

# Recommendations of the FMEQ's Committee on the Legalization of Cannabis

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## Recommendations

In the interest of the Quebec and Canadian population's public health with regards to the legalization of the consumption and commercialization of cannabis, the FMEQ presents the following recommendations to the government of Canada:

1. *Establish procedures in order to protect vulnerable populations from problems of cannabis usage abuse, notably the First Nations and minors.*
2. *Set a maximum allowed concentration of THC in sold products.*

*The concentration of THC in cannabis available in North American black markets has considerably increased during the last 20 years, going from around 4% in the 80s to more than 20-25% today. The literature shows that more THC potent cannabis has a greater addictive potential (Justinova et al. 2005). Many experts have proposed the hypothesis that the increase in medical consultations for cannabis use disorder may be linked to the rapid increase in concentration of THC within cannabis (UNODC, 2015; EMCDDA, 2015). Thus, this committee believes that a limit on the concentration of THC in recreational cannabis ought to be imposed. The committee suggests that said limit be between 15 to 20% and adjustable with regards to results from future research.*

3. *Limit the quantity of THC in packages so that it is insufficient to induce an overdose*

*According to literature, the lethal dose of THC (LD50) is 483 mg/kg, which represent around 30g of TCH for the average adult (NB: this is a quantity of TCH and not of cannabis). This dose remains extremely elevated and difficult to reach during cannabis use, either inhaled or ingested. However, it is the government's responsibility to ensure that the products sold do not contain enough quantity of THC susceptible to induce an overdose to the consumer. This would be possible by limiting the concentration of THC in distributed products and a limitation of the quantity of cannabis that users may possess.*

4. *Establish policies that aim to reduce youth exposure to cannabis products and related marketing*

*To those ends, the committee proposes the requirement of a neutral packaging with cautions against the adverse effects of cannabis on health, same as for tobacco products, and to avoid packaging that may promote the normalization of cannabis consumption.*

5. *Restrict cannabis use in public areas, as is the case for alcohol consumption*

*Cannabis, just like alcohol, induces an alteration in cognitive and psychomotor capacities. To keep public areas free of intoxicated consumers, the committee proposes that the use of intoxicating products be restricted in public spaces, such as for alcohol. The prohibition of drug use in public would also protect the population from second-hand smoke, which was demonstrated as being harmful. In addition, this recommendation would prevent the normalization of cannabis use so as to protect vulnerable populations.*

6. *Collaborate with health organizations, professional orders and groups working with vulnerable populations*

7. *Actively prevent dangers related to driving under cannabis influence*

- a. *While awaiting the establishment of a blood THC concentration limit and the creation of an easy-to-use and reliable screening test, the committee proposes to prohibit the use of a vehicle when one is under cannabis influence by applying a zero-tolerance policy.*

*It has been shown that consumed THC can remain in human blood for more than 72 hours. However, cognitive capacities and judgment are usually not affected during the entire period, illustrating a miscorrelation between THC levels in blood and affected driving capacity. To this day, there is no known guidelines concerning the maximum THC blood level at the wheel, thus the committee recommends a zero tolerance policy with regards to cannabis use before the use vehicle until the establishment of a definitive threshold in the scientific literature.*

- b. *Forbid the cannabis use while inside a vehicle*

*To prevent the use of cannabis at the wheel and to dissuade driving under cannabis influence, the consummation of cannabis inside a vehicle must be prohibited, just as current restrictions for alcoholic products.*

8. *Invest into awareness and education concerning adverse effects of cannabis on health for general population and consumers, as well as into research pertaining to the physiologic effects of cannabis and substance use disorder treatments.*

*9. Protect the access to cannabis for medical purposes*

- a. Keep cannabis products destined for recognized and evidence-based medical use tax-free, for the purpose of agreeing with current policy on medication*
- b. Establish a reimbursement service with provincial health agencies for recognized medical uses of cannabis*

*10. Regular and close follow up on the installment of health policies with regards to cannabis consumption*