) to classify substances. Marijuana is placed in [Schedule I](#), which are drugs "classified as having a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use of the drug or other substance under medical supervision."

[US Drug Enforcement Administration \(DEA\)](#) "A Tradition of Excellence: The History of the DEA from 1973-2003," DEA website

[US Drug Enforcement Administration \(DEA\)](#) [span> "Marijuana," DEA website](#)

"The Congress asked the Department of Health, Education and Welfare for their recommendation where marijuana should be placed in the Controlled Substances Act.

The response, by letter of 8/14/70, of the Assistant Secretary for Health and Scientific Affairs [Roger O. Egeberg] is as follows:

'...Some question has been raised whether the use of the plant itself produces "severe psychological or physical dependence" as required by a schedule I or even schedule II criterion. Since there is still a considerable void in our knowledge of the plant and effects of the active drug contained in it, our recommendation is that marihuana be retained within schedule I at least until the completion of certain studies now underway to resolve the issue. If those studies* make it appropriate for the Attorney General to change the placement of marihuana to a different schedule, he may do so in accordance with the authority provided under section 201 of the bill..'"

[Jon Gettman, PHD](#) "Marijuana's Dependence Liability - 1970," DrugScience.org

1970 - NORML (National Organization for the Reform of Marijuana Laws) Founded

NORML, the National Organization for the Reform of Marijuana Laws, is founded in 1970 as a nonprofit public-interest advocacy group whose mission is to end marijuana prohibition.

[National Organization for the Reform of Marijuana Laws \(NORML\)](#) "About NORML," [norml.org](#)

1971 - UK Introduces Drug Classification System

The 1971 UK Misuse of Drugs Act introduces a drug classification system and sentencing guidelines. Cannabis is put in Class B, the middle of three classes.

[British Broadcasting Corporation \(BBC\)](#) "Debate over Cannabis Classification," BBC website, Oct. 31, 2009

May 1, 1971 - Nixon Says He Will Not Legalize Marijuana Despite Shafer Commission



President Nixon had a meeting with Elvis Presley, who sought to be appointed as a Federal Agent-at-Large in the US Bureau of Narcotics and Dangerous Drugs, in 1970. *Source: National Archives and Records Administration (accessed Aug. 31, 2011)*

In a televised news conference on May 1, 1971, responding to question about the White House Conference on Youth, which had voted to legalize marijuana, President Nixon said:

"As you know, there is a Commission that is supposed to make recommendations to me about this subject; in this instance, however, I have such strong views that I will express them. I am against legalizing marijuana. Even if the Commission does recommend that it be legalized, I will not follow that recommendation... I can see no social or moral justification whatever for legalizing marijuana. I think it would be exactly the wrong step. It

would simply encourage more and more of our young people to start down the long, dismal road that leads to hard drugs and eventually self-destruction."

[Richard Nixon, LLB](#) "The President's News Conference," The American Presidency Project website, May 1, 1971

June 17, 1971 - President Nixon Declares War on Drugs

At a June 17, 1971 press conference, President Nixon said:

"America's public enemy number one in the United States is drug abuse. In order to fight and defeat this enemy, it is necessary to wage a new, all-out offensive.

I have asked the Congress to provide the legislative authority and the funds to fuel this kind of an offensive. This will be a worldwide offensive dealing with the problems of sources of supply, as well as Americans who may be stationed abroad, wherever they are in the world...

I have brought Dr. [Jerome H.] Jaffe into the White House, directly reporting to me [as Special Consultant to the President for Narcotics and Dangerous Drugs], so that we have not only the responsibility but the authority to see that we wage this offensive effectively and in a coordinated way."

[Richard Nixon, LLB](#) "Remarks About an Intensified Program for Drug Abuse Prevention and ControlThe President's News Conference," The American Presidency Project website, June 17, 1971

1972 - National Commission on Marijuana and Drug Abuse ("Shafer Commission") Recommends Decriminalizing Marijuana

"The bipartisan Shafer Commission [National Commission on Marijuana and Drug Abuse], appointed by President Nixon at the direction of Congress [and chaired by former Pennsylvania Governor Raymond Shafer], considered laws regarding marijuana and determined that personal use of marijuana should be decriminalized. Nixon rejected the recommendation, but over the course of the 1970s, eleven states decriminalized marijuana and most others reduced their penalties."

[Frontline](#) "Busted: America's War on Marijuana," www.pbs.org

"Possession of marihuana for personal use would no longer be an offense, but marihuana possessed in public would remain contraband subject to summary seizure and forfeiture. Casual distribution of small amounts of marihuana for no remuneration, or insignificant remuneration not involving profit would no longer be an offense."

[US National Commission on Marihuana and Drug Abuse](#) "Marihuana, A Signal of Misunderstanding," druglibrary.org, 1972

1972 - NORML Petitions DEA to Reschedule Marijuana

In 1972, NORML files an administrative petition with the DEA. "NORML's petition called

on the federal government to reclassify marijuana under the Controlled Substances Act as a [Schedule II](#) drug so that physicians could legally prescribe it. Federal authorities initially refused to accept the petition until mandated to do so by the US Court of Appeals in 1974, and then refused to properly process it until again ordered by the Court in 1982...

Fourteen years after NORML's initial petition, in 1986, the DEA finally held public hearings on the issue before an administrative law judge. Two years later [on [Sep. 6, 1998](#)], Judge Francis Young ruled [in the matter of *Marijuana Rescheduling Petition*, Docket No. 86-22] that the therapeutic use of marijuana was recognized by a respected minority of the medical community, and that it met the standards of other legal medications." The final ruling in the case was made [Feb. 18, 1994](#).

[National Organization for the Reform of Marijuana Laws \(NORML\)](#) "Medical Use: Introduction," [norml.org](#) (accessed May 23, 2011)

1973 - Drug Enforcement Agency (DEA) Established

The Bureau of Narcotics and Dangerous Drugs (BNND) and the Office of Drug Abuse Law Enforcement (ODALE) are merged to form the US Drug Enforcement Agency (DEA).

[Frontline](#) "Busted: America's War on Marijuana," [www.pbs.org](#)

1974 - NIDA Established, Placed in Charge of Contracts to Grow Marijuana for Research Purposes

"Since its inception in 1974, [NIDA](#) [National Institute on Drug Abuse] has been the sole administrator of a contract to grow cannabis (marijuana) for research purposes and the only legal source for cannabis in the United States... Because of international treaty agreements (Single Convention on Narcotic Drugs, 1961) which prohibit entities other than the Federal Government from legally supplying cannabis, NIDA has remained its only legal source..."

The University of Mississippi is contracted by NIDA to grow either 1.5 or 6.5 acres of cannabis, or to not grow any at all, depending on research demand. The [Research Triangle Institute](#) (RTI) has a contract to manufacture and distribute cannabis cigarettes (joints).

[National Institute on Drug Abuse \(NIDA\)](#) "Provision of Marijuana and Other Compounds For Scientific Research - Recommendations of The National Institute on Drug Abuse National Advisory Council," NIDA website, Jan. 1998

1976 - Marijuana Decriminalized in the Netherlands



Amsterdam, Netherlands
Source: "The World's Top Marijuana Travel Destinations," [CNBC](#) (accessed Aug. 31, 2011)

"In 1976, the Netherlands adopted de facto decriminalization [of cannabis]. Under Dutch law, possession remains a crime, but the national policy of the Ministry of Justice is to not

enforce that law. After 1980, a system of 'coffee shops' evolved in which the purchase of small quantities of cannabis by adults was informally tolerated and was then formally permitted in shops that were licensed."

Craig Reinerman, PhD "The Limited Relevance of Drug Policy: Cannabis in Amsterdam and in San Francisco," *American Journal of Public Health*, May 2004

Nov. 24, 1976 - Federal Court Rules Robert Randall's Use of Marijuana a "Medical Necessity"

Robert Randall

Source: *denverpost.com* (accessed Aug. 31, 2011)

"In November, 1976, a Washington, DC man [Robert Randall] afflicted by glaucoma employed the little-used Common Law Doctrine of Necessity to defend himself against criminal charges of marijuana cultivation (US v. Randall). On November 24, 1976, federal Judge James Washington ruled Randall's use of marijuana constituted a 'medical necessity...'

Judge Washington dismissed criminal charges against Randall. Concurrent with this judicial determination, federal agencies responding to a May, 1976 petition filed by Randall, began providing this patient with licit, FDA-approved access to government supplies of medical marijuana. Randall was the first American to receive marijuana for the treatment of a medical disorder."



[Schaffer Online Library of Drug Policy](http://www.druglibrary.org) "Significant Legal Cases," www.druglibrary.org

1978 - Federal Government IND Compassionate Use Program Supplies Patients with Marijuana

"NIDA also supplies cannabis to [seven patients](#) under single patient so-called 'compassionate use' [Investigational New Drug](#) Applications (IND). In 1978, as part of a lawsuit settlement by the Department of Health and Human Services, NIDA began supplying cannabis to patients whose physicians applied for and received such an USID from the FDA."

[National Institute on Drug Abuse \(NIDA\)](#) "Provision of Marijuana and Other Compounds For Scientific Research - Recommendations of the National Institute on Drug Abuse National Advisory Council," NIDA website, Jan. 1998

1978 - New Mexico Passes First State Law Recognizing Medical Value of Marijuana

"In 1978, New Mexico passed the first state law recognizing the medical value of

marijuana [Controlled Substances Therapeutic Research Act]. Over the next few years, more than 30 states passed similar legislation."

[Elsa Scott](#) "Marinol: The Little Synthetic That Couldn't," *High Times Magazine*, July 1994
[**Editor's Note:** See full text of the [Mar. 1983 official progress report](#) (700 KB) on New Mexico's medical marijuana program.]

1980 - Marinol, a Synthetic Version of THC, and Smoked Marijuana Tested on Cancer Patients

"In 1980, the National Cancer Institute (NCI) began experimental distribution of a new drug called Marinol, an oral form of THC (the primary active ingredient in marijuana), to cancer patients in San Francisco. Simultaneously, six states conducted studies comparing smoked marijuana to oral THC in cancer patients who had not responded to traditional antiemetic medication. These state-sponsored studies revealed that thousands of patients found marijuana safer and more effective than synthetic THC. Meanwhile, the NCI experiments showed that some patients responded well to Marinol... Confronted with two different medical recommendations, the government chose to dismiss the state studies and give Marinol the green light."

[Kambiz Akhavan](#) "Marinol vs. Marijuana: Politics, Science, and Popular Culture," [drugtext.org](#), 1997

1981 - Legal Medical Marijuana Patients Form Organization to Help Others Obtain Access

"In 1981, Bob [[Randall](#), the first legal medical marijuana patient under the IND program] and Alice [O'Leary, his wife] formed an organization called the Alliance for Cannabis Therapeutics or ACT, of which I was a charter member. Our goal was to help other patients and their doctors file Compassionate Care Protocols, and to guide them through the government maze."

[Irvin Rosenfeld](#) *My Medicine: How I Convinced the US Government to Provide My Marijuana and Helped Launch a National Movement*, 2010

1981-1985 - US Gov Sells Marinol Patent to Unimed and FDA Approves It for Treatment of Nausea

"In 1981, the government agreed to sell the Marinol patent to Unimed, and Unimed applied to the FDA for permission to market the pill as a treatment for nausea. In November 1984, the FDA rejected Unimed's application because clinical tests that had been done on the drug were deficient. But Unimed hustled up some more data, and by June 1985, the FDA delivered its approval. A year later, the DEA gave it a green light."

[Elsa Scott](#) "Marinol: The Little Synthetic That Couldn't," *High Times Magazine*, July 1994

May 1985 - Marinol Approved by FDA

"Made by Unimed, [Marinol](#) is the trade name for dronabinol, a synthetic form of delta-9 tetrahydrocannabinol (THC), one of the principal psychoactive components of botanical marijuana. It was approved in May 1985 for nausea and vomiting associated with cancer chemotherapy in patients who fail to respond to conventional antiemetic treatments. In

December 1992, it was approved by FDA for the treatment of anorexia associated with weight loss in patients with AIDS. Marketed as a capsule, Marinol was originally placed in Schedule II."

[Mark Eddy CRS Report for Congress: "Medical Marijuana: Review and Analysis of Federal and State Policies"](#)  (515 KB)

1986 - Anti-Drug Abuse Act Increases Penalties for Marijuana Possession and Dealing

President Reagan signed the Anti-Drug Abuse Act, instituting mandatory sentences for drug-related crimes. In conjunction with the Comprehensive Crime Control Act of 1984, the new law raised federal penalties for marijuana possession and dealing, basing the penalties on the amount of the drug involved. Possession of 100 marijuana plants received the same penalty as possession of 100 grams of heroin. A later amendment to the Anti-Drug Abuse Act established a "three strikes and you're out" policy, requiring life sentences for repeat drug offenders, and providing for the death penalty for "drug kingpins."

[Frontline](#) "Busted: America's War on Marijuana," www.pbs.org

Sep. 6, 1988 - DEA Judge Francis Young Recommends Marijuana Be Placed in Schedule II

"Administrative law judge [Francis Young](#) was asked by the Drug Enforcement Administration in 1988 to comment on the merits of rescheduling marijuana [in response to NORML's 1972 petition]. Young suggested that marijuana be rescheduled [from schedule I to schedule II] for nausea associated with cancer chemotherapy. He also concluded that the evidence was insufficient to warrant the use of crude marijuana for glaucoma or pain."

[Eric A. Voth, MD](#) [Richard H. Schwartz, MD](#) "Medicinal Applications of Delta-9-Tetrahydrocannabinol and Marijuana," *Annals of Internal Medicine*, May 15, 1997

"The evidence in this record clearly shows that marijuana has been accepted as capable of relieving the distress of great numbers of very ill people, and doing so with safety under medical supervision. It would be unreasonable, arbitrary and capricious for DEA to continue to stand between those sufferers and the benefits of this substance in light of the evidence in this record."

[Francis L. Young](#) "Ruling in the matter of Marijuana Rescheduling Petition"  (2.6 MB), Sep. 6, 1988

Dec. 30, 1989 - DEA Administrator Overrules Francis Young and Orders That Cannabis Remain a Schedule I Controlled Substance

"In December 1989, DEA Administrator Jack Lawn overruled the decision of one administrative law judge [Francis Young] who had agreed with marijuana advocates that marijuana should be moved from Schedule I to Schedule II of the Controlled Substances Act. This proposed rescheduling of marijuana would have allowed physicians to prescribe the smoking of marijuana as a legal treatment for some forms of illness.

Administrator Lawn maintained that there was no medicinal benefit to smoking

marijuana... [and] that marijuana should remain a Schedule I controlled substance."

[US Drug Enforcement Administration \(DEA\)](#) "A Tradition of Excellence: The History of the DEA from 1973-2003," DEA website (accessed Aug. 17, 2010)

1990-1999 

1990 - Scientists Discover Cannabinoid Receptors

Cannabinoid Receptor Sites

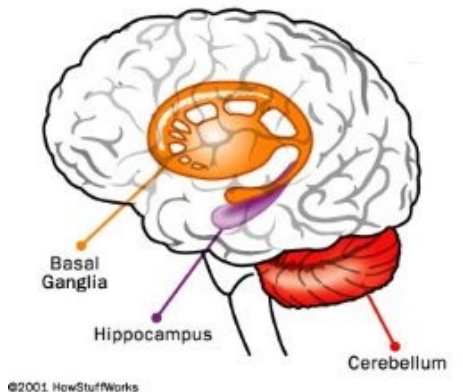


Diagram of cannabinoid receptor sites in the human brain.
Source: *HowStuffWorks.com*, 2001

Miles Herkenham, Senior Investigator at the National Institute of Mental Health, and his research team discover the cannabinoid receptor system in 1990. The discovery helps scientists understand the pharmacological effects of cannabinoids, which occur when the THC in marijuana binds with the cannabinoid receptors in the brain.

[Jon Gettman, PhD](#) "The 1995 Marijuana Rescheduling Petition," *DrugScience.org*

1991 - Court Ruling Highlights Application of Medical Necessity Defense

In *Jenks v. State of Florida* (1991), the Florida First District Court of Appeals rules on the application of a medical necessity defense in response to criminal prosecution. In the case of medical marijuana, the patient must be suffering from a medically recognized disease or illness, which is causing a symptom for which there is no effective treatment other than marijuana.

[Rosalie Liccardo Pacula, PhD](#) "State Medical Marijuana Laws: Understanding the Laws and Their Limitations," *Journal of Public Health Policy*, 2002

June 1991 - Federal Government Suspends IND Compassionate Use Medical Marijuana Program

"A federal program that has provided free marijuana to the seriously ill is being phased out by Health and Human Services officials who have concluded it undercuts official Bush administration policy against the use of illegal drugs, according to HHS officials.

While a small number of patients already receiving marijuana will continue to do so, new applicants will be encouraged to try synthetic forms of delta-9-THC, the psychoactive ingredient in marijuana, rather than the weed itself, according to a new policy directive signed by James O. Mason, chief of the Public Health Service...

'If it's perceived that the Public Health Service is going around giving marijuana to folks, there would be a perception that this stuff can't be so bad,' said Mason. 'It gives a bad signal.'...

While only six people had received marijuana under the program, the FDA has received 28 applications in the past year, and was concerned that it would be swamped with hundreds more in coming months, officials said."

[Michael Isikoff, MA](#) "HHS to Phase Out Marijuana Program," *Washington Post*, June 22, 1991

"The Compassionate IND Program for medical marijuana was suspended [in June 1991] after the number of applications surge in response to the AIDS epidemic."

[American Medical Association \(AMA\)](#) "Report 10 of the Council on Scientific Affairs," 1997

July 1991 - 53% of Oncologists Surveyed Say Cannabis Should Be Available by Prescription

"A random-sample, anonymous survey of the members of the American Society of Clinical Oncology (ASCO) was conducted in spring 1990 measuring the attitudes and experiences of American oncologists concerning the antiemetic use of marijuana in cancer chemotherapy patients.

A surprising proportion of respondents (432, 44%) said they had recommended marijuana to at least one patient...

Six hundred eight respondents (63%) agreed with the statement affirming the efficacy of marijuana in the treatment of emesis... and 77 respondents (8%) disagreed...

Of the 599 respondents with opinions, 53% favored making marijuana available by prescription."

[Mark A. R. Kleiman, PhD](#) [Richard Doblin, PhD](#) "Marijuana as Antiemetic Medicine: A Survey of Oncologists' Experiences and Attitude," *Annals of Internal Medicine*, July 1991

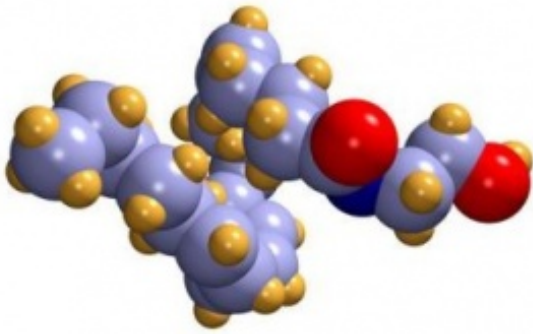
Nov. 5, 1991 - First Medical Marijuana Initiative Passed in San Francisco

"The first medical marijuana initiative appeared in the city of San Francisco as Proposition P, which passed with an overwhelming 79% of the vote on Nov. 5, 1991. Proposition P called on the State of California and the California Medical Association to 'restore hemp medical preparations to the list of available medicines in California,' and not to penalize physicians 'from prescribing hemp preparations for medical purposes.'"

[Richard Glen Boire, JD](#) [Kevin Feeney, JD](#) *Medical Marijuana Law*, 2007

1992 - Scientists Discover First Endocannabinoid

"Twenty-eight years after discovering THC, in 1992, Dr. Mechoulam, along with Dr. William Devane and Dr. Lumir Hanus, identified the brain's first endogenous cannabinoid (or endocannabinoid) - the brain's natural version of THC -which they called 'anandamide,' from the Sanskrit word 'ananda,' which means 'eternal bliss' or 'supreme joy.'"



Anandamide neurotransmitter molecule. The atoms are color-coded as carbon (light blue), hydrogen (yellow), nitrogen (dark blue) and oxygen (red).

Source: *SciencePhoto.com* (accessed Dec. 15, 2011)

Vigorous exercise stimulates the release of anandamide, and the sense of euphoric well-being that comes with a healthy workout - what jogging enthusiasts refer to as a 'runner's high' - is due to elevated levels of endocannabinoids. The endocannabinoid system in the brain is also believed to help mediate emotions, consolidate memory, and coordinate movement."

David J. Brown, MS "The New Science of Cannabinoid-Based Medicine: An Interview with Dr. Raphael Mechoulam," *Mavericks of Medicine*, 2006

Mar. 19, 1992 - IND Compassionate Use Program Officially Terminated; 13 Existing Patients Continue to Get Government Marijuana

"In March 1992, the Secretary of the Department of Health and Human Services decided that NIDA would not provide marijuana for single-patient INDs except to those patients who were receiving marijuana at the time...

When the program was terminated, 27 additional single-patient INDs that had received FDA approval were canceled and the patients were not supplied with marijuana."

American Medical Association "Report 10 of the Council on Scientific Affairs," 1997

"The thirteen patients receiving medical Cannabis from the Feds would be 'grandfathered in,' and continue to be supplied. Five had AIDS; three had glaucoma; Barbra Douglas had MS; George McMahon had Nail-Patella Syndrome; I had Multiple Congenital Cartilaginous Exostosis and a variant of Pseudo Pseudo Hypoparathyroidism; and two had chosen to remain anonymous.

HHS Secretary Louis Sullivan signed the order ending the Compassionate Care INDs on March 19, 1992."

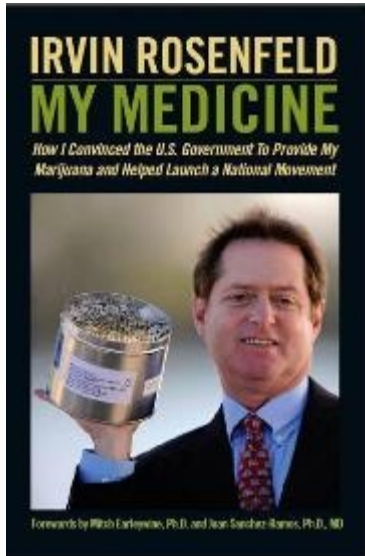
Irvin Rosenfeld *My Medicine: How I Convinced the US Government to Provide My Marijuana and Helped Launch a National Movement*, 2010

Mar. 1993 - American Medical Student Association Unanimously Endorses Rescheduling of Marijuana

"In March [1993], Elvy [Musikka] and I spoke in Miami before the American Medical Student Association – which represented 48,000 med students and residents. AMSA delegates unanimously endorsed a statement calling on the new Attorney General, Janet Reno, to abide by the 1988 recommendation of Judge Young and move Cannabis

to Schedule 2. They also unanimously passed a resolution asking President Clinton to reopen the Compassionate IND program."

Irvin Rosenfeld *My Medicine: How I Convinced the US Government to Provide My Marijuana and Helped Launch a National Movement*, 2010



Cover of Irv Rosenfeld's book. Click for larger image.
mymedicinethebook.com (accessed Oct. 13, 2011)

Feb. 18, 1994 - Final Decision in 1972 Court Battle over Marijuana Rescheduling Keeps Marijuana in Schedule I

"In 1972, a petition was submitted to the Bureau of Narcotics and Dangerous Drugs (now known as the Drug Enforcement Agency, or DEA) to reschedule marijuana to Schedule II, enabling legal physician prescription. A series of court battles ensued pertaining to this petition for the next 22 years. A final decision was not rendered until February 18, 1994, by the US Court of Appeals (DC Circuit) in which the DEA's decision to keep marijuana in Schedule I was upheld. While the petition eventually failed, it created an environment of uncertainty regarding the potential federal scheduling of marijuana that persisted throughout the 1970s and early 1980s."

Rosalie Liccardo Pacula, PhD "State Medical Marijuana Laws: Understanding the Laws and Their Limitations," *Journal of Public Health Policy*, 2002

Mid-July 1994 - Assistant Secretary of Health Announces Final Decision Not to Reopen IND Compassionate Use Medical Marijuana Program

"As you may recall, in 1992, the Assistant Secretary of Health in the Bush Administration, Dr. James Mason, shut down the FDA's Single Patient IND Program (Compassionate Access) for medical marijuana patients because it was growing too large, too visible, too expensive and too time-consuming for the FDA to administer. Over the course of the last year, the current Assistant Secretary of Health, Dr. Philip Lee, has been pressed by various congresspeople to review Dr. Mason's decision. In a letter sent in mid-July to Representative Barney Frank and the other congresspeople and senators who contacted him about this issue, Dr. Lee announced that he has finally reached a decision concerning his course of action... Dr. Lee indicated that he has decided not to reopen the Compassionate Access Program. According to Dr. Lee, the fatal flaw of that program was that it did not generate data that could be submitted to the FDA to either support or reject the hypothesis that smoked marijuana had a safe and efficacious medical use. Dr. Lee did not offer any government funds for research, yet indicated that only FDA-approved research could resolve this controversy."

Rick Doblin, PhD "Newsletter of the Multidisciplinary Association for Psychedelic Studies," Summer 1994

July 10, 1995 - Second Petition to Reschedule Marijuana Filed

Jon Gettman, former National Director of the [National Organization for the Reform of Marijuana Laws \(NORML\)](#), files a legal challenge to marijuana's Schedule I prohibited status with the support of *High Times Magazine*. The 275-page petition is filed with the DEA and requests that they remove marijuana and THC from schedule I of the Controlled Substances Act because neither has the high potential for abuse required under the law for this prohibited status.

Jon Gettman, PhD "Introduction to Marijuana Rescheduling," [drugscience.org](#) (accessed Aug. 30, 2010)

Nov. 5, 1996 - California Becomes First State to Legalize Medical Marijuana

Medical marijuana activist Chris Conrad and his wife Mikki Norris advocated for the passage of Prop. 215
Source: [chrisconrad.com](#) (accessed Dec. 28, 2011)



"Voters in California [pass] a state medical marijuana initiative in 1996. Known as [Proposition 215](#) (45 KB), it permits patients and their primary caregivers, with a physician's recommendation, to possess and cultivate marijuana for the treatment of AIDS, cancer, muscular spasticity, migraines, and several other disorders; it also protects them from punishment if they recommend marijuana to their patients."

Janet Joy, PhD Alison Mack *Marijuana as Medicine: Beyond the Controversy*, 2001

Jan. 30, 1997 - New England Journal of Medicine Publishes Editorial Calling for Marijuana to Be Rescheduled



Logo for the *New England Journal of Medicine*, founded in 1812.
Source: [NEJM.org](#) (accessed Dec. 14, 2011)

The *New England Journal of Medicine* publishes an editorial written by Jerome P. Kassirer, MD, titled "Federal Foolishness and Marijuana." The article states: "Federal authorities should rescind their prohibition of the medicinal use of marijuana for seriously ill patients and allow physicians to decide which patients to treat. The government should change marijuana's status from that of a Schedule 1 drug (considered to be potentially addictive and with no current medical use) to that of a Schedule 2 drug (potentially addictive but with some accepted medical use) and regulate it accordingly."

Jerome P. Kassirer, MD "Federal Foolishness and Marijuana," *New England Journal of Medicine*, Jan. 30, 1997

Feb. 19 and 20, 1997 - NIH Says More Study Needed to Assess Potential of Medical Marijuana

On Feb. 19 and 20, 1997, the National Institutes of Health (NIH) "convened an Ad Hoc Group of Experts, which concluded that scientific evidence was insufficient to definitively assess marijuana's therapeutic potential and advised that the traditional scientific process should be allowed to evaluate the drug's use for certain disorders."

[Tatiana Shohov](#) *Medical Use of Marijuana: Policy, Regulatory, and Legal Issues*, 2003

Sep. 1998 - Congress Prevents Implementation of Medical Marijuana Law in DC

Former US Congressman (L-GA) Bob Barr at a Sep. 5, 2008 event in Washington, DC.

Source: [andrewsullivan.thedailybeast.com](#)

"In September 1998, the House debated and passed a resolution (H.J.Res. 117) declaring that Congress supports the existing federal drug approval process for determining whether any drug, including marijuana, is safe and effective... under the heading 'Not Legalizing Marijuana for Medicinal Use.'



In a separate amendment to the same act, Congress prevented the District of Columbia government from counting ballots of a 1998 voter-approved initiative that would have allowed the medical use of marijuana... The amendment [known as the Barr Amendment for its sponsor Bob Barr of Georgia] was challenged and overturned in District Court, the ballots were counted, and the measure passed 69% to 31%. Nevertheless, despite further court challenges, Congress continued to prohibit implementation of the initiative..."

[Mark Eddy](#) *CRS Report for Congress: "Medical Marijuana: Review and Analysis of Federal and State Policies"* , Apr. 2, 2012

Oct. 29, 1998 - Presidents Ford, Carter, and Bush Urge Voters to Reject Medical Marijuana

"Prior to the [Nov. 3, 1998] election, former Presidents Ford, Carter, and Bush released a statement urging voters to reject state medical marijuana initiatives because they circumvented the standard process by which the Food and Drug Administration (FDA) tests medicines for safety and effectiveness. 'Compassionate medicine,' these leaders insisted, 'must be based on science, not political appeals.' Nevertheless, medical marijuana initiatives proceeded to pass in every state in which they appeared on the ballot."

[Janet Joy, PhD](#) [Alison Mack](#) *Marijuana as Medicine: Beyond the Controversy*, 2001

Nov. 3, 1998 - Alaska, Oregon, and Washington Become 2nd, 3rd, and 4th States to Legalize Medical Marijuana

"Fifty-eight percent of voters [in Alaska] approved Ballot Measure #8 on November 3, 1998. The law took effect on March 4, 1999. It removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who possess written documentation from their physician advising that they 'might benefit from the medical use of marijuana...'

Fifty-five percent of voters [in Oregon] approved Measure 67 on November 3, 1998. The law took effect on December 3, 1998. It removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who possess a signed recommendation from their physician stating that marijuana "may mitigate" his or her debilitating symptoms...

Fifty-nine percent of voters [in Washington] approved Measure 692 on November 3, 1998. The law took effect on that day. It removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who possess 'valid documentation' from their physician affirming that he or she suffers from a debilitating condition and that the "potential benefits of the medical use of marijuana would likely outweigh the health risks."

[National Organization for the Reform of Marijuana Laws \(NORML\)](http://norml.org) "Active State Medical Marijuana Programs," norml.org (accessed Aug. 26, 2010)

Nov. 11, 1998 - UK House of Lords Committee Recommends Legalizing Medical Marijuana

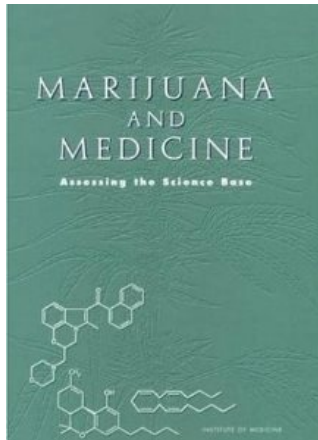
"The Government should allow doctors to prescribe cannabis for medical use: this is the conclusion of a report by the House of Lords Science and Technology Committee, published today [Nov. 11, 1998].

Lord Perry of Walton, chairman of the inquiry said: 'We have seen enough evidence to convince us that a doctor might legitimately want to prescribe cannabis to relieve pain, or the symptoms of multiple sclerosis (MS), and that the criminal law ought not to stand in the way. Far from being a step towards general legalisation, our recommendation would make the ban on recreational use easier to enforce. Above all, it would show compassion to patients who currently risk prosecution to get help.'

[House of Lords Select Committee on Science and Technology](#) "Lords Say, Legalise Cannabis for Medical Use,"  Press Release, Nov. 11, 1998

Jan. 1997-Mar. 1999 - Institute of Medicine (IOM) Conducts Comprehensive Study on Medical Effects of Marijuana

"In January 1997... the Director of the Office of National Drug Control Policy (the federal drug czar) commissioned the Institute of Medicine (IOM) of the National Academy of Sciences to review the scientific evidence on the potential health benefits and risks of marijuana and its constituent cannabinoids. Begun in August 1997, IOM's 257-page report, *Marijuana and Medicine: Assessing the Science Base*, was released in March 1999...



Cover of the IOM report
Source: Amazon.com (accessed Jan. 3, 2012)

For the most part, the IOM Report straddled the fence and provided sound bites for both sides of the medical marijuana debate... In general, the report emphasized the need for well-formulated, scientific research into the therapeutic effects of marijuana and its cannabinoid components on patients with specific disease conditions."

Mark Eddy CRS Report for Congress: "Medical Marijuana: Review and Analysis of Federal and State Policies" , Apr. 2, 2010

June 2, 1999 - Alaska Makes Enrollment in State Patient Registry Mandatory

"[Alaska's] Senate Bill 94, which took effect on June 2, 1999, mandates all patients seeking legal protection under this act to enroll in the state patient registry and possess a valid identification card. Patients not enrolled in the registry will no longer be able to argue the 'affirmative defense of medical necessity' if they are arrested on marijuana charges."

National Organization for the Reform of Marijuana Laws (NORML) "Active State Medical Marijuana Programs," norml.org

July 1999 - Marinol Moved to Schedule III to Increase Availability to Patients



Marinol packaging
Source: deamuseum.org (accessed Dec. 29, 2011)

"In July 1999, in response to a rescheduling petition from Unimed, [Marinol] was moved administratively by DEA to Schedule III to make it more widely available to patients. The rescheduling was granted after a review by DEA and the Department of Health and Human Services found little evidence of illicit abuse of the drug. In Schedule III, Marinol is now subject to fewer regulatory controls and lesser criminal sanctions for illicit use."

Mark Eddy CRS Report for Congress: "Medical Marijuana: Review and Analysis of Federal and State Policies" 

Aug. 1999 - Health Canada Announces Funding for Medical Research on Marijuana

"In August 1999, Health Canada - the equivalent of the DHHS [Department of Health and Human Services] - announced its support for a program of medical research on marijuana... The Canadian agency will provide research-grade marijuana for approved studies and up to \$1.5 million a year in funding through 2004."

Janet Joy, PhD Alison Mack *Marijuana as Medicine: Beyond the Controversy*, 2001

Nov. 2, 1999 - Maine Becomes Fifth State to Legalize Medical Marijuana

Maine becomes the fifth state to legalize medical marijuana when ballot initiative Question 2 is passed with 61% of the vote on Nov. 2, 1999. The law "provides a simple defense, which means the burden is on the state to prove that a patient's medical use or possession was not authorized by statute."

Marijuana Policy Project (MPP) "State-by-State Medical Marijuana Laws: How to Remove the Threat of Arrest"  MPP.org, Feb. 2001

2000-2004



June 14, 2000 - Hawaii Becomes Sixth State to Legalize Medical Marijuana

"Hawaii broke new ground in 2000, when it became the first state to enact a law to remove criminal penalties for medical marijuana users via a state legislature. Hawaii's governor [Ben Cayetano]... submitted the original bill and signed the final measure into law on June 14, [2000]..."

Senate Bill 862 was passed by a vote of 32-18 in the House and 13-12 Senate, making Hawaii the sixth state to legalize medical marijuana."

Marijuana Policy Project (MPP) "State-by-State Medical Marijuana Laws: How to Remove the Threat of Arrest"  MPP.org, Feb. 2001

Nov. 7, 2000 - Colorado and Nevada Become Seventh and Eighth States to Legalize Medical Marijuana

"Fifty-four percent of voters [in Colorado] approved Amendment 20 on November 7, 2000, which amends the state's constitution to recognize the medical use of marijuana. The law took effect on June 1, 2001. It removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who possess written documentation from their physician... The law establishes a confidential state-run patient registry that issues identification cards to qualifying patients..."

Sixty-five percent of voters [in Nevada] approved Question 9 on November 7, 2000, which amends the states' constitution to recognize the medical use of marijuana. The law took effect on October 1, 2001. The law removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who have 'written documentation' from their physician... The law establishes a confidential state-run patient registry that issues identification cards to qualifying patients."

National Organization for the Reform of Marijuana Laws (NORML) "Active State Medical Marijuana Programs," norml.org

May 14, 2001 - Supreme Court Rules "There Is No Medical Necessity Exception to the Controlled Substances Act"



Oakland Cannabis Buyers' Cooperative logo
Source: IndyBay.org, July 12, 2006

The Oakland Cannabis Buyers' Cooperative, organized to distribute marijuana to qualified patients for medical purposes, was sued by the US government to force the Cooperative to cease operations. A district court rejected the Cooperative's defense that the marijuana was medically necessary, but its rejection was overturned by the Ninth Circuit.

On May 14, 2001, the US Supreme Court rules 8-0 that "there is no medical necessity exception to the Controlled Substances Act's prohibitions on manufacturing and distributing marijuana."

[USA v. Oakland Cannabis Buyers' Cooperative \(OCBC\) and Jeffrey Jones](#) (115 KB)

Oct. 1, 2001 - Nevada Medical Marijuana Law Amended to Create State Registry

Nevada creates a state registry for patients whose physicians recommend medical marijuana and tasks the Department of Motor Vehicles with issuing identification cards. According to Assembly Bill 453, no state money will be used for the program, which will be funded entirely by donations.

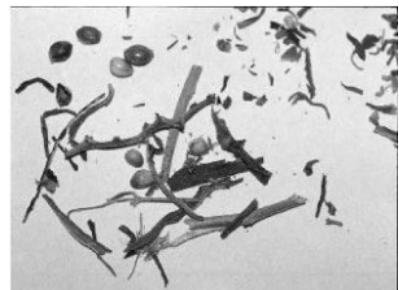
[Assembly Bill 453](#) (25 KB)

Jan. 2002 - Only Study on IND Patients Finds That Medical Marijuana Improves Their Quality of Life

Close-Up of Debris from Three NIDA Cannabis Cigarettes
Source: *Journal of Cannabis Therapeutics*, Jan. 2002

The only study conducted on the FDA's IND Program determines that "NIDA cannabis is shipped to patients in labeled metal canisters containing 300 cigarettes, and material is frequently two or more years old upon receipt... A close inspection of the contents of NIDA-supplied cannabis cigarettes reveals them to be a crude mixture of leaf with abundant stem and seed components."

The study concludes that "cannabis smoking, even of a crude, low-grade product, provides effective symptomatic relief of pain, muscle spasms, and intraocular pressure elevations..." and that "clinical cannabis patients are able to reduce or eliminate other



prescription medicines and their accompanying side effects."

According to the study, "clinical cannabis provides an improved quality of life in these patients... The side effect profile of NIDA cannabis in chronic usage suggests some mild pulmonary risk."

The authors of the study recommend reopening the Compassionate IND program or amending laws to allow access to clinical cannabis.

Ethan Russo, MD "Chronic Cannabis Use in the Compassionate IND Program," *Journal of Cannabis Therapeutics*, Jan. 2002

Sep. 2002 - DC Court Blocks Proposed Medical Marijuana Initiative

"Proposed legislation to allow marijuana for medical purposes was... blocked in Washington, DC. In September of 2002, a federal appeals court overturned, without providing any rationale, a previous court ruling that had cleared the way for a medical marijuana initiative to be considered by voters in an election. Interestingly, this was the second time that the measure had been blocked in DC. In 1998, voters approved a medical marijuana initiative by a vote of 69% to 31%, but Congress prevented the law from going into effect."

Clayton James Mosher, PhD Scott Akins *Drugs and Drug Policy: The Control of Consciousness Alteration*, 2007

Oct. 29, 2002 - Court Rules in *Conant v. Walters* That Gov't Cannot Revoke Physician Licenses Solely for Recommending Medical Marijuana

After California legalized medical marijuana in 1996, the US government threatened to take away the medical licenses of physicians who recommended the use of marijuana. On Oct. 29, 2002, a [US Court of Appeals for the Ninth Circuit 3-0 ruling](#) (80 KB) in the case *Conant v. Walters* prohibited "the federal government from either revoking a physician's license to prescribe controlled substances or conducting an investigation of a physician that might lead to such revocation, where the basis for the government's action is solely the physician's professional 'recommendation' of the use of medical marijuana." The US Supreme Court denied an appeal, so physicians maintained the right to discuss marijuana with their patients.

[Conant v. Walters](#) (80 KB)

[Editor's Note: The Oct. 29, 2002 Ninth Circuit ruling upheld the Sep. 7, 2000 [permanent injunction](#) (75 KB) issued by the US District Court for the Northern District of California, which had already issued a [temporary injunction](#) (110 KB) on Apr. 30, 1997.]

July 23, 2003 - US House of Representatives Rejects Amendment to Stop Federal Raids on Medical Marijuana Patients

"Today [July 23, 2003] the House of Representatives rejected an amendment aimed at stopping federal raids on patients who use marijuana and people who provide it to them in states that recognize the drug as a medicine. Sponsored by Reps. Maurice Hinchey (D-N.Y.) and Dana Rohrabacher (R.-Calif.), the amendment would have forbidden the

Justice Department (which includes the Drug Enforcement Administration) from spending money to tear up plants, close down clubs, or arrest patients or providers.

The amendment was defeated by a vote of 273 to 152, which is closer than might have been expected. The vote in favor of a 1998 House resolution condemning state medical marijuana laws was 310 to 93."

Jacob Sullum "Growing Outrage," Reason.com, July 23, 2003

Aug. 26, 2003 - First Canadian Patient to Receive Government-grown Marijuana



Jari Dvorak, with his first supply of medical marijuana grown by the Canadian government.

Source: *LJWorld.com*, Aug. 27, 2003

On Aug. 26, 2003, Canadian HIV-patient Jari Dvorak, age 62, becomes the first Canadian patient to receive government-grown marijuana. The program is in response to an Ontario court order for the Canadian government to make a legal supply of marijuana available to authorized patients.

He is "one of several hundred Canadians authorized to use medical marijuana for pain, nausea and other symptoms of catastrophic or chronic illness." Qualified patients are approved through Health Canada, and the marijuana is distributed through the patients' physicians.


Associated Press (AP) "Canada Distributes Medical Marijuana," MSNBC.com, Aug. 23, 2003

Sep. 1, 2003 - Dutch Pharmacies to Supply Medical Marijuana

"More than 2,000 pharmacies in the Netherlands are legally obliged from today [Sep. 1, 2003] to stock medical cannabis and dispense advice to users on the merits of brewing the mixture of dried parts of the hemp plant as a tea. They are also expected to provide instruction on how to become high by using it in combination with an inhaler."

Isabel Conway "Medical Marijuana Goes on Sale in Dutch Pharmacies," *The Independent*, Sep. 1, 2003

Oct. 7, 2003 - US Government Receives Cannabinoids Patent

The US Department of Health and Human Services receives a [patent \(US 6,630,507 B1\)](#)  (1.5 MB) for the therapeutic use of "cannabinoids as antioxidants and neuroprotectants."

The abstract says in part: "Cannabinoids have been found to have antioxidant properties... The cannabinoids are found to have particular application as neuroprotectants... in the treatment of neurodegenerative diseases such as Alzheimer's disease..."

US patent 6,630,507 B1  (1.5 MB), Oct. 3, 2007

2004 - UK Moves Cannabis to Class C, with Lower Penalties

In 2004, UK Home Secretary David Blunkett approves the reclassification of cannabis from Class B (which it had been since the 1971 Misuse of Drugs Act) to Class C, which carries lower penalties for possession. The decision is based in part on advice from the Advisory Council on the Misuse of Drugs (ACMD).

[British Broadcasting Corporation \(BBC\)](#) "Debate over Cannabis Classification," BBC website, Oct. 31, 2009

Jan. 1, 2004 - California Places Limits on Medical Marijuana Possession

California's medical marijuana law is amended by Senate Bill 420. The bill requires the State Department of Health Services to "establish and maintain a voluntary program for the issuance of identification cards to qualified patients." It creates possession limits of "no more than eight ounces of dried marijuana per qualified patient" and "no more than six mature or 12 immature marijuana plants per qualified patient."

SB 420 also states that qualified patients and caregivers "who associate within the State of California in order collectively or cooperatively to cultivate marijuana for medical purposes, shall not solely on the basis of that fact be subject to state criminal sanctions."

[Senate Bill 420](#)  (70 KB)

Aug. 5, 2004 - DEA Instructs HHS to Review Marijuana for Possible Rescheduling

"The Drug Enforcement Administration (DEA) this week instructed the US Department of Health and Human Services (HHS) to conduct a scientific and medical evaluation of marijuana as part of a reassessment of its scheduling under the federal Controlled Substances Act.

The DEA's request is in response to an administrative petition filed by a coalition of health and drug law reform organizations in October 2002 to reclassify marijuana so that doctors may legally prescribe it for medicinal purposes."

[National Organization for the Reform of Marijuana Laws \(NORML\)](#) Press Release, norml.org, Aug. 5, 2004

Nov. 2, 2004 - Montana Becomes 10th State to Legalize Medical Marijuana

"Sixty-two percent of voters [in Montana] approved Initiative 148 on November 2, 2004. The law took effect that same day. It removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who possess written documentation from their physicians authorizing the medical use of marijuana... The law establishes a confidential state-run patient registry that issues identification cards to qualifying patients."

[National Organization for the Reform of Marijuana Laws \(NORML\)](#) "Active State Medical Marijuana Programs," norml.org

Dec. 18, 2004 - AARP Poll Finds That 72% of Seniors Support Medical Marijuana

Nearly three-fourths of Americans middle age and older support legalizing marijuana for medical use, according to a poll taken for AARP...

Among the 1,706 adults age 45 and older who were polled in November, opinions varied along regional and generational lines and among the 30 percent of respondents who said they had smoked marijuana. AARP members represented 37 percent of the respondents.

Over all, 72 percent of respondents agreed 'adults should be allowed to legally use marijuana for medical purposes if a physician recommends it.'

[Associated Press \(AP\)](#) "AARP Poll Shows Most Support Legalizing Medicinal Marijuana," [nytimes.com](#), Dec. 19, 2004

May 26, 2004 - Vermont Becomes Ninth State to Legalize Medical Marijuana

Vermont becomes the ninth state to legalize medical marijuana when Governor James Douglas allows "[Act Relating to Marijuana Use by Persons with Severe Illness](#)" (41 KB) to pass into law unsigned.

"The law removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients diagnosed with a 'debilitating medical condition...' The law establishes a mandatory, confidential state-run registry that issues identification cards to qualifying patients.

The medical use provisions in Vermont do not include reciprocity provisions protecting visitors from other medical use states."

[National Organization for the Reform of Marijuana Laws \(NORML\)](#) "Vermont Medical Marijuana," [norml.org](#) (accessed Aug. 27, 2013)



June 6, 2005 - US Supreme Court Rules Congress May Ban Marijuana Use in *Gonzalez v. Raich*

"California's [1996 medical marijuana] law conflicted with the federal Controlled Substances Act (CSA), which banned possession of marijuana. After the Drug Enforcement Administration (DEA) seized doctor-prescribed marijuana from a patient's home, a group of medical marijuana users sued the DEA and U.S. Attorney General John Ashcroft in federal district court. [*Gonzalez v. Raich*, docket no. 03-1454]

The medical marijuana users argued the Controlled Substances Act - which Congress passed using its constitutional power to regulate interstate commerce - exceeded Congress' commerce clause power. The district court ruled against the group. The Ninth

Circuit Court of Appeals reversed and ruled the CSA unconstitutional... the Ninth Circuit ruled using medical marijuana did not 'substantially affect' interstate commerce and therefore could not be regulated by Congress...

In a 6-3 opinion delivered by Justice John Paul Stevens [on June 6, 2005], the Court held that the commerce clause gave Congress authority to prohibit the local cultivation and use of marijuana, despite state law to the contrary...

The majority argued that Congress could ban local marijuana use..."

[The Oyez Project at IIT Chicago-Kent College of Law](#) "Gonzalez v. Raich," Dec. 18, 2011

July 8 - July 18, 2005 - California Suspends Then Resumes Medical Marijuana ID Card Program

California suspends its medical marijuana ID card program on June 5, 2005 following a US Supreme Court ruling that the possession and cultivation of marijuana is a punishable federal offense in the case of *Angel v. Raich*.

The program is re-instated ten days later after a review by the state attorney general found that state employees could not be prosecuted for aiding or abetting the violation of a crime by issuing the ID cards.

[Associated Press \(AP\)](#) "State Resumes Medical Marijuana ID Card Program," July 19, 2005

Dec. 12, 2005 - Federal Agents Execute Widespread Raid on Medical Marijuana Dispensaries in California

DEA agents seized marijuana during the Dec. 12, 2005 raids.

Source: [Associated Press/Ben Margot](#)

"[On Dec. 12, 2005] [f]ederal and local law enforcement officers Monday conducted what activists called the most widespread raid on medical marijuana dispensaries anywhere in California.

Drug Enforcement Administration agents and two area police agencies raided 11 marijuana dispensaries in San Diego and two in San Marcos, questioning employees and customers and carting off documents. The agents also seized an unknown quantity of marijuana.

No arrests were made. Authorities said the investigation was aimed at determining how much marijuana was being sold and who was supplying it."

[Los Angeles Times](#) "Authorities Raid 11 Medical Pot Suppliers," [latimes.com](#), Dec. 13, 2005



Jan. 1, 2006 - Oregon's Medical Marijuana Law Amended to Exclude Affirmative Defense for Exceeding Possession Limits

On Jan. 1, 2006, Senate Bill 1085 takes effect in Oregon as an amendment to the state's medical marijuana law. Qualified patients who possess cannabis in amounts exceeding the state guidelines of 24 ounces of usable marijuana and 24 plants (18 immature, 6 mature) will no longer retain the ability to argue an "affirmative defense" of medical necessity at trial. Patients who fail to register with the state, but who possess medical cannabis in amounts compliant with state law, still retain the ability to raise an "affirmative defense" at trial.

The law also redefines "mature plants" to include only those cannabis plants that are more than 12 inches in height and diameter, and establish a state-registry for those authorized to produce medical cannabis to qualified patients.

[Senate Bill 1085](#)  (52 KB)

Jan. 3, 2006 - Rhode Island Becomes 11th State to Legalize Medical Marijuana after Legislature Overrides Governor's Veto

Rhode Island's Senate Bill 0710 (the Edward O. Hawkins and Thomas C. Slater Medical Marijuana Act) takes effect immediately upon passage on Jan. 3, 2006. The law removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who possess "written certification" from their physician... [and] establishes a mandatory, confidential state-run patient registry that issues identification cards to qualifying patients.

The bill was passed by the House 52-10 on June 24, 2005, and by the Senate 33-1 on June 28, 2005. On June 29, 2005, Gov. Carcieri vetoed the bill. The Senate overrode the veto on June 30, 2005 (28-6) and the House overrode the veto on Jan. 3, 2006 (59-13), at which point the law took effect.

[National Organization for the Reform of Marijuana Laws \(NORML\)](#) "Active State Medical Marijuana Programs," norml.org

[Legislative Status Report: Bills 600-899](#) , Rhode Island legislature website

[Editor's Note: Read more about the [medical marijuana laws in Rhode Island.](#)]

Mar. 16, 2006 - DEA Busts Marijuana-Laced Candy Manufacturers

Marijuana-laced candy products seized by the DEA included Puff-A-Mint Pattie and KeefKat. Source: deamuseum.org (accessed Dec. 29, 2011)

"On March 16, 2006, DEA arrested 12 individuals on charges of distribution of marijuana. As a result of searches in the San Francisco Bay area conducted at the time of the arrests, law enforcement seized four sophisticated indoor marijuana grows, thousands of marijuana



plants, a large amount of US currency, two semi-automatic weapons, one revolver, and hundreds of pot-laced candy and soft drinks. This investigation began in October 2005, when the DEA obtained information that Beyond Bomb, a manufacturer of marijuana candy in Oakland, CA, was in operation. The marijuana-laced candy and other edibles manufactured by the company mimicked the name and appearance of well known name brand candies and products, such as Stoney Ranchers, Munchy Way, Rasta Reece's. Buddafingers, and Pot Tarts."

[US Drug Enforcement Administration \(DEA\)](#) "A History of the DEA: 2003-2008," deamuseum.org, Jan. 1, 2010

Bruce Margolin, director of Los Angeles NORML -- National Organization for the Reform of Marijuana Laws -- called the arrests aggressive and "uncalled for."

"There are a lot of people depending on [marijuana products] for their health and safety and welfare," he said. "What do they want, for them to be buying off the street?"

[Los Angeles Times](#) "12 Accused of Making Marijuana-Laced Candy, Soda," latimes.com, Ma. 18, 2006

Apr. 20, 2006 - FDA Confirms Opposition to Smoked Marijuana for Medical Purposes

On Apr. 20, 2006, the [FDA releases a statement](#) titled "Inter-Agency Advisory Regarding Claims That Smoked Marijuana Is a Medicine." The FDA states that "there is currently sound evidence that smoked marijuana is harmful. A past evaluation by several Department of Health and Human Services (HHS) agencies... concluded that no sound scientific studies supported medical use of marijuana for treatment in the United States, and no animal or human data supported the safety or efficacy of marijuana for general medical use..."

FDA, as the federal agency responsible for reviewing the safety and efficacy of drugs, DEA as the federal agency charged with enforcing the CSA, and the Office of National Drug Control Policy, as the federal coordinator of drug control policy, do not support the use of smoked marijuana for medical purposes."

[US Food and Drug Administration \(FDA\)](#) "Inter-Agency Advisory Regarding Claims That Smoked Marijuana Is a Medicine" , Apr. 20, 2006

June 21, 2006 - Presbyterian Church Approves Resolution to Support Medical Marijuana

Presbyterian Symbol
Source: oga.pcusa.org (accessed Dec. 20, 2011)

On June 21, 2006, the General Assembly of the Presbyterian Church (USA) voted to support access to medical marijuana for people who have a doctor's recommendation.

"This resolution declares support for the medicinal use of cannabis sativa (also known as marijuana), and directs the Presbyterian Church (U.S.A.) to actively urge the Federal government to amend and adopt such laws as will allow the benefits of marijuana



treatment for such diseases as cancer, AIDS, and muscular dystrophy."

[Presbyterian Church](#) "Minutes: 217th General Assembly," oga.pcusa.org, 2006

Feb. 12, 2007 - DEA Administrative Law Judge Recommends Allowing New Source of Marijuana for Research

Mary Ellen Bittner, a DEA Administrative Law Judge, issues a non-binding Feb. 12, 2007 ruling that Lyle E. Craker, PhD should be allowed to grow marijuana for medical research at the University of Massachusetts. The ruling states that "there is currently an inadequate supply of marijuana available for research purposes... I recommend that Respondent's application be granted."

[Mary Ellen Bittner, JD Ruling in the Matter of Lyle E. Craker, PhD](#)  (6.5 MB), Feb. 12, 2007

Mar. 13, 2007 - New Mexico Becomes 12th State to Legalize Medical Marijuana

New Mexico's Senate Bill 523 "The Lynn and Erin Compassionate Use Act" is approved by the House (36-31) and the Senate (32-3) on Mar. 13, 2007 and will take effect on July 1, 2007. The act removes state-level criminal penalties on the use and possession of marijuana by patients "in a regulated system for alleviating symptoms caused by debilitating medical conditions and their medical treatments." The New Mexico Department of Health is designated to administer the program and register patients, caregivers, and providers.

[Senate Bill 523](#)  (71 KB), Mar. 13, 2007
"2007 Regular Session: SB 523," nmlegis.gov

Feb. 15, 2008 - Nation's 2nd Largest Physician Group Calls for Marijuana Reclassification and Supports Nonsmoked Forms of Medical Marijuana

In a paper released on Feb. 15, 2008, the American College of Physicians (ACP) stated its support for the use of nonsmoked forms of THC, research on the benefits of medical marijuana, review of the federal scheduling of marijuana, and exemption from criminal prosecution.

The ACP said, in part:

"Position 1: ACP supports programs and funding for rigorous scientific evaluation of the potential therapeutic benefits of medical marijuana and the publication of such findings.

Position 1a: ACP supports increased research for conditions where the efficacy of marijuana has been established to determine optimal dosage and route of delivery.

Position 1b: Medical marijuana research should not only focus on determining drug efficacy and safety but also on determining efficacy in comparison with other available treatments.

Position 2: ACP encourages the use of nonsmoked forms of THC that have proven therapeutic value.

Position 3: ACP supports the current process for obtaining federal research-grade cannabis.

Position 4: ACP urges review of marijuana's status as a schedule I controlled substance and its reclassification into a more appropriate schedule, given the scientific evidence regarding marijuana's safety and efficacy in some clinical conditions.

Position 5: ACP strongly supports exemption from federal criminal prosecution; civil liability; or professional sanctioning, such as loss of licensure or credentialing, for physicians who prescribe or dispense medical marijuana in accordance with state law. Similarly, ACP strongly urges protection from criminal or civil penalties for patients who use medical marijuana as permitted under state laws."

[American College of Physicians "Supporting Research into the Therapeutic Role of Marijuana,"](#) , Feb. 15, 2008

May 2008 - Cannabis Returned to Class B in the UK

The UK government announces in May 2008 that it is reclassifying cannabis from Class C to its original Class B. Penalties for possession of Class B drugs include up to five years in prison, higher than the two-year penalty for Class C drugs. The reclassification goes counter to the advice of the Advisory Council on the Misuse of Drugs (ACMD).

[British Broadcasting Corporation \(BBC\)](#) "Debate Over Cannabis Classification," BBC website
Oct. 31, 2009

May 22, 2008 - California Court Rules Possession Limits on Medical Marijuana Unconstitutional

"The Second District of California Court of Appeals ruled [3-0 on May 22, 2008] that the state limits on medical marijuana possession and cultivation established under state law SB 420 are unconstitutional.

In the case *People v. Patrick Kelly*, the court overturned defendant's conviction for possessing 12 ounces of dried marijuana plants on the grounds that the prosecutor had improperly argued that the defendant was guilty because he possessed more than the 8-ounce limit established in Health & Safety Code Sec. 11362.77 and did not have a doctor's recommendation authorizing more...

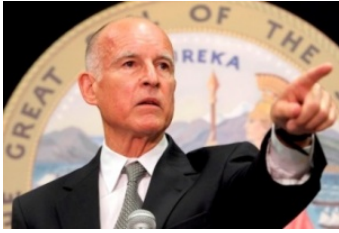
The Attorney General's office announced that it would appeal the Kelly ruling."

[California National Organization for the Reform of Marijuana Laws \(CaINORML\)](#) "Court Strikes Down SB420 Limits," [canorml.org](#), May 22, 2008


Aug. 25, 2008 - California Attorney General Issues State Guidelines for Medical Marijuana

On Aug. 25, 2008, then-California Attorney General Jerry Brown issues guidelines for law enforcement and medical marijuana patients to clarify the state's laws.

The non-binding 11-page document states, "In light of California's decision to remove the use



and cultivation of physician recommended marijuana from the scope of the state's drug laws, this Office recommends that state and local law enforcement officers not arrest individuals or seize marijuana under federal law when the officer determines from the facts available that the cultivation, possession, or transportation is permitted under California's medical marijuana laws."

"Guidelines for the Security and Non-diversion of Marijuana Grown for Medical Use" (55 KB)  ag.ca.gov, Aug. 28, 2009

Former California Attorney General Jerry Brown.

Source: AP Photo, LAist.com, July 26, 2010

Sep. 2008 - Two Pounds of Cannabis Found Buried in 2,700-year-old Chinese Tomb

Tomb M90 of the Yanghai Tombs, in which cannabis from 2,700 years ago was found.

Source: ScienceBlogs.com, Mar. 28, 2009

"The Yanghai Tombs near Turpan, Xinjiang-Uighur Autonomous Region, China have recently been excavated to reveal the 2700-year-old grave of a Caucasoid shaman whose accoutrements included a large cache [789 grams, or about two pounds] of cannabis..."



The cannabis was presumably employed by this culture as a medicinal or psychoactive agent, or an aid to divination. To our knowledge, these investigations provide the oldest documentation of cannabis as a pharmacologically active agent, and contribute to the medical and archaeological record of this pre-Silk Road culture."

Ethan Russo, MD "Phytochemical and Genetic Analyses of Ancient Cannabis from Central Asia," *Journal of Experimental Botany*, Sep. 2008

Nov. 4, 2008 - Michigan Becomes 13th State to Legalize Medical Marijuana

"Sixty-three percent of voters approved Proposal 1 on November 4, 2008. The law took effect on December 4, 2008. It removes state-level criminal penalties on the use, possession and cultivation of marijuana by patients who possess written documentation from their physicians authorizing the medical use of marijuana."

National Organization for the Reform of Marijuana Laws (NORML) "Active State Medical Marijuana Programs," norml.org (accessed June 7, 2011)

Jan. 12, 2009 - DEA Rejects Judge's Ruling to Allow New Source of Marijuana for Research

The DEA rejects  (3.1 MB) Administrative Law Judge Mary Ellen Bittner's Feb. 12,

2007 recommendation to allow Professor Lyle Craker to grow marijuana for research purposes at the University of Massachusetts. The DEA asserts the current supply of marijuana for research is "adequate and uninterrupted."

[Bina Venkataraman, MPP](#) "DEA Rejects UMass Request to Grow Medical Marijuana," *Boston Globe*, Jan. 12, 2009

Feb. 25, 2009 - US Attorney General Says Raids on Medical Marijuana Clinics Will Not Continue

Protestor at DEA raid of medical marijuana dispensary in Hollywood, CA.
Source: Shay Sowden, LAist.com, July 25, 2007



"Supporters of programs to provide legal marijuana to patients with painful medical conditions are celebrating Attorney General Eric Holder's statement this week [on Feb. 25, 2009] that the Drug Enforcement Administration would end its raids on state-approved marijuana dispensaries... The new policy represents a significant turnabout for the federal government. During the Bush administration, DEA agents shut down 30 to 40 marijuana dispensaries, the agency said."

[Alex Johnson](#) "DEA to Halt Medical Marijuana Raids," *msnbc.com*, Feb. 27, 2009

Oct. 19, 2009 - US Attorney General Announces That DOJ Will Not Prioritize Prosecution of Legal Medical Marijuana Patients

On Oct. 19, 2009 the [US Department of Justice](#) (DOJ) issued a memo, known subsequently as the Ogden memo, to "provide clarification and guidance to federal prosecutors in [States that have enacted laws](#) authorizing the medical use of marijuana."

In an effort to make the most efficient use of limited resources, the DOJ announced that prosecutorial priorities should not target "individuals whose actions are in clear and unambiguous compliance with existing state laws providing for the medical use of marijuana." Specifically, individuals with cancer or other serious illnesses who use medical marijuana and the caregivers who provide the medical marijuana in accordance with state law should not be the focus of federal prosecution.

The memo clarified that "prosecution of commercial enterprises that unlawfully market and sell marijuana for profit continues to be an enforcement priority." It is also explicitly stated that the memo "does not 'legalize' marijuana or provide a legal defense to a violation of federal law."

[US Department of Justice "Memorandum for Selected United States Attorneys,"](#) (3.2 MB)  Oct. 19, 2009

Nov. 3, 2009 - Maine's Medical Marijuana Law Amended to Provide for Dispensaries

"Maine has allowed prescribing, and limited possession, of medical marijuana since 1999 but the law lacked any distribution mechanism and questions arose of noncompliance with federal law and of how patients could legally obtain the prescribed marijuana... On November 3, 2009 Maine voters approved [Question 5](#) (135 KB), which enacted the citizen-initiated bill, 'An act to establish the Maine Medical Marijuana Act'...

Maine is the fifth state to provide for dispensaries of medical grade marijuana for persons with debilitating and chronic medical conditions. These not-for-profit dispensaries will be licensed and regulated by the Maine Department of Health and Human Services."

"[Maine's Medical Marijuana Law](#)," (75 KB) maine.gov, July 27, 2011

Nov. 10, 2009 - AMA Softens Position on Scheduling of Marijuana

The American Medical Association softens its position on medical marijuana in a policy statement released Nov. 10, 2009. The statement read in part: "Our AMA urges that marijuana's status as a federal Schedule I controlled substance be reviewed with the goal of facilitating the conduct of clinical research and development of cannabinoid-based medicines, and alternate delivery methods. This should not be viewed as an endorsement of state-based medical cannabis programs, the legalization of marijuana, or that scientific evidence on the therapeutic use of cannabis meets the current standards for a prescription drug product."

Prior to the Nov. 10, 2009 position quoted above, the AMA had recommended that marijuana be retained in Schedule I of the Controlled Substances Act pending the outcome of further studies.

[American Medical Association \(AMA\) AMA Policy: Medical Marijuana](#)," Nov. 10, 2009

[Editor's Note: Lisa Lecas from the AMA Media Relations department sent a Nov. 12, 2009 email to ProCon.org with the following statement explaining the policy change:

"To help facilitate scientific research and the development of cannabinoid-based medicines, the AMA adopted new policy urging the federal government to review marijuana's status as a Schedule I substance. Despite more than 30 years of clinical research, only a small number of randomized, controlled trials have been conducted on smoked cannabis.

Federal drug approval is achieved after appropriate scientific and regulatory review to establish safety and efficacy. The limited nature of rigorous scientific studies on the therapeutic use of cannabis is insufficient to satisfy the current standards for a prescription drug product."]

Jan. 11, 2010 - New Jersey Becomes 14th State to Legalize Medical Marijuana

"The New Jersey Legislature approved a measure on Monday [Jan. 11, 2011] that would make the state the 14th in the nation... to legalize the use of marijuana to help patients with chronic illnesses.

The measure — which would allow patients diagnosed with severe illnesses like cancer, AIDS, Lou Gehrig's disease, muscular dystrophy and multiple sclerosis to have access to marijuana grown and distributed through state-monitored dispensaries — was passed by the General Assembly and State Senate on the final day of the legislative session. Gov. Jon S. Corzine has said he would sign it into law before leaving office next Tuesday."

David Kocieniewski, MS "New Jersey Vote Backs Marijuana for Severely Ill," *New York Times*, Jan. 11, 2011

Jan. 21, 2010 - California Supreme Court Affirms Ruling That Possession Limits Are Unconstitutional

On Jan. 21, 2010, the California Supreme Court affirms 7-0 the [May 22, 2008](#) Second District Court of Appeals ruling in *People v. Kelly*. The original ruling was that the possession limits set by SB 420 violate the California constitution because the voter-approved Prop. 215 can only be amended by the voters.

"We conclude as follows: To the extent section 11362.77 (together with its quantitative limitations) impermissibly amends the CUA by burdening a defense that would be available pursuant to that initiative statute, section 11362.77 is invalid under California Constitution article II, section 10, subdivision (c)."

[People v. Patrick K. Kelly](#) 📄 (135 KB), Jan. 21, 2010

Feb. 17, 2010 - Iowa Board of Pharmacy Recommends Rescheduling of Marijuana

"The Iowa Board of Pharmacy today issued a recommendation that the Iowa Legislature reclassify marijuana from Schedule I of the Iowa Controlled Substances Act into Schedule II of the Act. A Schedule II drug includes narcotic drugs with a high potential for abuse but with currently accepted medical use in treatment."

["Iowa Board of Pharmacy Issues Recommendation"](#) 📄 (30 KB), Feb. 10, 2010

Apr. 1, 2010 - Washington Expands List of Medical Professionals Authorized to Recommend Medical Marijuana



Washington Governor Christine Gregoire after signing a bill (not medical marijuana-related) on Feb. 13, 2012.
Source: nbcnews.com

"More medical professionals will be allowed to authorize the use of medical marijuana for qualified patients under a measure signed into law by Gov. Chris Gregoire.

Gregoire signed the bill Thursday [Apr. 1, 2010] and it takes effect June 10. It adds physician assistants, naturopaths, advanced registered nurse practitioners and others to the list of those who can officially recommend marijuana for patients under the state's medical marijuana law.

Under previous law, only physicians were allowed to write the recommendation.

The medical marijuana measure is Senate Bill 5798."

[Associated Press \(AP\)](#) "WA Governor Allows More to OK Medical Marijuana," *Seattle Times*, Apr. 1, 2010

June 4, 2010 - Judge Rules against Los Angeles Marijuana Dispensaries

Los Angeles County Superior Court Judge James C. Chalfant cleared the way for the ordinance to take effect Monday by denying more than a dozen requests for a temporary restraining order to bar the city from enforcing the law, which would force more than 400 shops to shutter their doors.

[Victoria Kim](#) "Judge Clears Way for L.A. to Begin Marijuana Dispensary Crackdown," *latimes.com*, June 5, 2010

June 7, 2010 - Colorado Increases Oversight of Medical Marijuana Dispensaries and Physician Recommendations

Colorado's medical marijuana law is amended by [House Bill 1284](#) 📄 (236 KB) and [Senate Bill 109](#) 📄 (50 KB).

Colorado Governor Bill Ritter signed the bills into law and stated the following in a June 7, 2010 press release:

"House Bill 1284 provides a regulatory framework for dispensaries, including giving local communities the ability to ban or place sensible and much-needed controls on the operation, location and ownership of these establishments.

Senate Bill 109 will help prevent fraud and abuse, ensuring that physicians who authorize medical marijuana for their patients actually perform a physical exam, do not have a DEA flag on their medical license and do not have a financial relationship with a dispensary."

"Press Release: Strengthens Medical Marijuana Oversight," Office of Governor Bill Ritter, Jr., June 7, 2010

July 27, 2010 - US Dept of Veterans Affairs Relaxes Marijuana Rules for Vets

Plaque at the entrance to the Department of Veterans Affairs.

Source: *blogs.va.gov*, Nov. 5, 2010

The US Department of Veterans Affairs releases a [Veterans Health Administration \(VHA\) directive](#) 📄 (15 KB) on July 22, 2010 saying that veterans who participate in legal state medical marijuana programs will no longer be disqualified from "substance abuse programs, pain control programs, or other clinical programs."



"VHA Directive 2010-035"  (15 KB), Department of Veterans Affairs website, July 22, 2010

July 27, 2010 - Medical Marijuana Becomes Legal in DC

"Medical marijuana is now legal [as of Jul 27, 2010] in the District after the Democrat-controlled Congress declined to overrule a D.C. Council bill that allows the city to set up as many as eight dispensaries where chronically ill patients can purchase the drug... Although the bill has now cleared Congress, patients will likely have to wait at least several months before they can obtain the drug from a city-sanctioned dispensary...

The law allows patients with cancer, glaucoma, HIV/AIDS and other chronic ailments can possess up to four ounces of the drug...

The law caps a years-long struggle to act on a 1998 referendum in which 69 percent of District residents voted for to allow medical marijuana. Until last year, Congress blocked the city from enacting the referendum."

Tim Craig "Medical Marijuana Now Legal," *Washington Post*, July 27, 2010

Nov. 2, 2010 - South Dakota Voters Reject Medical Marijuana Measure

On Nov. 2, 2010 voters in South Dakota rejected Measure 13, which sought to legalize medical marijuana for people suffering from debilitating medical conditions, 63 percent to 37 percent. Four years earlier a similar measure was voted down by a margin of 52 percent to 48 percent.

Lynn Taylor Rick Lynn Taylor Rick "South Dakota Voters Say No to Medical Marijuana," *Rapid City Journal*, Nov. 3, 2010

Nov. 2, 2010 - Arizona Becomes 15th State to Legalize Medical Marijuana

Arizona becomes the 15th state to legalize medical marijuana when Proposition 203, the Arizona Medical Marijuana Act, passes by a margin of 4,341 votes out of 1,678,351 votes cast in the Nov. 2, 2010 election.

The law allows registered qualifying patients to obtain marijuana from a registered nonprofit dispensary, and to possess and use medical marijuana to treat the condition.

Michelle Ye Hee Lee "Arizona Voters Have Approved Medical Marijuana Measure," *Arizona Republic*, Nov. 13, 2010

Mar. 1, 2011 - DEA Places Five Synthetic Cannabinoids into Schedule I, Citing "Imminent Hazard"

"The Administrator of the Drug Enforcement Administration (DEA) is issuing this [Mar. 1, 2011] final order to temporarily place five synthetic cannabinoids into the Controlled Substances Act (CSA) pursuant to the temporary scheduling provisions... This action is based on a finding by the Administrator that the placement of these synthetic cannabinoids into Schedule I of the CSA is necessary to avoid an imminent hazard to the public safety..."



The popularity of these THC-like synthetic cannabinoids has significantly increased throughout the United States, and they are being abused for their psychoactive properties as reported by law enforcement, the medical community, and through scientific literature.

Some of the product names include, but are not limited to, 'Spice,' 'K2,' and many more."

[US Drug Enforcement Administration \(DEA\) "Schedules of Controlled Substances: Temporary Placement of Five Synthetic Cannabinoids Into Schedule I"](#) , DEA.gov, Mar. 1, 2011

Package of Spice, a synthetic cannabinoid.
Source: [themudflats.net](#), Feb. 26, 2011

May 13, 2011 - Delaware Becomes 16th State to Legalize Medical Marijuana

Delaware becomes the 16th state to legalize medical marijuana when Governor Jack Markell (D) signed SB 17 into law on May 13, 2011. The law allows adults in Delaware with certain debilitating conditions to possess up to six ounces of marijuana with a doctor's recommendation.

[Doug Denison](#) "Gov. Jack Markell Signs Medical Marijuana Bill," *Dover Post*, May 16, 2011

Mar. 23 - May 16, 2011 - US Attorneys Send Threatening Letters to States with Legal Medical Marijuana

"In 2011 the DOJ [US Department of Justice] sent letters to officials in Arizona [Mar. 23 and May 2], Colorado [Apr. 26], Montana [Apr. 20], Rhode Island [Apr. 29], Vermont [May 3], Hawaii [Apr. 12], New Hampshire [May 10], Maine [May 16], and Washington [Apr. 14] threatening to prosecute those who implemented cultivation and distribution programs."

[Americans for Safe Access \(ASA\)](#) "ASA Sues Feds To Halt Anti-Pot Surge," ASA website, Nov. 4, 2011

July 1, 2011 - Montana Law Requiring State Residency to Become a Medical Marijuana Patient Takes Effect

Montana [Senate Bill 423](#)  (100 KB) takes effect on July 1, 2011.

"Now, new or renewing medical marijuana users must be Montana residents and they must provide proof of their chronic pain to qualify for a registration card with that medical condition. They also must carry their registration cards at all times.

The number of mature marijuana plants allowed per patient has been lowered from six to four, and they can't be grown in view of the street or a public place."


[Associated Press \(AP\)](#) "Medical Marijuana Changes Cause Confusion," *Billings Gazette*, July 1, 2011

July 8, 2011 - DEA Denies 2002 Request to Reclassify Marijuana out of Restrictive Schedule I Category

"The U.S. Drug Enforcement Administration (DEA) ruled on Friday [July 8, 2011] that marijuana has "no accepted medical use" and should therefore remain illegal under federal law — regardless of conflicting state legislation allowing medical marijuana and despite hundreds of studies and centuries of medical practice attesting to the drug's benefits.

The judgment came in response to a 2002 petition by supporters of medical marijuana, which called on the government to reclassify cannabis, which is currently a Schedule I drug — like heroin, illegal for all uses — and to place it in Schedule III, IV or V, which would allow for common medical uses...

The government had long delayed making a judgment on the petition, but now that it has, it makes it possible for advocates to appeal it in federal court. Now, that process can be set in motion."

A [June 21 letter](#)  (430 KB) from DEA Administrator Michele M. Leonhart said marijuana 'has a high potential for abuse,' 'has no currently accepted medical use in treatment in the United States' and 'lacks accepted safety for use under medical supervision.' The letter was officially published in the Federal Register on July 8, 2011.

[Maia Szalavitz](#) "Why Medical Marijuana Laws Reduce Traffic Deaths," *TIME*, Dec. 2, 2011

Aug. 7, 2011 - Israeli Government Arranges to Supply Medical Marijuana

Cannabis plants at a growing facility for Tikun Olam, the Israeli Health Ministry's official grower and supplier of medical marijuana.

Source: Haaretz.com, Aug. 22, 2010

"The [Israeli] Cabinet today [Aug. 7, 2011] approved arrangements and supervision regarding the supply of cannabis for medical and research uses. This is in recognition that the medical use of cannabis is necessary in certain cases.

The Health Ministry will – in coordination with the Israel Police and the Israel Anti-Drug Authority – oversee the foregoing and will also be responsible for supplies from imports and local cultivation."



"Cabinet Approves Arrangements for the Use of Cannabis for Medical Purposes," Israeli Prime Minister's website, Aug. 7, 2011


[Editor's Note: Medical marijuana in Israel was previously supplied by private growers.]

Aug. 8, 2011 - DEA Again Rejects Craker's Application to Grow Marijuana for Government

DEA Administrator Michele Leonhart upheld her earlier decision in an Aug. 8, 2011 ruling, stating: "Lyle E. Craker, PhD (Respondent) has requested that I reconsider the Final Order I issued on January 7, 2009, which denied his application to become registered as a bulk manufacturer of marijuana... Respondent has failed to demonstrate that the Final Order contains any erroneous material findings of fact or conclusions of law. Accordingly, Respondent's motion for reconsideration does not provide a basis for altering the decision in the Final Order to deny his application."

["Lyle E. Craker, PhD; Order Regarding Officially Noticed Evidence and Motion for Reconsideration,"](#)  (2.1 MB) Aug. 8, 2011

Nov. 2011 - Study Finds Legal Medical Marijuana Reduces Fatal Car Accidents


"States that legalize medical marijuana see fewer fatal car accidents, according to a [Nov. 2011] [new study](#) (300 KB) , in part because people may be substituting marijuana smoking for drinking alcohol...

Comparing traffic deaths over time in states with and without medical marijuana law changes, the researchers found that fatal car wrecks dropped by 9% in states that legalized medical use — which was largely attributable to a decline in drunk driving...

The authors also found that in states that legalized medical use, there was no increase in marijuana smoking by teenagers — a finding seen in other studies as well. But, in many cases, the laws were linked with an increase in marijuana smoking among adults in their 20s; this rise was accompanied by a reduction in alcohol use by college age youth, suggesting that they were smoking weed instead..."

[Maia Szalavitz](#) "Why Medical Marijuana Laws Reduce Traffic Deaths," *TIME*, Dec. 2, 2011

Dec. 1, 2011 - Medical Marijuana Reclassification Sought by WA and RI Governors

The governors of Washington and Rhode Island petitioned the US Drug Enforcement Agency (DEA) to reclassify marijuana from the most restrictive Schedule I category to a Schedule II substance, which if approved, could lead to pharmacies dispensing marijuana. [The 106-page petition](#) , filed Nov. 30, 2011 by Democratic Governor Christine Gregoire of Washington and independent Governor Lincoln Chafee of Rhode Island, declares that the Schedule I classification of cannabis is "fundamentally wrong and should be changed."

[Michael Cooper](#) "2 Governors Asking US to Ease Rules on Marijuana to Allow for Its Medical Use," *New York Times*, Nov. 30, 2011

[**Editor's Note:** Read more about the [reclassification petition](#).]

Feb. 28, 2012 - Federal Judge Dismisses Lawsuit Against Government for Its Raids on Medical Marijuana Clinics

"When federal prosecutors in California announced a crackdown on medical marijuana dispensaries last fall, pot suppliers and their advocates claimed in a series of lawsuits

that the Obama administration broke a promise to leave them alone if they complied with state law...


[A] federal judge in Sacramento has become the first to dismiss one of them, saying the Justice Department remains free to enforce federal drug laws...

The suits were filed in November by marijuana suppliers and patients in each of the state's four federal judicial districts. They relied on the Justice Department's October 2009 memo to federal prosecutors [known as the [Ogden memo](#)] that said they should concentrate on drug trafficking networks, and 'should not focus federal resources' on individuals who followed their state's medical marijuana law...


But US District Judge Garland Burrell of Sacramento said Tuesday the Justice Department memo was a statement of priorities, not a binding commitment, and did not exempt dispensaries from the federal laws against marijuana cultivation and distribution."

[Bob Egelko](#) "Suit over Medical Marijuana Crackdown Thrown out," *San Francisco Chronicle*, Mar. 1, 2012

"...[T]he Ogden Memo does not contain a promise not to enforce the CSA [Controlled Substances Act], Defendants' [Justice Department] enforcement of the CSA is not inconsistent with the enforcement policy stated in the Ogden Memo."

[Order Granting Defendants' Dismissal Motion in case 2:11-cv-02939](#) (*Sacramento Nonprofit Collective, et. al v. Holder, Leonhart, et. al*),  Feb. 28, 2012

May 11, 2012 - US Court of Appeals Hears Oral Arguments in Lyle Craker's Federal Lawsuit against the DEA

"On May 11, 2012, the U.S. First Circuit Court of Appeals in Boston, Mass., heard [oral arguments](#)  (150 KB) in the case of *Lyle E. Craker v. Drug Enforcement Administration*. The arguments are the culmination of 11 years of administrative and legal proceedings in response to the DEA's denial of a license to Craker to start a production facility under contract to MAPS to grow marijuana exclusively for privately funded, federally regulated medical research. Craker's attorney from Washington, D.C., law firm Covington & Burling LLP, which is representing Craker pro bono, clarified the issues facing the court and urged the judges to require the DEA to issue Craker's license.

[Multidisciplinary Association for Psychedelic Studies \(MAPS\)](#) "U.S. First Circuit Court Hears Oral Arguments in *Lyle Craker v. Drug Enforcement Administration*," [maps.org](#), May 11, 2012

May 31, 2012 - Connecticut Becomes 17th State to Legalize Medical Marijuana

Connecticut becomes the 17th state to legalize medical marijuana when Governor Dannel P. Malloy signs HB 5389 into law. The law "allows licensed physicians to certify an adult patient's use of medicinal marijuana after determining that the patient has a specified debilitating disease or medical conditions and could benefit from its regulated treatment." Patients with a written certification who register with the Department of Consumer Protection "may obtain marijuana from certified pharmacists at licensed dispensaries, who will obtain it from licensed producers."

The bill was passed by the House of Representatives 96-51 and by the Senate 21-13.

"Gov. Malloy Signs Legislation Providing Relief to Some Patients with Chronic, Debilitating Medical Conditions,"  (120 KB) June 1, 2012

"Bill Status H.B. No. 5389," Connecticut General Assembly website (accessed June 1, 2012)

[**Editor's Note:** Read more about the [medical marijuana laws in Connecticut.](#)]

July 24, 2012 - LA City Council Bans Medical Marijuana Dispensaries in Unanimous Vote



Los Angeles Police Chief Charlie Beck (center) spoke at the City Council meeting about the proposed ban on July 24, 2012. Medical marijuana supporters sit behind him.

Source: Reuters

"[T]he [Los Angeles] City Council voted 14-0 Tuesday [July 24, 2012] to ban pot shops. Under the ban, each of the 762 dispensaries that have registered with the city will be sent a letter ordering them to shut down immediately. Those that don't comply may face legal action from the city...

In a seemingly contradictory move, the council also voted to instruct city staff to draw up an ordinance that would allow a group of about 170 dispensaries that registered with the city several years ago to remain open."

[Los Angeles Times](#) "L.A. City Council Votes 14-0 to Ban Medical Marijuana Shops," by Kate Linthicum, *Los Angeles Times*, July 24, 2012

"After Mayor Antonio Villaraigosa signs the ordinance as expected, pot shops will have 30 days to shut down..."

As many as 900 dispensaries will be affected by the new ordinance, but it's unclear what will happen if they disobey the order. Legal questions remain unanswered by the state's highest court..."

The ban allows hospices and home health agencies to provide medical pot. Letters will be sent to the dispensaries advising them of the ban..."

Los Angeles passed an ordinance two years ago that was supposed to shutter hundreds of pot dispensaries while capping the number in operation at 70. But legal challenges from collectives and that ordinance's expiration last month led to another surge of pot shops.

City officials said 762 collectives have registered with the city and as many as 200 more could exist."

[Associated Press \(AP\)](#) "Los Angeles Officials Vote to Ban Marijuana Shops," by Greg Risling, Associated Press website, July 25, 2012

Oct. 16, 2012 - Federal Court Hears Case to Change Schedule I Status of Marijuana

"The US Court of Appeals is reviewing the Drug Enforcement Administration's 2011 rejection of a 2002 petition seeking to reclassify marijuana's status in the Controlled Substances Act. Cannabis is currently a Schedule I narcotic – a classification reserved for substances with no accepted medical use and a high potential for abuse... Pot advocacy group Americans for Safe Access opened the hearing in Washington, DC Monday [Oct. 16, 2012] by arguing that the DEA demonstrated a 'bias' against pot by downplaying its medicinal efficacy while embellishing its alleged danger...

To varying degrees, the three-justice panel questioned whether they had the authority to overturn the DEA's rejection of the rescheduling petition...

The significance of this review is heightened by the U.S. Court of Appeals being among the most influential courts in the nation, with the power to set legal precedent in many cases."

[High Times Magazine](#) "US Court of Appeals Hears Arguments to Reschedule Cannabis," by Mark Miller, [hightimes.com](#), Oct. 18, 2012

Nov. 6, 2012 - Massachusetts Becomes 18th state to Legalize Medical Marijuana


Voters in Massachusetts approved Ballot Question 3 by a vote of 63% to 37%, "allowing doctors to prescribe the drug to patients suffering serious medical problems...

In Massachusetts, a doctor who has a 'bona fide' relationship with a patient would have to certify the patient suffered 'a debilitating medical condition, such as cancer, glaucoma, HIV-positive status or AIDS, hepatitis C, Crohn's disease, Parkinson's disease, ALS, or multiple sclerosis.'...

And Arkansas voters narrowly said no to a medical marijuana referendum similar to the one that passed in Massachusetts."


[Cable News Network \(CNN\)](#) "2 States Legalize Pot, but Don't 'Break Out the Cheetos' Yet," by Alan Duke, [CNN.com](#), Nov.7, 2012

Jan. 22, 2013 - US Appeals Court Denies Medical Marijuana Reclassification Challenge

"The United States Court of Appeals for the D.C. Circuit issued a ruling today [Jan. 22, 2013] in the medical marijuana reclassification case, [Americans for Safe Access v. Drug Enforcement Administration](#)  (370 KB). In a 2-1 decision, the Court granted standing in the case -- the right to bring a claim against the federal government -- but denied the legal challenge on the merits, agreeing with the government's assertion that 'adequate and well-controlled studies' on the medical efficacy of marijuana do not exist."

[Americans for Safe Access \(ASA\)](#) "D.C. Circuit Denies Medical Marijuana Reclassification Challenge, Advocates Vow to Appeal," ASA website, Jan. 22, 2013

July 23, 2013 - New Hampshire Becomes 19th State to Legalize Medical Marijuana

New Hampshire becomes the 19th state to legalize medical marijuana when Governor Maggie Hassan signs [House Bill 573](#)  (215 KB) into law on July 23, 2013.

The bill authorizes the use of therapeutic cannabis in New Hampshire, establishes a registry identification card system, allows for the registration of up to four non-profit alternative treatment centers in the state, and establishes an affirmative defense for qualified patients and designated caregivers with valid registry ID cards.

HB 573 also calls for the creation of a Therapeutic Use of Cannabis Advisory Council, which in five years will be required to "issue a formal opinion on whether the program should be continued or repealed."

[Marijuana Policy Project \(MPP\)](#) "Gov. Hassan Signs Bill; N.H. Becomes 19th State to Pass Medical Marijuana Law," [mpp.org](#) (accessed Aug. 26, 2013)

Aug. 1, 2013 - Illinois Becomes 20th State to Legalize Medical Marijuana

Illinois becomes the 20th state to legalize medical marijuana when Governor Pat Quinn signs [House Bill 1](#) (385 KB) into law on Aug. 1, 2013.

The Compassionate Use of Medical Cannabis Pilot Program Act establishes a patient registry program, protects registered qualifying patients and registered designated caregivers from "arrest, prosecution, or denial of any right or privilege," and allows for the registration of cultivation centers and dispensing organizations. Once the act goes into effect, "a tax is imposed upon the privilege of cultivating medical cannabis at a rate of 7% of the sales price per ounce."

[House Bill 1](#) (385 KB), Illinois General Assembly website (accessed May 17, 2013)

Aug. 8, 2013 - Dr. Sanjay Gupta Comes out in Favor of Medical Marijuana

Dr. Sanjay Gupta

Source: Hamilton Nolan, "New Surgeon General: Dr. Sanjay Gupta," [gawker.com](#), Jan. 6, 2009



"I mistakenly believed the Drug Enforcement Agency listed marijuana as a schedule 1 substance because of sound scientific proof. Surely, they must have quality reasoning as to why marijuana is in the category of the most dangerous drugs that have 'no accepted medicinal use and a high potential for abuse.'

They didn't have the science to support that claim, and I now know that when it comes to marijuana neither of those things are true. It doesn't have a high potential for abuse, and there are very legitimate medical applications...

We have been terribly and systematically misled for nearly 70 years in the United States, and I apologize for my own role in that."

[Sanjay Gupta, MD](#) "Why I Changed My Mind on Weed," [CNN.com](#), Aug. 8, 2013

Aug. 29, 2013 - Justice Department Will Not Challenge State Marijuana Laws

"Today [Aug. 29, 2013], the U.S. Department of Justice [announced an update](#) (525 KB) to its federal marijuana enforcement policy in light of recent state ballot initiatives that legalize, under state law, the possession of small amounts of marijuana and provide for the regulation of marijuana production, processing, and sale... [T]he federal government has traditionally relied on state and local authorizes to address marijuana activity through enforcement of their own narcotics laws. This guidance continues that policy.

For states such as Colorado and Washington that have enacted laws to authorize the production, distribution and possession of marijuana... [b]ased on assurances that those states will impose an appropriately strict regulatory system, the Department has informed the governors of both states that it is deferring its right to challenge their legalization laws at this time."

[US Department of Justice \(DOJ\)](#) "Justice Department Announces Update to Marijuana Enforcement Policy," www.justice.gov, Aug. 29, 2013

Feb. 14, 2014 - New Federal Guidelines Allow Banks to Provide Financial Services to Legal Marijuana Sellers

"The Obama administration on Friday [Feb. 14, 2014] gave banks a road map for conducting transactions with legal marijuana sellers so these new businesses can stash away savings, make payroll and pay taxes like any other enterprise...

Marijuana businesses that can't use banks may have too much cash they can't safely put away, leaving them vulnerable to criminals. And governments that allow marijuana sales want a channel to receive taxes...

Currently, processing money from marijuana sales puts federally insured banks at risk of drug racketeering charges, so they've refused to open accounts for marijuana-related businesses.


Friday's move was designed to let financial institutions serve such businesses while ensuring that they know their customers' legitimacy and remain obligated to report possible criminal activity, said the Treasury Department's Financial Crimes Enforcement Network, or FinCEN.

But in response, the American Bankers Association said 'guidance or regulation doesn't alter the underlying challenge for banks. As it stands, possession or distribution of marijuana violates federal law, and banks that provide support for those activities face the risk of prosecution and assorted sanctions.'...

The guidance provided the banks with more than 20 'red flags' that may indicate a violation of federal law. Among them: if a business receives substantially more revenue than its local competitors, deposits more cash than is in line with the amount of marijuana-related revenue it is reporting for federal and state tax purposes, or experiences a surge in activity by third parties offering goods or services such as equipment suppliers or shipping services."

Pete Yost "Feds Let Banks and Marijuana Sellers Do Business," bigstory.ap.org, Feb. 14, 2014
"BSA Expectations Regarding Marijuana-Related Businesses" , Department of the Treasury,
Feb. 14, 2014

Apr. 14, 2014 - Maryland Becomes 21st State to Legalize Medical Marijuana


Maryland becomes the 21st state to legalize medical marijuana when Governor Martin O'Malley signs **House Bill 881**  (375 KB) into law on Apr. 14, 2014.

The Natalie M. LaPrade Medical Marijuana Commission and the Maryland Department of Health and Mental Hygiene are tasked with developing regulations for patient registry and identification cards, dispensary licensing, setting fees and possession limits, and more.

Conditions approved for use are cachexia, anorexia, or wasting syndrome, severe or chronic pain, severe nausea, seizures, and severe or persistent muscle spasms.

House Bill 881  (375 KB), Maryland General Assembly website, Apr. 7, 2014

May 29, 2014 - Minnesota Becomes 22nd State to Legalize Medical Marijuana


Minnesota becomes the 22nd state to legalize medical marijuana when Governor Mark Dayton signs **SF 2470**  (200 KB) into law on May 29, 2014.

The bill allows oil, pill, and vaporized forms of medical marijuana but prohibits smoked marijuana.

Conditions approved for use are cancer (if the underlying condition or treatment produces severe or chronic pain, nausea or severe vomiting, or cachexia or severe wasting), glaucoma, HIV/AIDS, Tourette's syndrome, ALS, seizures/epilepsy, severe and persistent muscle spasms/MS, Crohn's disease, and terminal illness with a life expectancy of under one year.

SF 2470  (200 KB), Minnesota Legislature website, May 29, 2014

July 5, 2014 - New York Becomes 23rd State to Legalize Medical Marijuana

New York becomes the 23rd state to legalize medical marijuana when Governor Andrew Cuomo signs **Assembly Bill 6357**  (85 KB) into law on July 5, 2014.

The bill prohibits smoked marijuana and will tax the medical marijuana at a rate of 7%. The law automatically expires after seven years.

Conditions approved for use include cancer, HIV/AIDS, ALS (Lou Gehrig's disease), Parkinson's disease, multiple sclerosis, spinal cord damage causing spasticity, epilepsy, inflammatory bowel disease, neuropathies, and Huntington's disease.

AB 6357  (85 KB), New York State Assembly website, July 5, 2014

Oct. 28, 2014 - US Justice Department Will Not Enforce Federal Marijuana Laws on Native American Reservations

"Opening the door for what could be a lucrative and controversial new industry on some Native American reservations, the Justice Department... will tell U.S. attorneys to not prevent tribes from growing or selling marijuana on the sovereign lands, even in states that ban the practice.

The new guidance, released in a memorandum, will be implemented on a case-by-case basis and tribes must still follow federal guidelines, said Timothy Purdon, the U.S. attorney for North Dakota and the chairman of the Attorney General's Subcommittee on Native American Issues...

Purdon said in an interview that the majority of Native American tribes, mindful of the painful legacy of alcohol abuse in their communities, appear to be against allowing marijuana use on their territory.

The federal government will continue to legally support those tribes that wish to ban marijuana, even in states that now permit its sale, Purdon said."

[Los Angeles Times](#) Timothy M. Phelps, "U.S. Won't Stop Native Americans from Growing, Selling Pot on Their Lands," [latimes.com](#), Dec. 11, 2014

US Department of Justice, "[Policy Statement Regarding Issues in Indian Country](#)," 140 KB, Oct. 28, 2014

Dec. 17, 2014 - New Law Bans Justice Department from Using Funds against Medical Marijuana in States Where It Is Legal

"The \$1 trillion spending bill that passed last week [and was signed into law by President Obama on Dec. 17, 2014] included a provision that blocks the Justice Department from spending any money to enforce a federal ban on growing or selling marijuana in the 23 states that have moved to legalize it for medical use. It marks a huge shift for Congress, which for years had sided with federal prosecutors in their battle with states over the liberalization of drug laws...

Representative Dana Rohrabacher, a Republican from California, was one of the authors of the medical-use provision, and he made the case to his colleagues on grounds that many conservatives can understand: states' rights. In a statement, he said his amendment would force the federal government to 'respect state sovereignty' on the question of medical marijuana."

[Russell Berman](#) "Why Congress Gave in to Medical Marijuana," *The Atlantic*, Dec. 17, 2014
[**Editor's Note:** On Dec. 18, 2015, Congress passed the FY2016 *Omnibus Appropriations Bill* and President Obama signed it into law. A provision in the bill extended the medical marijuana protection for another year.]

May 3, 2015 - Governor of Puerto Rico Legalizes Medical Marijuana in the US Territory

"Puerto Rico's governor on Sunday [May 3, 2015] signed an executive order to authorize the use of medical marijuana in the U.S. territory in an unexpected move following a lengthy public debate.

Gov. Alejandro Garcia Padilla said the island's health secretary has three months to

issue a report detailing how the executive order will be implemented, the impact it will have and what future steps could be taken. The order went into immediate effect."

[Associated Press \(AP\)](#) "Puerto Rico Governor Signs Order to Legalize Medical Pot," [ap.org](#), May 3, 2015

June 22, 2015 - Federal Government Removes Obstacle to Marijuana Research

"A long-standing bureaucratic obstacle to privately-funded medical marijuana research has just been removed, effective immediately...


[The Public Health Service review process] has been a subject of particular consternation among researchers and advocates. That step is not required for research into any other drug, including cocaine and heroin. The PHS review is nearly identical to the one performed by the FDA. Sometimes, it can take months to complete."

[Washington Post](#) "The Obama Administration Just Made Medical Marijuana Research Easier," by Christopher Ingraham, *Washington Post*, June 22, 2015

"Announcement of the elimination of the Public Health Service (PHS) review of non-federally funded research protocols involving marijuana..."


On May 21, 1999, the PHS review process was established in response to enhanced interest by the biomedical research community in determining the potential therapeutic benefits of marijuana... The FDA's IND [Investigational New Drug] review process considers similar research characteristics...

Based on these considerations, and in order to streamline the application and approval processes for cannabis research, the committee that conducts the PHS review shall be eliminated."

[Department of Health and Human Services](#) "Announcement of Revision to the Department of Health and Human Services Guidance on Procedures for the Provision of Marijuana for Medical Research as Published on May 21, 1999,"  (375 KB), [federalregister.gov](#), June 22, 2015

2016-present 

Apr. 4, 2016 - DEA Considers Moving Marijuana to Less-Restrictive Drug Schedule

"In a [letter the agency sent to federal lawmakers](#)  this week [on Apr. 4, 2016], the DEA says it plans to release a decision on rescheduling marijuana 'in the first half of 2016.' Cannabis is currently classified in federal drug laws under Schedule I, the most restrictive level.

Moving marijuana to a less-restrictive schedule would boost research on the drug and the development of marijuana pharmaceuticals that doctors could prescribe, experts said.

But it would be unlikely to make raw marijuana possession or cultivation by individuals any less illegal under federal law. And it likely would do little to end the standoff between the feds and the states that have legalized cannabis."

[Denver Post](#) "The DEA Could Soon Announce a Major Decision on Rescheduling Marijuana,"
by John Ingold, denverpost.com, Apr. 6, 2016

Apr. 18, 2016 - Pennsylvania Becomes 24th US State to Legalize Medical Marijuana

Pennsylvania becomes the 24th state to legalize medical marijuana when Governor Tom Wolf (D) signs Senate Bill 3 into law on Apr. 18, 2016.

The bill prohibits smoked marijuana.

Conditions approved for use include cancer, HIV/AIDS, ALS, Parkinson's, multiple sclerosis, epilepsy, Huntington's disease, Crohn's disease, PTSD, intractable seizures, glaucoma, autism, and more.

[SB 3](#) , Apr. 18, 2016

June 8, 2016 - Ohio Becomes 25th US State to Legalize Medical Marijuana

Ohio becomes the 25th state to legalize medical marijuana when Governor John Kasich (R) signs House Bill 23 into law on June 8, 2016.

The bill prohibits smoked marijuana.

Conditions approved for use include AIDS/HIV, Alzheimer's disease, ALS, cancer, chronic traumatic encephalopathy, Crohn's disease, epilepsy, fibromyalgia, glaucoma, hepatitis C, inflammatory bowel disease, multiple sclerosis, chronic, severe, or intractable pain, Parkinson's disease, PTSD, sickle cell anemia, spinal cord disease or injury, Tourette's syndrome, traumatic brain injury, and ulcerative colitis.

[HB 523](#) , Apr. 18, 2016

Aug. 11, 2016 - DEA Declines to Reschedule Marijuana but Opens Door to Research

"DEA [Drug Enforcement Administration] has denied two petitions to [reschedule](#) marijuana under the Controlled Substances Act (CSA)..."

DEA announced a policy change designed to foster research by expanding the number of DEA-registered marijuana manufacturers. This change should provide researchers with a more varied and robust supply of marijuana... This change illustrates DEA's commitment to working together with the FDA and NIDA to facilitate research concerning marijuana and its components."

[US Drug Enforcement Administration \(DEA\)](#) "DEA Announces Actions Related to Marijuana and Industrial Hemp," [dea.gov](#), Aug. 11, 2016

Nov. 8, 2016 - Arkansas, Florida, North Dakota Vote to Legalize Medical Marijuana

All three states with medical marijuana ballot measures (Arkansas, Florida, North Dakota) voted to legalize medical marijuana on Election Day, Nov. 8, 2016, making them

the 26th, 27th, and 28th legal medical marijuana states.

53.2% of Arkansas voters approved the constitutional amendment that allows medical marijuana use for conditions including cancer, glaucoma, HIV/AIDS, hepatitis C, ALS, Tourette's syndrome, Crohn's disease, ulcerative colitis, PTSD, severe arthritis, fibromyalgia, Alzheimer's disease, and more.

71.3% of Florida voters approves amending the state constitution to allow medical marijuana for conditions including Cancer, epilepsy, glaucoma, HIV/AIDS, PTSD, ALS, Crohn's disease, Parkinson's disease, and multiple sclerosis.

63.7% of North Dakota voters approved the measure that allows medical marijuana use for conditions including cancer, HIV/AIDS, hepatitis C, ALS, PTSD, Alzheimer's disease, dementia, Crohn's disease, fibromyalgia, and more.

[Arkansas Medical Marijuana Amendment \(Issue 6\)](#) 
[Florida Medical Marijuana Legalization Initiative \(Issue 2\)](#) 
[North Dakota Initiated Statutory Measure 5](#) 

Apr. 19, 2017 - West Virginia Becomes 29th US State to Legalize Medical Marijuana

West Virginia becomes the 29th state to legalize medical marijuana when Governor Jim Justice (D) signs Senate Bill 386 into law on Apr. 19, 2017.

The bill prohibits smoked marijuana.

Conditions approved for use include anorexia, severe or chronic pain that does not find effective relief through standard pain medication, severe nausea; seizures, PTSD, and more.

[SB 386](#) , Apr. 19, 2017

June 19, 2017 - Mexico Legalizes Medical Marijuana

"Mexican President Enrique Peña Nieto signed a decree this week [on June 19, 2017] legalizing medical marijuana. The measure also classified the psychoactive ingredient in the drug as 'therapeutic.'

The new policy isn't exactly opening the door for medical marijuana dispensaries on every corner.


Instead it calls on the Ministry of Health to draft and implement regulations and public policies regulating 'the medicinal use of pharmacological derivatives of cannabis sativa, indica and Americana or marijuana, including tetrahydrocannabinol.'

The measure had broad support from Mexico's Senate and Lower House of Congress, where it passed 347-7 in April."

[Washington Post](#) "Mexico Just Legalized Medical Marijuana," by Amanda Erickson, *Washington Post*, June 21, 2017

Jan. 4, 2018 - US Attorney General Ends Obama-Era Marijuana Guidelines

"[Attorney General Jeff] Sessions rescinded the policy by president Barack Obama's Justice Department that has generally barred federal law enforcement officials from interfering with marijuana sales in states where the drug is legal...

[Sessions' policy](#)  [announced Jan. 4, 2018] will let U.S. attorneys across the country decide what kinds of federal resources to devote to marijuana enforcement based on what they see as priorities in their districts. Officials couldn't say what the ultimate impact will be on the legal industry or whether it will lead to more pot prosecutions.

Nor is it clear how the memo might affect states where marijuana is legal for medical purposes. A congressional amendment blocks the Justice Department from interfering with medical marijuana programs in states where it is allowed. Justice officials said they would follow the law, but would not preclude the possibility of medical-marijuana related prosecutions."

[Associated Press \(AP\)](#) "Attorney General Jeff Sessions to End Policy That Let Legal Pot Flourish," [cnbc.com](#), Jan. 4, 2018

June 25, 2018 - FDA Approves Its First Marijuana-Based Drug

"The U.S. Food and Drug Administration today [June 25, 2018] approved Epidiolex (cannabidiol) [CBD] oral solution for the treatment of seizures associated with two rare and severe forms of epilepsy, Lennox-Gastaut syndrome and Dravet syndrome, in patients two years of age and older. This is the first FDA-approved drug that contains a purified drug substance derived from marijuana...

'This approval serves as a reminder that advancing sound development programs that properly evaluate active ingredients contained in marijuana can lead to important medical therapies. And, the FDA is committed to this kind of careful scientific research and drug development,' said FDA Commissioner Scott Gottlieb, M.D."

[US Food and Drug Administration \(FDA\)](#) "FDA Approves First Drug Comprised of an Active Ingredient Derived from Marijuana to Treat Rare, Severe Forms of Epilepsy," [fda](#).

June 26, 2018 - Oklahoma Becomes 30th US State to Legalize Medical Marijuana

Oklahoma becomes the 30th state to legalize medical marijuana when voters approve Question 778 in the June 26, 2018 election. The law allows licensed medical marijuana patients to possess 6 mature and 6 immature plants, and creates a 7% tax on retail medical marijuana sales.

Oklahoma is the first legal state that does not have a list of approved conditions, instead allowing marijuana to be recommended "according to the accepted standards a reasonable and prudent physician would follow when recommending or approving any medication."

[Question 778](#) , June 26, 2018

[Editor's Note: Read more about the [medical marijuana laws in Oklahoma.](#)]

Dec. 20, 2018 - President Trump Signs Bill Legalizing Industrial Hemp

"Industrial hemp is now legal in the U.S., which advocates hope could eventually loosen laws around the popular marijuana extract CBD.

President Donald Trump signed the 2018 farm bill on Thursday [Dec. 20, 2018] afternoon, which legalized hemp — a variety of cannabis that does not produce the psychoactive component of marijuana...

For now, however, it appears that CBD will remain largely off-limits. The Food and Drug Administration issued a statement saying that despite the new status of hemp, CBD is still considered a drug ingredient and remains illegal to add to food or health products without the agency's approval."

[Max A. Cherney, MFA](#), "Hemp Is Now Legal in the U.S., So What Does That Mean for Pot Companies?," [marketwatch.com](#), Dec. 23, 2018

"The Agriculture Improvement Act of 2018 changes certain federal authorities relating to the production and marketing of hemp, defined as cannabis (*Cannabis sativa* L.), and derivatives of cannabis with extremely low (less than 0.3 percent on a dry weight basis) concentrations of the psychoactive compound delta-9-tetrahydrocannabinol (THC). These changes include removing hemp from the Controlled Substances Act, which means that it will no longer be an illegal substance under federal law. However, Congress explicitly preserved the agency's current authority to regulate products containing cannabis or cannabis-derived compounds."

[US Food and Drug Administration \(FDA\)](#) "FDA and Marijuana: Questions and Answers," [fda.gov](#) (accessed Dec. 27, 2018)

Deaths from Marijuana vs. 17 FDA-Approved Drugs

(Jan. 1, 1997 to June 30, 2005)

- [Background](#)
- [Cause of Death Categories & Definitions](#)
- [FDA Disclaimer of Information](#)
- [Summary of Deaths by Drug Classification](#)
- [Deaths from Marijuana & 17 FDA-Approved Drugs](#)
- [Sources & Disagreement on Marijuana Deaths](#)
- [Full Text of All 17 FDA "Adverse Event" Reports](#)

Summary of Deaths by Drug Classification

DRUG CLASSIFICATION	Specific Drugs per Category	Primary Suspect of the Death	Secondary Suspect(Contributing to death)	Total Deaths Reported 1/1/97 - 6/30/05
A. MARIJUANA <i>also known as: Cannabis sativa L</i>	Marijuana Cannabis Cannabinoids	0	279	279
B. ANTI-EMETICS <i>(used to treat vomiting)</i>	Compazine Reglan Marinol	196	429	625
C. ANTI-SPASMODICS <i>(used to treat muscle spasms)</i>	Baclofen Zanaflex	118	56	174
D. ANTI-PSYCHOTICS <i>(used to treat psychosis)</i>	Haldol Lithium Neurontin	1,593	702	2,295
E. OTHER POPULAR DRUGS <i>(used to treat various conditions including ADD, depression, narcolepsy, erectile dysfunction, and pain)</i>	Ritalin Wellbutrin Adderall Viagra Vioxx*	8,101	492	8,593
F. TOTALS of A-E	Number of Drugs in Total	Primary Suspect of the Death	Secondary Suspect (Contributing to death)	Total Deaths Reported 1/1/97 - 6/30/05
TOTAL DEATHS FROM MARIJUANA	1	0	279	279
TOTAL DEATHS FROM 17 FDA-APPROVED DRUGS	17	10,008	1,679	11,687