

MAINE STATE LEGISLATURE

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LEGISLATIVE RECORD

OF THE

***One Hundred and Ninth
Legislature***

OF THE

STATE OF MAINE

Volume II

First Regular Session

May 7, 1979 to June 15, 1979

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son, Kiesman, Leighton, Leonard, Lewis, Locke, Lougee, Lund, MacBride, Masterman, Masterton, Nelson, A.; Nelson, N.; Payne, Peltier, Peterson, Post, Reeves, J.; Rollins, Roope, Sewall, Sherburne, Silsby, Smith, Sprowl, Stetson, Studley, Torrey, Tozier, Twitchell, Wentworth, Whittemore.

ABSENT — Bowden, Fowlie, Hobbins, Jacques, E.; McMahon.

PAIRED — Davis-Rolde.

Yes. 85; No. 59; Absent, 5; Paired, 2.

The SPEAKER: Eighty-five having voted in the affirmative and fifty-nine in the negative, with five being absent and two paired, the motion does prevail.

The Chair recognizes the gentleman from East Millinocket, Mr. Birt.

Mr. BIRT: Mr. Speaker, having voted on the prevailing side, I now move reconsideration and hope you all vote against me.

The SPEAKER: The gentleman from East Millinocket, Mr. Birt, having voted on the prevailing side now moves that the House reconsider its action whereby the bill and all its accompanying papers were indefinitely postponed.

Mr. Kelleher of Bangor requested a roll call.

The SPEAKER: For the Chair to order a roll call, it must have the expressed desire of one-fifth of the members present and voting. Those in favor will vote yes; those opposed will vote no.

A vote of the House was taken, and more than one-fifth of the members present having expressed a desire for a roll call, a roll call was ordered.

The SPEAKER: The pending question before the House is on reconsideration.

The Chair recognizes the gentleman from Monmouth, Mr. Davis.

Mr. DAVIS: Mr. Speaker, I would like to pair my vote with the gentleman from York, Mr. Rolde. If he were here, he would be voting yes; I would be voting no.

The SPEAKER: The pending question before the House is on the motion of the gentleman from East Millinocket, Mr. Birt, that the House reconsider its action whereby the bill and all its accompanying papers were indefinitely postponed. Those in favor will vote yes; those opposed will vote no.

YEA—Aloupis, Berry, Blodgett, Bordeaux, Brown, K.L.; Bunker, Carroll, Carter, F.; Cunningham, Curtis, Damren, Dellert, Dexter, Drinkwater, Fillmore, Fowlie, Garsoe, Gavett, Gillis, Gray, Hanson, Hunter, Hutchings, Immonen, Jackson, Kiesman, Leighton, Leonard, Lewis, Locke, Lougee, Lund, MacBride, Masterman, Nelson, A.; Nelson, N.; Payne, Peltier, Peterson, Post, Reeves, J.; Rollins, Roope, Sewall, Sherburne, Silsby, Smith, Sprowl, Stetson, Studley, Torrey, Tozier, Twitchell, Wentworth, Whittemore.

NAY—Austin, Bachrach, Baker, Barry, Beaulieu, Benoit, Berube, Birt, Boudreau, Brannigan, Brenerman, Brodeur, Brown, A.; Brown, D.; Brown, K.C.; Call, Carrier, Carter, D.; Chonko, Churchill, Cloutier, Conary, Conolly, Cox, Davies, Diamond, Doukas, Dow, Dudley, Dutremble, D.; Dutremble, L.; Elias, Fenlason, Gould, Gowen, Gwadosky, Hall, Hickey, Higgins, Howe, Huber, Hughes, Jacques, P.; Jalbert, Joyce, Kane, Kany, Kelleher, Laffin, Lancaster, LaPlante, Lizotte, Lowe, MacEachern, Mahany, Marshall, Martin, A.; Masterton, Matthews, Maxwell, McHenry, McKean, McPherson, McSweeney, Michael, Mitchell, Morton, Nadeau, Nelson, M.; Norris, Paradis, Paul, Pearson, Prescott, Reeves, P.; Simon, Small, Soulas, Stover, Strout, Tarbell, Theriault, Tierney, Tuttle, Vincent, Violette, Vose, Wood, Wyman, The Speaker.

ABSENT—Bowden, Hobbins, Jacques, E.; McMahon.

PAIRED—Davis-Rolde.

Yes. 55; No. 90; Absent, 4; Paired, 2.

The SPEAKER: Fifty-five having voted in the affirmative and ninety in the negative, with

our being absent and two paired, the motion does not prevail.

Sent up for concurrence.

Divided Report

Majority Report of the Committee on Health and Institutional Services reporting "Ought to Pass" as amended by Committee Amendment "A" (H-332) on Bill "An Act to Establish a Marijuana Therapeutic Research Program" (H. P. 523) (L. D. 665)

Report was signed by the following members:

Mr. CARPENTER of Aroostook
— of the Senate.

Mr. CLOUTIER of South Portland

Mrs. PAYNE of Portland

Messrs. BRODEUR of Auburn

VINCENT of Portland

BRENERMAN of Portland

NORRIS of Brewer

— of the House.

Minority Report of the same Committee Reporting "Ought Not to Pass" on same Bill.

Report was signed by the following members:

Mrs. GILL of Cumberland

Mr. HICHENS of York

— of the Senate.

Mrs. PRESCOTT of Hampden

Mr. MATTHEWS of Caribou

Mrs. CURTIS of Milbridge

MacBRIDE of Presque Isle

— of the House.

Reports were read.

The SPEAKER: The Chair recognizes the gentleman from Hampden, Mrs. Prescott.

Mrs. PRESCOTT: Mr. Speaker, I move acceptance of the Minority "Ought Not to Pass" Report and would like to speak to my motion.

The SPEAKER: The gentleman from Hampden, Mrs. Prescott, moves that the Minority "Ought Not to Pass" Report be accepted.

The gentleman may proceed.

Mrs. PRESCOTT: Mr. Speaker, Ladies and Gentlemen of the House: I ask you today to support my motion on this bill, "ought not to pass". I would like you to take it out, this L. D. 665. I would like you to look at the title of the bill. It reads, "An Act to Establish a Marijuana Therapeutic Research Program." Somehow or other, the research has been left out of the bill. It is misleading, I think it is misnamed as far as the title is concerned, because any research program, as we all know, carefully looks at the facts after an investigation has been made, and there has been no investigative research done to determine the extent of the problems in Maine and to determine how many chemotherapy or glaucoma patients wish to have this legislation passed.

Marijuana treatment should first be used experimentally in research and then outside if it is warranted. It is too early to announce that we have a major breakthrough.

In any research program, we must have a place for the research participants to go. Maine has no research institute and we are not working with a teaching-type hospital anywhere in this proposed legislation. How, then, are we going to be calling it a research program?

The federal government now classifies marijuana as a Schedule 1 drug. Drugs in this category are severely restricted and are defined as having no currently accepted medical uses. These Scheduled 1 drugs are available for research only.

The bill, as you see it here before you today, would bypass those federal procedures and loosen the controls of what I term a very potent drug. Drugs are normally approved for clinical uses by the FDA. Only they have the expertise to be sure that this drug has been properly analyzed and is free of all impurities. The Department of Human Services does not have the ability to analyze this drug and, in some cases,

it could be and probably would be contraband to be assured that the patient is not going to be receiving an unsafe drug. The federal government would standardize the dosage; the Department of Human Services cannot do that.

I would like to tell you a little bit about what the bill will do. It will set up a program whereby we will recycle contraband—that is, marijuana that has been confiscated. That is only if they can't get it from the federal government. And the reason the bill is in is because they say they can't get it from the federal government, so we would be dealing with the drugs that have been confiscated.

Then it would allow the commissioner to obtain the contraband from the law enforcement agencies. Then, to go a little bit further, it would permit the commissioner to designate distribution centers whereby the drug could be dispensed. These distribution centers are supposed to be state pharmacies or private pharmacies. If you are talking about a state pharmacy, you would be talking about on the grounds of the state mental institutions or, perhaps, you are talking about the grounds of the prison. I am not sure where the state pharmacies are located; those are the only ones I am aware of.

One thing I am concerned about is the department's ability to look at the drug, to test the drug, and to be assured that this is the drug that the patient and the doctor should use. We all know that the quality is different, the ingredients are different.

We don't know under what conditions contraband is grown, we don't know what pesticides have been used, we don't know how much THC is enough or how much THC is too little for the patient. Then, to top it all off, we are going to be giving the patient and the doctor and the commission and the department and the participation review board all immunity from dispensing and dealing in any way with this drug. I cannot accept that blanket immunity.

We know that marijuana varies greatly in its potency, depending upon the part of the plant that is used and the conditions under which it was grown. The effect that is produced is different, it varies differently among person to person, and I don't know how the department is supposed to know what dosage each different type of individual would or should be using. I say that the use is too casual and it is unacceptable to me.

Now, the proponents of this bill will tell you that their intention is to use this drug only for chemotherapy or glaucoma patients, but I would like to call your attention to an amendment which is ready in case this bill does reach second reading, and the amendment is H-342, which, down at the bottom of the first page, adds "All other patients whose participation is warranted by medical evidence." This could be anyone the doctor could claim needs to use marijuana. It could be someone with a migraine headache, a backache, asthma, I don't know what. But do you know what? I am afraid we are being too casual.

Finally, I think you should look at the participation review board that is being established in this bill. It has three members, an eye doctor, a cancer doctor and a psychiatrist. There are no consumers serving on the board, no glaucoma or chemotherapy patients and no general practitioners.

What will happen is that the physician will come to the board, get his approval to obtain the contraband and the board may never see the doctor again. He doesn't even have to report back to the board and he doesn't have to be evaluated, and he has immunity from all of this.

I think that the bill is totally unnecessary, because right now, under current law, federal law, a physician can already apply for permission to use marijuana. All he has to do is go to the federal drug agencies, and there are three, and he can contract with the FDA for a quality

drug. This bill, I feel, can be summed up in one word, and then I will sit down—that word is "avoidance".

The SPEAKER: The Chair recognizes the gentleman from Harrison, Mr. Leighton.

Mr. LEIGHTON: Mr. Speaker, Ladies and Gentlemen of the House: I hope you don't get bored with me today, but I am not responsible for the scheduling.

This is my bill and I hope you don't go along with my good friend Representative Prescott. I hope you vote against her motion so that you can accept the Majority "Ought to Pass" Report.

Shortly after my election last fall, I got a call from my predecessor in office, Gail Tarr, whose husband, Charlie, was suffering from cancer and undergoing chemotherapy. She told me how marijuana could relieve nausea and vomiting in chemotherapy. She told me how chemotherapy patients sometimes literally vomited their guts out for days with no ability to eat. She told me that a number of states had passed laws permitting prescription of marijuana for chemotherapy patients and also for glaucoma patients. She asked me to file a bill so that Maine could have such a law.

Now, I am kind of a square. I have never smoked pot; I don't know what it looks like; I don't even know what it smells like. If you handed me some of it, I wouldn't know whether to smoke it or stick it in my ear, and I don't want any part of promoting its social use.

However, I decided that just because a drug is stigmatized by abuse in social use is no reason to ignore the good uses that it might be put to. Fire can burn our fingers, but fire also cooks our food and keeps us warm.

We managed to obtain copies of the laws that were passed in New Mexico, Florida, Louisiana and Illinois, and, incidentally, this year similar laws have been enacted by legislatures in West Virginia, Washington and Virginia, and an additional 25 other states are considering marijuana therapeutic legislation at this time.

We wanted our law to be simple, to create no large bureaucracy and to be at no cost to the taxpayers. It is pretty much patterned after the New Mexico law, with some slight changes that reflect the New Mexico experience. One of the New Mexico experiences was a difficulty in obtaining marijuana from the federal government and, for that reason, was written in the provision that confiscated marijuana, after being rid of any impurities, could be used.

Essentially, the law would establish a participation review board consisting of three physicians, an ophthalmologist, an oncologist and a psychiatrist, who would review practitioners for participation in the program and designate state and private pharmacies to participate in the program. There would be a \$25 application fee for practitioners that would finance the program.

Let me try to explain why state legislation is necessary: Theoretically, marijuana for medical research purposes is available in two ways. The federal license approach requires the cooperation of a physician who must apply for an Investigational New Drug application from the Food and Drug Administration. The second alternative is the passage of state legislation which legalizes access to marijuana through state regulated programs of research and medical treatment.

Under existing regulations, federal marijuana can only be released to the holder of an Investigational New Drug application. The IND is granted by the Food and Drug Administration.

The original intention of the IND was to exempt pharmaceutical companies from legal liabilities in interstate shipment of drugs not yet approved for marketing. The Food, Drug and Cosmetic Act prohibits the sale or interstate shipment of new drugs which have not demonstrated safety and efficacy. Yet, in order to test new drugs in controlled human ex-

perimentation, interstate drug shipment is needed. Thus, the IND serves a regulatory purpose, permitting interstate shipments and allowing the FDA to monitor New Drug developments.

Ordinarily, when a new drug is developed by a pharmaceutical company, only one IND is issued. The pharmaceutical company then becomes the sponsor of the new drug and contracts with various researchers throughout the country. These researchers become co-investigators and need not apply for an IND themselves. The pharmaceutical company, as sponsor, compiles the information collected by the co-investigators and uses that data to prove the drug's safety and efficacy to FDA.

In the United States today, the pharmaceutical industry is a multi-billion dollar enterprise. For an industry of this size, the IND process is not necessarily unreasonable nor overly complex. In the case of marijuana, however, there are several factors which complicate the IND process and retard marijuana's therapeutic development.

Marijuana is a plant, a natural substance. According to U.S. patent regulations, plants and all their natural components are unpatentable materials. Without patent protection no pharmaceutical company will invest the necessary capital to complete the FDA safety and efficacy requirements. Marijuana thus has no sponsor, and without pharmaceutical backing, chances are slim that any drug can pass the rigorous demands of FDA.

Without a pharmaceutical sponsor, each researcher using marijuana must apply for an IND. This subjects the researcher to more liabilities and paperwork than most care to obligate themselves to. In truth, the IND process applied to marijuana is unrealistic and overly complex.

Obviously, Maine physicians are not going through this complex application process to legally get marijuana and, yet, I've discovered and I am sure you all realize that Maine physicians are suggesting to chemotherapy patients that marijuana might be helpful, and I know chemotherapy parties that are using marijuana. Where do you suppose they are getting it? They are getting it on the street at exorbitant prices and with all kinds of dangerous impurities, and that is just what this bill is all about, to simply allow a state agency to obtain pure marijuana from the federal government for approved doctors to prescribe to only those patients who are undergoing cancer therapy or suffering from glaucoma and are in a life threatening or sense threatening situation and who are not responding to conventional treatment or who are suffering severe side effects even though conventional treatment is proving effective.

I thank you and I hope you vote against the pending motion.

The SPEAKER: The Chair recognizes the gentlewoman from Portland, Mrs. Payne.

Mrs. PAYNE: Mr. Speaker, Ladies and Gentlemen of the House: About 15 years ago, I attended a PTA meeting at the Deering High School in Portland of which the then chief of police announced that he was scrapping his planned talk and instead would tell us that marijuana had come to Portland. Many of us felt physically ill and my feelings towards social pot smoking are still the same.

This bill before us gives me no problems. This bill asks to put marijuana to good use, under careful control by both quality and disbursement. Applicants, both the patient and their physician are carefully screened and only carefully selected pharmacies can dispense the drugs.

There are many people undergoing chemotherapy to whom this drug would spell blessed relief and give them the incentive to continue the treatment. They must now commit an illegal act and must deal with criminals in order to get this drug. Is it fair to put that choice to

them?

Some people argue that this bill will be a foot in the door for marijuana to become legalized and readily available. It is readily available now and we all know it. The foot in the door is nonsense. I will bet that there is hardly anyone in this room who has not, at some time in their life, taken paragoric. We all had tummy aches when we were little, we had earaches and our mothers gave us paragoric. We have had codeine in cough medicines, we have had morphine, and every single one of these is derived from a far more deadly drug, opium, but it is legally controlled for medicinal purposes.

Physicians applying now for marijuana for their patients sometimes have to wait many months and it may be too late, the patient may no longer be around.

Think this over carefully before you vote. Would you want it available for your family or for yourself if tragically you needed it? Wouldn't you want it to be legal for you to receive it, prescribed by your doctor and dispensed by the state? Please vote against the motion for "Ought Not to Pass".

The SPEAKER: The Chair recognizes the gentleman from Lewiston, Mr. Jalbert.

Mr. JALBERT: Mr. Speaker and Members of the House: First, I would like to make a motion that this bill and all its accompanying papers be indefinitely postponed and when the vote is taken, I would request the yeas and nays.

I was hoping the day would never come when I would make myself somewhat of a guinea pig on the floor of this House concerning my sicknesses.

In the last 12 years, unfortunately, I have spent 437 nights in the hospital. I had lung cancer at the age of 57, believe it or not: appendectomy; Herpes Zoster, which is painful enough to drive you to suicide. One doctor visited me and told me he came to visit me only because he wanted to ask me some questions about my illness. He is an excellent doctor from Portland and he told me that a patient of his, two days previously, had committed suicide. No amount of drugs will stop the pain. I have arthritis and paralysis of the spine; I have had a coronary, which has led me to angina; I was given bone marrow, which started me off on the way to leukemia, where my whites were swallowing my reds, and since that time, my whites are not only swallowing my red corpuscles but my whites are malignant.

Since that time, I was operated on and I knew the moment I woke up in my room the result of the operation as compared to one or two that lasted 10, 11 and 12 hours when this one lasted only one hour and a half. I knew what the results were and I got the results. I do have leukemia. Let me tell you about leukemia. Leukemia means that for 12 to 13 days you grab two pillows, go into the bathroom, lie down and wait, and then it comes like a flood. All you do is use the right or left hand, lie down again and wait and it comes. I am going to stand here and have somebody tell me or you that I don't know anything about marijuana — if somebody gave me a cigarette or a butt, I wouldn't know whether or not to stick it in my ear — yet, he would ask us to vote for this bill.

Somebody else will say, talk about pure marijuana — who is to decide what pure marijuana is? Somebody will say that a good, selected pharmacy will decide to dole out the marijuana dosage.

As I understand it from the good lady, Mrs. Prescott, the three on the board would be a cancer doctor, a psychiatrist and an eye doctor. I would like to know just what a psychiatrist and an eye doctor has to do with cancer — I forgot to mention that I have a touch of glaucoma myself — that comes with old age and I am getting there fast. I am going to stick to the one issue, marijuana.

I want to tell you just how much research they have done on it and how far they are and

how backwards they are.

God has made it possible for me to have been able to avail myself of probably the best cancer men in the world. I have discussed this with them. I know better than anyone else, with the unhappy and bad winter that I have had. I know that I have stood here when I could well be somewhere else. I know that I haven't been here, but I said I would be here in 25 or 30 minutes if I was needed.

Some three weeks ago, I was on chemotherapy. I got home from a meeting of the Appropriations Committee and come to find out, I showed a fever of 99 — minor — went to bed and in an hour, 102; in a half hour, ambulance, hospital, with an infection in my bronchial tubes. If they had continued then with chemotherapy, it could have well killed me. What would have happened to me if I had been given a dosage of marijuana on top of that?

Who is to decide what pure marijuana is? Who knows what pure marijuana is? I would like to find that individual. It could very well be growing out in your backyard or else it could be on the high seas now waiting for a younger, smaller ship to lug it in here and whose hands it winds up into and through whose hands it goes, lord only knows.

I knew the former Representative from Bridgton, Mrs. Tarr. I talked to her husband, I talked to her, I have talked to other people in this House whose spouses have had cancer. I chase people who have cancer. It is like being an alcoholic. I call these people at night and people call me with their problems and I call them with mine. The word 'marijuana' makes me cringe anyway because it was only about ten years ago that I put a bill in that anyone caught selling marijuana would be thrown in the can where they belong.

I wasn't elected to the legislature to practice medicine and I have been told by experts to let them do their thing and for me to do mine.

This bill is not only a bad bill, this is the most dangerous piece of legislation that I have ever seen come across my desk since I have been a member of this legislature in 1945.

No one knows the various types of cancer, no one knows what they do but, believe me, the individual that is on chemotherapy knows. The horrible pain and suffering that you go through is indescribable and I want to tell you what I think of it. I had a consultation with my number one cancer specialist and others and my words were these: unless a different method is brought about to treat me as far as chemotherapy is concerned, I want no more of it. The very next morning at the hospital, the doctor that many of you have heard me mention here who first operated on me came to visit me and said, "Louie, if you ever make that statement again, I want to know about it before you do. If you stop chemotherapy, you are dead in 30 days." Those are the words of a man that I have known, to grow affectionately as God on earth, who saved my life on three distinct and separate occasions.

I can well remember when I first came back here a year ago, and I think probably I could have held all the hair I had in my head right in my hand. Then all at once my hair grew back, started to curl. I start to lose it and it came back again. I see my friend on my left laughing. I am not going to say that somebody here might have been the cause of it. Anybody whose hair that wouldn't drop off or wouldn't turn gray after spending the winter here, there is something wrong with them anyway.

I have respect for the gentleman from Harrison, Mr. Leighton. I have listened to him very intently. He is a man who says what he believes in. He is a man whom I know, and I have done a little checking, he is a man of great integrity. In this particular instance, I respectfully take issue with him and anybody else who signed this report. The fact that somebody signs a report or the fact that I agree or disagree with him, doesn't have anything at all to do with my

personal feelings.

I have got to protect myself here today, if my constituents will excuse me for a couple of minutes, that is what I am doing. I am on chemotherapy. I am going to be on chemotherapy. I want no part of lousy marijuana tangled up with me or anybody else. All at once, we come up with a deal like this which, in my opinion, truly and honestly and respectfully reeks to high heaven.

I never heard, until this bill came up about the uses of marijuana. I know that there are those that say it has done some good. I haven't had a person come up to me this morning and say you know, this is good because after you take it, when you are through with chemotherapy, then you don't have nausea. In the first place, when you are through with chemotherapy, you don't have nausea, you have a let down feeling for two or three days. This is one time when I think maybe I might know what I am talking about. I got hit with it right between the eyes and when I got it, I was stunned. I am going to do everything in God's world, on God's earth if this bill should pass to see that this bill never becomes a law.

The SPEAKER: The Chair recognizes the gentleman from Livermore Falls, Mr. Brown.

Mr. BROWN: Mr. Speaker, Ladies and Gentlemen of the House: The gentleman who spoke just before me, Mr. Jalbert of Lewiston, is a gentleman that all of us have a great deal of respect for in this body. I don't think there is one of us that doesn't realize the suffering, the torment that he has gone through and the courage that he has exhibited. But, Mr. Speaker and Ladies and Gentlemen, I think, throughout the course of his remarks, the old adage that one man's medicine is another man's poison came through very clearly. There are few of us who have not felt the personal sorrow that occurs when we have to watch a loved one go through the agonizing side effects of chemotherapy associated with cancer.

My own father-in-law, former Representative Carl Kelley, who some of you may remember, I am sure that the gentleman from Lewiston does remember, and Mr. Kelley spoke very fondly of the gentleman from Lewiston, but my father-in-law went through those agonizing side effects and it was a very sad kind of thing to watch. I know in his situation that any port in the storm, when one reaches that point in his life, would prevail.

I was extremely pleased to be a cosponsor of this bill with the gentleman from Harrison, Mr. Leighton. I am very pleased to sponsor or cosponsor any type of legislation which I feel to be progressive kind of legislation.

Just to reiterate, please note that this bill refers primarily to cancer chemotherapy patients and glaucoma patients who are in a life-threatening or sense-threatening situation.

I have listened carefully to the debate and am amazed at the arguments put forth by the opponents.

If these arguments were valid, they would apply to all drugs, most tranquilizers and other necessary prescription drugs. Contrary to what the opponents may tell you, passage of this bill will not increase the street usage of marijuana any more than legalized codeine finds its way to the street from your local doctor's office or from the hospital shelves. Ladies and gentlemen, this bill is one that shows reason and compassion. It is compassion for those who suffer from the dreaded disease of cancer and glaucoma. It is obviously not a major breakthrough or a cure-all. It is simply a method of greatly reducing the suffering of those who are affected.

I ask you to join together in a piece of legislation that serves to, indeed, help those who are in need. I urge you to vote no on the motion for indefinite postponement.

The SPEAKER: The Chair recognizes the gentlewoman from Presque Isle, Mrs. MacBride.

Mrs. MacBRIDE: Mr. Speaker, Ladies and Gentlemen of the House: I signed the "Ought Not to Pass" report on this bill for a number of reasons. Most of those reasons are based on a personal experience in my own family. From that experience, I would have done anything in the world that was constructive that would have given relief to that person involved. However, after listening to the hearing and the testimony that was presented on that day, I felt that there are too few facts known as yet. Before any drug is prescribed, we should know a little bit more about it. I feel that too little has been determined on the side effects of marijuana, and we all know the problems that can result from side effects.

I feel, too, that smoking of any kind is habit forming, as we all know. Could not a cancer patient have a remission from his cancer only to find that he was dependent on marijuana. I think that he has enough problems without having to worry about that. Furthermore, the level of intoxication from marijuana has not been determined yet. I don't believe there are any tests for that such as you would have with the breath test on alcohol. A cancer patient on chemotherapy, once the initial dreadful stages of that have passed, could be driving a car, what could he do to himself and what could he do to someone else?

Lastly, I do feel this is a further step in legalizing marijuana for everyone. Our youth today are having problems enough as it is without us further complicating. Ladies and Gentlemen, I do hope you vote for the indefinite postponement of this bill.

The SPEAKER: The Chair recognizes the gentleman from Portland, Mr. Joyce.

Mr. JOYCE: Mr. Speaker, Ladies and Gentlemen of the House: I think now we should look at this bill and see truly how it is. When I first read the bill, I said, it is fatal. There is no fiscal note on the bill, because in my way of reasoning, I felt there should be a fiscal note of \$150,000 for the sole purpose of buying those white canes, when everybody claims they have glaucoma, so they can get on the weed.

But today, instead of raising that issue, I love the State of Maine and you good people. I know, love the State of Maine. I want to take you today on a little journey. Let's take a trip up to Lynchville. Now, if you don't know where Lynchville is, it is down in Albany Township, over near Norway. Now I would like you to stop there because Maine's famous sign posts is in Lynchville, it is at the junction of 5 and 35. That is where we find the sign that will say Norway, 14 miles; Paris, 15 miles; Denmark, 23 miles; Naples, Sweden, Poland, Mexico, Peru and China. What a beautiful token for the State of Maine. I now am concerned that that sign might not survive with bills like the one that is before you now. I can vision here in Augusta or up near the valley or down in the Gold Coast of York County, I can vision that new sign put there by the Department of Transportation, how would that sign read? Let me tell you: Cannabis Cove, 14 miles; Pot Mountain, 34 miles; Euphoric Islands, 72 miles; Hashish Heights, 17 miles; Marijuana Lake, 37 miles; Acapulco Gold Coast, 41 miles; Mary Jane Lane, 8 miles.

Yes, over the last three sessions, my friends, the beloved apostles of pot, have tried and they are interested in this one, they are interested in making Maine the pot capital of the world. I said that three terms ago here and since then, you people know what happened. Those boats along the Maine coast, that money that was spread through here, it didn't take long, but we don't want that. What do we want for Maine? I think what our people, what you and I deserve for Maine, is what Andrew Wyeth gave to us. You recall that picture of the farmhouse on the hill and Christina, that cripple girl was crawling up the hill, yes, "Christina's World." Do we want, in a few years, to have that work redone by a local artist and between Christina and that

farmhouse, do we want that hill laden with pot, marijuana or anyone of the 254 names that marijuana is known by?

Yes, I read that amendment today and I am sure we have friends here who would volunteer to grow the stuff for them. Yes, we have them in front of me, in back of me and beside me. They want to recycle pot. Well, you know, I told you before, the most convincing looking substitute for marijuana is dried out horse manure when you put it in a plastic sandwich bag. They are going to recycle that. Hay — should be the Wizard of Oz.

Yes, I want for you people and for myself, for your people back home and for my people, I want a good State of Maine. I don't want someone to stop me on the street and ask me how many miles to Cannabis Cove. I urge that you vote to indefinitely postpone this bill and all its accompanying papers.

The SPEAKER: The Chair recognizes the gentleman from Portland, Mr. Brannigan.

Mr. BRANNIGAN: Mr. Speaker, Ladies and Gentlemen of the House: We certainly appreciate, indeed, at times the humor that has just been given to us by my fellow representative from Portland. However, this is a very serious matter, as other members of this House have brought to us their own personal experiences and the experiences of others.

I was glad to be a cosponsor of this Bill. I, both in my prior capacity and in my present capacity in working in the area of mental health and working in the pastoral area, have been very involved with those who have been ill, those who have suffered both the loss of their sight and the loss of their physical functioning due to cancer. I also was someone who knew Gail Tarr well as a community leader where I worked in the past. For these reasons, I definitely wish to be a supporter of this bill as a cosponsor and as a speaker. I urge you, ladies and gentlemen, to take this bill very seriously and to assist those who are in the throes of terrible human suffering.

The SPEAKER: The Chair recognizes the gentleman from Harrison, Mr. Leighton.

Mr. LEIGHTON: Mr. Speaker, Ladies and Gentlemen of the House: I understand the concerns that have been expressed here; these were my same concerns.

Again, I don't want to promote the social use of marijuana. I have here in front of me a very lengthy report that had to be submitted by the Health and Environment Department of the State of New Mexico to the Governor in the 34th Legislature on the anniversary of their first year involved in their program. This is very revealing. First of all, it took them almost a year to get the necessary approvals from the federal government. At this point, the federal government has only approved the chemotherapy portion of the bill. The federal government has also laid down very strict reporting requirements so they can develop the statistics that we are talking about.

So far, there have been 12 applicants in the course of a year. 12 applicants of whom six have been accepted for the program. So, when you think in terms of hundreds and hundreds of people out on the street getting marijuana, let's take a look at New Mexico's experience. It is all summed up here. I would read it to you but it would take forever and the debate has probably already gone too long. Their experience has been very good, it has been very conservative and very constructive.

The idea of there being no nausea and vomiting associated with chemotherapy, my good Lord, I hope you don't believe that. There are people that go as long as two weeks continuously vomiting, with no way of eating.

In response to my good friend Representative MacBride's concerns about side effects, these are very proper concerns outside of the area that we are talking about. A chemotherapy patient isn't really too concerned with side effects that might develop 20 years down the

road, he is concerned about his horrible suffering.

Again, I urge your support of the bill.

The SPEAKER: The Chair recognizes the gentleman from Lewiston, Mr. Jalbert.

Mr. JALBERT: Mr. Speaker, Ladies and Gentlemen of the House: The gentleman from Harrison, Mr. Leighton, talks about that, please don't think that you don't have any nausea with chemotherapy, of course you do. I said, and I didn't hear anybody else say anything any differently, that the nausea leaves you after you get through with the period of chemotherapy. When you get through with it, sometimes it is for two weeks or sometimes it is for three weeks, sometimes five weeks, sometimes four weeks, at the most six weeks. I am saying, after you get through with it, you don't need it.

I think the argument that Mrs. MacBride used is a very good one. You can seriously, very well have some very bad marijuana. I want to know that the side effects of that would be. When you go to a good hospital, and they are all good hospitals, they take a look at your name, your number and everything else before they give you any drugs. I am told to take four different tablets, I have two of them right here in my pocket that I use for certain types of pain that I have. I don't want to take them because they are a drug.

Now, so far as the gentleman from Livermore Falls, Mr. Brown, I knew Carl Kelley. I knew him as a close, personal friend. I felt the same way about him as he did about me. I will guarantee anyone one thing right now, I question whether or not he would have subjected himself to that. I have talked to him. I have known him probably as long or longer than the gentleman from Livermore Falls, Mr. Brown, knew him.

I am not particularly interested in getting myself tangled up with New Mexico. If you want to check the record of 60 Minutes a couple of weeks ago, you would find out what the traffic in marijuana is coming through New Mexico. I can guarantee you one thing right now—we could pass the Homestead Act and we could pass a lot of things if we had a little cut of that take.

We are talking about people getting up and saying "as one who works with patients." We are talking now about some of those who have this dreadful disease. If you tried it, you might not like it.

I repeat myself. I am not talking for my constituents now, I am speaking for myself. I am not going to get on my knees, but if I had to, I would to ask you to vote against this measure.

The SPEAKER: The Chair recognizes the gentleman from Milbridge, Mrs. Curtis.

Mrs. CURTIS: Mr. Speaker, Ladies and Gentlemen of the House: As a member of a committee and a signer of the "ought not to pass" report, I was torn two ways in deciding which way to sign and faced with a difficult decision. On the one hand, should I vote to deny those people who might possibly benefit from this drug or, on the other hand, should I vote for a dangerous substance that after all is said and done is still a drug with so many unanswered questions about it. After weighing all the evidence I heard, I decided to sign the "ought not to pass" report.

Several medical practitioners have expressed their concern about using marijuana in this way. There are other medications that are effective. I think that all too often we jump into situations and vote for things such as using this drug without thinking about the consequences or effects.

I urge you to vote to indefinitely postpone this bill.

The SPEAKER: The Chair recognizes the gentleman from Auburn, Mr. Hughes.

Mr. HUGHES: Mr. Speaker and Members of the House: I am not going to talk much because we have had a long, and I think useful, debate

on this subject, but I simply recall to you the words of the gentleman from Lewiston, Mr. Jalbert, who said, "I wasn't elected to the legislature to practice medicine." I think that is what some of this debate has been talking about.

Is marijuana a good treatment for a specific patient? Well, for some it is and for some it isn't. The evidence has been clear that in some cases of cancer therapy patients and some cases of glaucoma, they do respond to marijuana treatment and, indeed, in some cases they respond to only marijuana treatment. That is a fact and it is an undisputed fact at this point that has caused two federal courts to order the government to provide marijuana for patients who were responding to no other treatment. The courts said in its basic decision that the government simply has no right to deny life and sight sustaining drugs to people who have a need for them. I think that is what is before us today.

I think if you have heard the very eloquent testimony of Mr. Jalbert and others about the terrible side effects of this cancer therapy, then I think you ought to consider that if there is one doctor out there who feels that he has one patient for whom this might be the only treatment either to save his sight in the case of glaucoma, or to allow him to keep meals down in the case of cancer therapy, this legislature ought not to practice medicine and deny to that person the chance to get that kind of treatment.

I ask you to vote indefinite postponement of this bill so we can then get to the motion to accept the Majority "Ought to Pass" Report on this legislation.

Mr. Jalbert of Lewiston was granted permission to speak a third time.

Mr. JALBERT: Mr. Speaker and Members of the House: I am sorry to get up, but when I hear the statement that if Mr. Jalbert had heard about the terrible side effects of chemotherapy, I might think differently—what in heck have I got to hear about it for—I have it. Can't you get that through your head?

The SPEAKER: The Chair recognizes the gentleman from Brewer, Mr. Norris.

Mr. NORRIS: Mr. Speaker, Ladies and Gentlemen of the House: I will be as brief as I can. I heard the testimony on this bill and as you saw, I signed the "ought to pass" report. I had reservations because, frankly, to me this is like writing a prescription to buy beer. Marijuana is in our society and it is readily available. Unfortunately, there are some elderly people, some middle age people, who will not use it on the advice of their physicians, and there are physicians in this state that are prescribing it for these two uses. They will not do it as long as it is an illegal substance. So, given the fact that it is readily available to the people who want to use it illegally, I voted for this legislation.

As far as the impurities go, it is anything that would be prescribed would go to the state laboratory, and the chemist assured that they could make sure that it was free from any pesticides or poisons that might be transmitted that way.

I would close in reading, because we did try to type it up as tightly as we could so that there would be no question of it being available for any other use, and the prescription reads: "The practitioner approved for the participation in the program may prescribe marijuana to only these patients who are undergoing cancer, chemotherapy or suffering from glaucoma and are in a life-threatening or sense-threatening situation" and, I don't think anyone thought this one out, who are not responding to conventional treatment or who are suffering severe side effects even though conventional treatment is proving effective.

So if you want to give some of these older folks that do have serious side effects, and it was testified, we had one person who came all the way from Washington to testify that, indeed, there are cases where this does alleviate some of the nausea, so I would hope that

you would vote against indefinite postponement.

The SPEAKER: A roll call has been requested. For the Chair to order a roll call, it must have the expressed desire of one-fifth of the members present and voting. All those desiring a roll call vote will vote yes; those opposed will vote no.

A vote of the House was taken, and more than one-fifth of the members present having expressed a desire for a roll call, a roll call was ordered.

The SPEAKER: The pending question is on the motion of the gentleman from Lewiston, Mr. Jalbert, that this Bill and all its accompanying papers be indefinitely postponed. All those in favor will vote yes; those opposed will vote no.

The Chair recognizes the gentlewoman from Hampden, Mrs. Prescott.

Mrs. PRESCOTT: Mr. Speaker, I request permission to pair my vote with the gentleman from York, Mr. Rolde. If he were here, he would be voting no; if I were voting, I would be voting yes.

ROLL CALL

YEA—Austin, Blodgett, Bordeaux, Brown, K. C.; Call, Carrier, Carroll, Carter, D.; Carter, F.; Curtis, Diamond, Dutremble, D.; Dutremble, L.; Elias, Fenlason, Fillmore, Gillis, Gwadosky, Hickey, Hunter, Jalbert, Joyce, Kelleher, Laffin, LaPlante, Lougee, MacBride, Mahany, Martin, A.; Masterman, Matthews, Maxwell, McHenry, McSweeney, Nadeau, Nelson, A.; Nelson, N.; Paul, Pearson, Silsby, Simon, Smith, Sprowl, Stover, Strout, Theriault, Tierney, Torrey, Twitchell, Vose, Whittemore, Wood, Wyman.

NAY—Aloupis, Bachrach, Baker, Barry, Beaulieu, Benoit, Berry, Berube, Birt, Boudreau, Brannigan, Brenerman, Brodeur, Brown, A.; Brown, D.; Brown, K. L. Bunker, Chonko, Churchill, Cloutier, Conary, Connolly, Cox, Cunningham, Damren, Davies, Davis, Dellert, Dexter, Doukas, Dow, Drinkwater, Dudley, Fowlie, Garsoe, Gavett, Gould, Gowen, Gray, Hall, Hanson, Higgins, Hobbins, Howe, Huber, Hughes, Hutchings, Immonen, Jackson, Jacques, P.; Kane, Kany, Kiesman, Leighton, Leonard, Lewis, Lizotte, Locke, Lowe, Lund, MacEachern, Marshall, Masterton, McKean, McPherson, Michael, Mitchell, Morton, Nelson, M.; Norris, Paradis, Payne, Peterson, Post, Reeves, J.; Reeves, P.; Rollins, Roope, Sewall, Sherburne, Small, Soulas, Stetson, Studley, Tarbell, Tozier, Vincent, Violette, Wentworth, The Speaker.

ABSENT—Bowden, Jacques, E.; Lancaster, McMahon, Peltier, Tuttle.

PAIRED—Prescott-Rolde.
Yes, 53; No, 90; Absent, 6; Paired, 2.

The SPEAKER: Fifty-three having voted in the affirmative and ninety in the negative, with six being absent and two paired, the motion does not prevail.

The question now before the House is on the motion of the gentlewoman from Hampden, Mrs. Prescott, that the minority "Ought Not to Pass" Report be accepted. All those in favor will vote yes; those opposed will vote no.

A vote of the House was taken. Whereupon, Mrs. Prescott of Hampden requested a roll call vote.

The SPEAKER: For the Chair to order a roll call, it must have the expressed desire of one fifth of the members present and voting. All those desiring a roll call vote will vote yes; those opposed will vote no.

A vote of the House was taken, and more than one fifth of the members present having expressed a desire for a roll call, a roll call was ordered.

The SPEAKER: The pending question is on the motion of the gentleman from Hampden, Mrs. Prescott, that the minority "Ought Not to Pass" Report be accepted. All those in favor will vote yes; those opposed will vote no.

ROLL CALL

YEA—Austin, Blodgett, Bordeaux, Brown, K. C.; Call, Carrier, Carroll, Carter, D.; Carter, F.; Curtis, Diamond, Dutremble, D.;

Dutremble, L.; Elias, Fenlason, Fillmore, Gillis, Gwadosky, Hickey, Hunter, Jalbert, Joyce, Kelleher, Laffin, LaPlante, Lougee, MacBride, Mahany, Martin, A.; Masterman, Matthews, Maxwell, McHenry, McSweeney, Nadeau, Nelson, A.; Nelson, N.; Paul, Pearson, Prescott, Silsby, Simon, Smith, Sprowl, Stover, Theriault, Tierney, Torrey, Tuttle, Twitchell, Vose, Whittemore, Wood, Wyman.

NAY—Aloupis, Bachrach, Baker, Barry, Beaulieu, Benoit, Berry, Berube, Birt, Boudreau, Brannigan, Brenerman, Brodeur, Brown, A.; Brown, D.; Brown, K. L.; Bunker, Chonko, Churchill, Cloutier, Conary, Connolly, Cox, Cunningham, Davies, Davis, Dellert, Dexter, Doukas, Dow, Drinkwater, Dudley, Fowlie, Garsoe, Gavett, Gould, Gowen, Gray, Hall, Hanson, Higgins, Hobbins, Howe, Huber, Hughes, Hutchings, Immonen, Jackson, Jacques, P.; Kane, Kany, Kiesman, Leighton, Leonard, Lewis, Lizotte, Locke, Lowe, Lund, MacEachern, Marshall, Masterton, McKean, McPherson, Michael, Mitchell, Morton, Nelson, M.; Norris, Paradis, Payne, Peterson, Post, Reeves, J.; Reeves, P.; Rollins, Roope, Sewall, Sherburne, Small, Soulas, Stetson, Strout, Studley, Tozier, Vincent, Violette, Wentworth, Mr. Speaker.

ABSENT—Bowden, Damren, Jacques, E.; Lancaster, McMahon, Peltier, Rolde, Tarbell. Yes, 54; No, 89; Absent, 8.

The SPEAKER: Fifty-four having voted in the affirmative and eighty-nine in the negative, with eight being absent, the motion does not prevail.

Thereupon, the Majority "Ought to Pass" Report was accepted and the Bill read once. Committee Amendment "A" (H-332) was read by the Clerk and adopted and the Bill assigned for second reading tomorrow.

Divided Report

Report "A" of the Committee on Election Laws reporting "Ought Not to Pass" on Bill "An Act to Make the Attorney General's Explanation of Proposed Constitutional Amendments and Statewide Referenda more Available to the Voters" (H. P. 183) (L. D. 235)

Report was signed by the following Members:

- Mr. PIERCE of Kennebec — of the Senate.
- Mr. GOULD of Old Town
- Mrs. SEWALL of Newcastle
- Messrs. BERRY of Buxton
- STUDLEY of Berwick
- Mrs. WENTWORTH of Wells — of the House.

Report "B" of the same Committee reporting "Ought to Pass" as amended by Committee Amendment "A" (H-336) on same Bill.

Report was signed by the following members:

- Mr. FARLEY of York — of the Senate.
- Ms. SMALL of Bath
- Messrs. NADEAU of Lewiston
- HALL of Sangerville
- TIERNEY of Lisbon
- Ms. BENOIT of South Portland — of the House.

Reports were read. On motion of Ms. Benoit of South Portland, Report B was accepted and the Bill read once. Committee Amendment "A" (H-336) was read by the Clerk and adopted and the Bill assigned for second reading tomorrow.

Consent Calendar

First Day

In accordance with House Rule 49, the following items appeared on the Consent Calendar for the First Day:

- (H. P. 684) (L. D. 864) Bill "An Act Appropriating Funds for Promotion of Direct Marketing of Agricultural Commodities" Committee on Agriculture reporting "Ought to Pass"
- (H. P. 157) (L. D. 185) Bill "An Act Relating

to Juvenile Clients of the Protective Care Division of the Department of Human Services" Committee on Health and Institutional Services reporting "Ought to Pass"

(H. P. 1017) (L. D. 1250) Bill "An Act to Prohibit the Licensing of Deceptively Similar Names for Firms or Corporations of Agents, Brokers, Adjusters or Consultants under the Insurance Law" Committee on Business Legislation reporting "Ought to Pass"

(H. P. 969) (L. D. 1207) Bill "An Act to Extend a Barber Shop License 60 days upon Death of the Barber to Allow Transitional Time for Getting a new License" Committee on Business Legislation reporting "Ought to Pass"

(H. P. 1243) (L. D. 1487) Bill "An Act to Regulate State Liquor Stores and Agencies" Committee on Legal Affairs reporting "Ought to Pass" as amended by Committee Amendment "A" (H-338)

(H. P. 545) (L. D. 676) Bill "An Act to Clarify Certain Provisions Relating to the Statistical Reporting of Abortions. Committee on Judiciary reporting "Ought to Pass" as amended by Committee Amendment "A" (H-339)

(H. P. 1027) (L. D. 1258) Bill "An Act to Revise the Fees for Service of Civil Process" Committee on Judiciary reporting "Ought to Pass" as amended by Committee Amendment "A" (H-340)

(H. P. 668) (L. D. 828) Bill "An Act to Facilitate the Enforcement of Child Support Obligations and Make Statutory Changes Consistent with the Administrative Procedure Act" Committee on Judiciary reporting "Ought to Pass" as amended by Committee Amendment "A" (H-341)

(H. P. 1210) (L. D. 1542) Bill "An Act Enabling the State to Enter into an Interstate Compact on the Emotionally Disturbed Offender" Committee on Judiciary reporting "Ought to Pass"

(H. P. 595) (L. D. 739) Bill "An Act to Require that Certain Notices of Termination of Tenancy Contain Minimum Information" Committee on Judiciary reporting "Ought to Pass" No objections being noted, the above items were ordered to appear on the Consent Calendar of May 8, under listing of Second Day.

(H. P. 577) (L. D. 725) Bill "An Act Relating to Permits for Contract Carriers" Committee on Public Utilities reporting "Ought to Pass" as amended by Committee Amendment "A" (H-347)

On the objection of Mr. Davies of Orono, was removed from the Consent Calendar.

Thereupon, the Report was accepted and the Bill read once. Committee Amendment "A" (H-347) was read by the Clerk and adopted and the Bill assigned for second reading tomorrow.

(H. P. 811) (L. D. 1067) Bill "An Act to Amend the Judicial Retirement System" Committee on Aging, Retirement and Veterans reporting "Ought to Pass"

(H. P. 1077) (L. D. 1330) Bill "An Act to Improve Private Remedies for Violation of the Antitrust Laws" Committee on Business Legislation reporting "Ought to Pass" as amended by Committee Amendment "A" (H-343)

(H. P. 1252) (L. D. 1522) Bill "An Act to Protect the Retirement Benefits of Employees and Former Employees of the Greater Portland Public Development Commission" Committee on Aging, Retirement and Veterans reporting "Ought to Pass" as amended by Committee Amendment "A" (H-348)

(S. P. 272) (L. D. 842) Bill "An Act to Amend the Form of Election Ballots to Omit the Secretary of State's Name under Certain Conditions" Committee on Election Laws reporting "Ought to Pass" as amended by Committee Amendment "A" (S-133)

No objections being noted, the above items were ordered to appear on the Consent Calendar of May 8, under listing of Second Day.