Does Research Support the Medical Safety and Efficacy of Marijuana?
Yes. There is a growing body of research showing that medical marijuana is effective at treating numerous conditions, such as chronic pain from neuropathy, traumatic injury, and multiple sclerosis. It has also been shown to be effective at alleviating the symptoms of many medical treatments, such as chemotherapy, HIV antiretroviral medications, and hepatitis C medications. The Congressionally chartered Institute of Medicine, part of the National Academy of Sciences, did an extensive review of the medical literature on marijuana and concluded that “[t]he accumulated data indicate a potential therapeutic value for cannabinoid drugs, particularly for symptoms such as pain relief, control of nausea and vomiting, and appetite stimulation.” They also concluded there was “substantial consensus among experts in the relevant disciplines on the scientific evidence about potential medical uses of marijuana.”

Do Medical and Professional Organizations Support Allowing Access to Medical Marijuana?
Yes. Dozens of national and state-based organizations support efforts to allow patients with serious illness access to medical marijuana. A partial list of organizations includes:

- Hospice and Palliative Care Association of New York State
- NY Statewide Senior Action Council
- New York State Nurses Association
- Pharmacists Society of the State of New York
- New York State Psychological Association
- American Academy of Family Physicians
- American Medical Students Association
- American Public Health Association
- Lymphoma Foundation of America
- Veterans for Alternative Care
- Public Health Association of New York City

Does the New York Public Support Medical Marijuana?
Yes. Public polling has consistently found that a large majority of New Yorkers – across all political, racial and regional groups – support allowing access to medical marijuana under a doctor’s supervision.

- A 2014 Quinnipiac University poll found that 88 percent of all New Yorkers think allowing medical marijuana at the recommendation of a doctor is a good idea -with strong support amongst all groups.
- A 2013 poll by Siena Research Institute found that 82 percent of New Yorkers supported support allowing seriously and terminally ill people to legally use marijuana for medical purposes if recommended by a doctor.
  - 81 percent of Republicans and Democrats, and 89 percent of Independents and were in support.
- A 2010 Quinnipiac University poll found that 71 percent of all New Yorkers believe it’s a good idea to allow adults to legally use medical marijuana if recommended by a physician and found support across all political, racial and regional groups.
- A 2010 Cornell University Survey Research Institute poll found that 64 percent of New Yorkers support a medical marijuana bill.
A 2005 poll by Siena Research Institute found that 76 percent of New Yorkers supported medical marijuana and also found support across political parties and regions.

- 72 percent of Republicans, 79 percent of Independents and 80 percent of Democrats were in support.
- 75 percent of upstate, 78 percent of suburban and 77 percent of New York City voters were in support.

Why Aren't There Safer, Synthetic Forms of Medical Marijuana?
Marinol is an oral medication that contains many of the components of marijuana and is currently available by prescription. However, this is not a viable solution for many patients. Research has shown that Marinol is often poorly absorbed, and patients complain that dosage is hard to monitor and control. In addition, for patients suffering from severe nausea and vomiting or who cannot swallow, oral medications such as Marinol are often ineffective. The National Institute of Medicine report on medical marijuana concluded that “there is no clear alternative for people suffering from chronic conditions that might be relieved by smoking marijuana…”

Will Medical Marijuana Increase Overall Marijuana Use?
Research suggests that overall marijuana use does not increase under the tightly regulated system proposed in the New York bill. The 1999 Institute of Medicine report found that: “There is broad social concern that sanctioning the medical use of marijuana might increase its use among the general population. At this point there are no convincing data to support this concern. The existing data are consistent with the idea that this would not be a problem if the medical use of marijuana were as closely regulated as other medications with abuse potential… No evidence suggests that the use of opiates or cocaine for medical purposes has increased the perception that their illicit use is safe or acceptable.”

Does Medical Marijuana Send the Wrong Message to Young People?
Medical marijuana programs do not affect drug use rates among young people. In fact, drug use statistics from states that allow access to marijuana for medical purposes show a decrease in marijuana use among adolescents. A study conducted 15 years after the passage of the first medical marijuana law concluded that teens’ marijuana use has generally gone down following the passage of medical marijuana laws. Of the 13 states studied, only the two with the most recently enacted laws (Michigan and New Mexico) showed possible increases, and the increases were modest and within the margin of error.
Won't the Federal Government Shut Down New York’s Medical Marijuana Program?

Under the principle of federalism, decisions about state marijuana laws are – and always have been – entirely up to individual states. Because 99 out of 100 marijuana arrests are made under state law, rather than federal law, a state medical marijuana law would have the practical effect of protecting the vast majority of medical marijuana patients from arrest. Since the mid-1990’s, voters and elected officials in twenty-two states and the District of Columbia have made the medical use of marijuana legal to alleviate the pain and suffering of patients with serious illnesses. On August 29, 2013 Deputy Attorney General James Cole issued a memo to all U.S. States Attorneys addressing all federal enforcement activity, including civil and criminal prosecutions, for marijuana laws in all states. The guidance applies to states with medical marijuana laws as well as the two states (CO and WA) that have passed ballot initiatives to legally regulate the production, distribution and sale of marijuana for non-medical use by adults. This memo is important for New York because it clearly lays out what kinds of provisions need to be in place for a medical marijuana program to avoid federal interference. The memo makes clear that the federal government will not interfere with a medical marijuana program unless the program violates certain federal enforcement priorities. New York’s medical marijuana law (S7923/A6357-E) creates a carefully regulated medical marijuana program and clearly addresses the concerns of the federal government; therefore, New York should not be subject to federal interference. States, such as New Mexico and New Jersey, which have implemented similar state-regulated programs, have not been subject to federal interference.