



Isle of Man
Government

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Medicinal Cannabis Consultation Findings

DEPARTMENT OF HEALTH AND SOCIAL CARE

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Contents

Introduction	5
1. Consultation exercise	7
1.1 Responses received	7
2. Consultation results	8
2.1 Respondents' demographics	8
2.2 Which approach to medicinal cannabis would you support for the Isle of Man?	8
2.3 If you would like to propose an alternative framework, include evidence to support proposal?	9
2.4 Do you support this approach - restricting access to adults over 18 years?	10
2.5 Would you support the cultivation and manufacture of medicinal cannabis products in the Isle of Man, subject to a suitable regulatory framework?	10
3. Analysis of Qualitative Information	11
3.1. Proposals for an alternative framework to the options suggested in question seven	11
3.2 Additional comments/proposals concerning the use of medicinal cannabis in children and young people - question nine	12
3.3 Medicinal cannabis, further comments to be taken into account	14
4. Qualitative comments	16
4.1 Alternative framework	16
4.2 Additional comments/proposals concerning the use of medicinal cannabis in children/young people	18
4.3 Further comments	21
5. Summary	28
Acronyms and abbreviations	29

Introduction

The Department of Health and Social Care (DHSC) consulted Isle of Man residents on the medicinal use of cannabis.

Medicinal cannabis is cannabis consumed with the objective of reducing symptoms of a medical condition. This differs from recreational use where the purpose is to achieve a sensation of euphoria or relaxation, often referred to as a 'high'.

On 1 November 2018, the scheduling of cannabis based medicinal products under the Misuse of Drugs Legislation changed.

As a result of the application of earlier legislation in the Isle of Man, the Statutory Instrument that made this change in England, Wales and Scotland also applied in the Isle of Man.

The law in the United Kingdom (UK) changed to allow medicinal cannabis to be used in very limited circumstances and this change affected our law too.

In the Isle of Man, we have the opportunity to consider whether we want our approach to medicinal cannabis to remain in line with the UK, or whether we take an alternative approach.



1. Consultation exercise

The consultation was open to the public for a period of six weeks from 6 February 2019 to 20 March 2019.

The consultation was publicised by way of a news release and press launch where all local media organisations were invited to attend. This resulted in an excellent response including radio interviews, audio and videos on the media's websites along with posts on social media.

The consultation documents were made available online on the Isle of Man Government Consultation Hub, links on social media, along with paper copies available in public places such as the Libraries and Local Authority offices throughout the Island.

The paperwork for the consultation included an evidence based paper, a questionnaire with an introductory section and four specific questions on approaches, frameworks and cultivation of medicinal cannabis in the Isle of Man. Respondents also had the opportunity to raise any issues or concerns in relation to the use of medicinal cannabis products in the Isle of Man.

1.1 Responses received

As we made it clear we were seeking views of local residents we have only analysed Isle of Man responses.

The number of responses over the course of the consultation period was as follows:



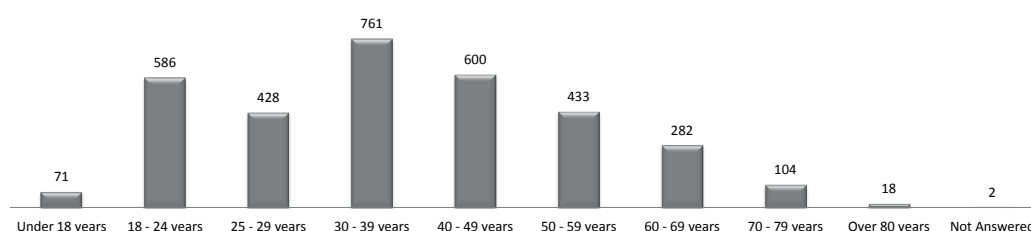
- A check was carried out to find evidence of respondents completing the survey multiple times and submissions from non-Isle of Man postcodes. A total of **39 responses** were removed from the analysis process.
- A total of **2,843 respondents gave permission** for their responses to be published on the Consultation Hub and **442 did not** want their responses published.

2. Consultation results

2.1 Respondents' demographics

The following chart shows the number of responses received across all age groups.

Figure 1: Age demographics of respondents

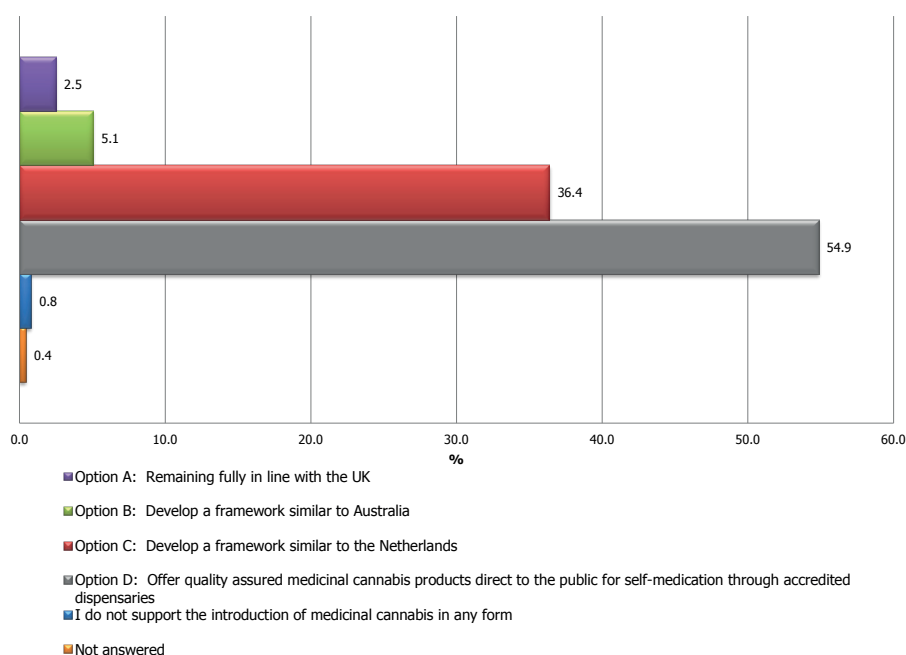


Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

2.2 Which approach to medicinal cannabis would you support for the Isle of Man?

When asked which approaches you would support for the Isle of Man, the majority of respondents indicated that options C and D were the preferred choices. With 54.9% of respondents indicating option D and 36.4% specifying option C.

Figure 2: Options favoured as approaches to medicinal cannabis for the Isle of Man

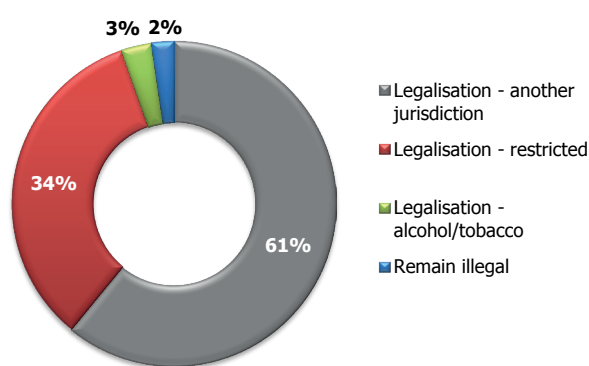


Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

2.3 If you would like to propose an alternative framework, include evidence to support proposal?

The majority of comments received in relation to proposing an alternative framework were around legalisation following other jurisdictions and restricted legalisation. A minority of respondents indicated that legalisation should be the same as alcohol and tobacco. Similarly, a minority specified that cannabis should remain illegal.

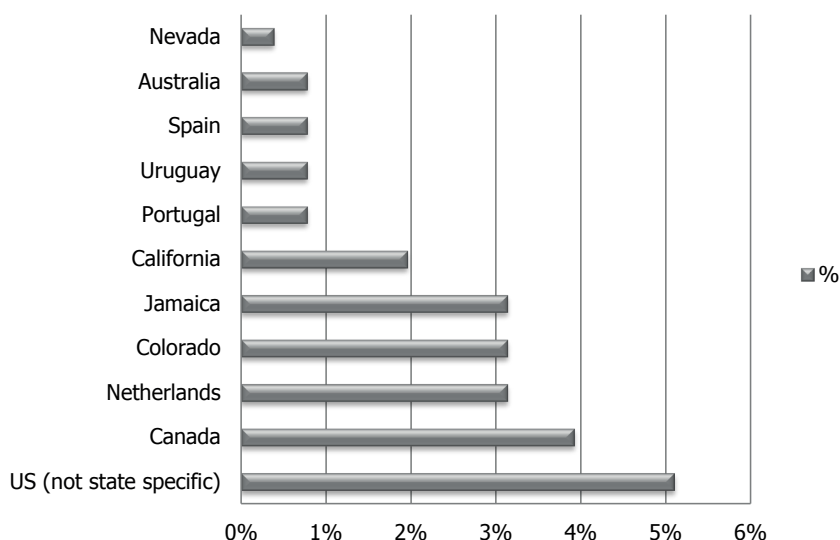
Figure 3: Percentage of respondents proposing alternative frameworks



Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

There was very little evidence submitted with proposals for an alternative framework. However, respondents who proposed legalisation indicated approaches that had been taken in other countries and states as shown in Figure 4 below.

Figure 4: Percentage of support for frameworks in other jurisdictions



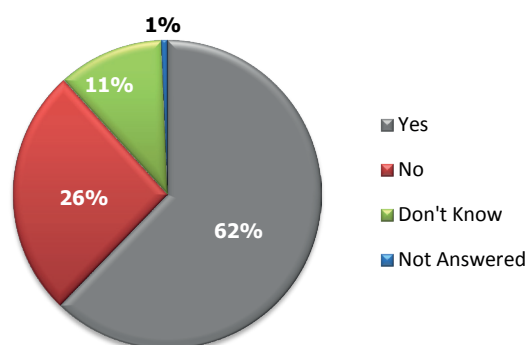
Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

2.4 Do you support this approach - restricting access to adults over 18 years?

Evidence for harms of cannabis is strongest for children and young people, due to its impact on cognitive development. However, the benefits may outweigh the harms for severe intractable epilepsy. For other indications, the DHSC would propose restricting access to adults over 18 years.

Respondents were asked if they supported this approach. 62% were in favour of this approach and 26% were not with 11% answering 'don't know' as shown in Figure 5 below.

Figure 5: Percentage of respondents in support to restricting access to adults over 18 years

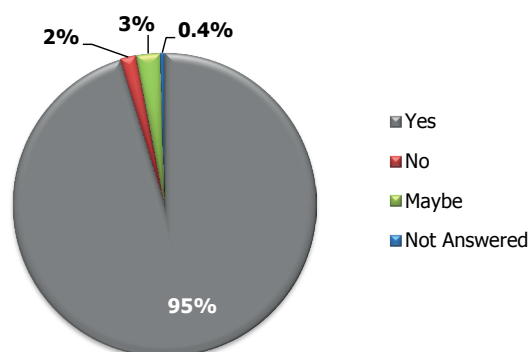


Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

2.5 Would you support the cultivation and manufacture of medicinal cannabis products in the Isle of Man, subject to a suitable regulatory framework?

The majority of respondents (95%) support the cultivation and manufacture of medicinal cannabis on the Isle of Man subject to a suitable regulatory framework.

Figure 6: Percentage of respondents in support of cultivating and manufacturing of medicinal cannabis products



Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

3. Analysis of Qualitative Information

In total **2,300 comments** were received from respondents.

The responses were in relation the following:

- **Proposals for an alternative framework to the options suggested in question seven**
- **Additional comments/proposals concerning the use of medicinal cannabis in children and young people - question nine**
- **Medicinal cannabis, further comments to be taken into account**
- **Themes identified that are out of scope of the consultation.**

Some respondents commented on other topics that were out of scope of this consultation, for example, legalisation and decriminalisation of cannabis and industrial hemp.

A qualitative analysis was undertaken in relation to the topics shown in the bullet points above and key themes were identified as follows:

3.1 Proposals for an alternative framework to the options suggested in question seven

3.1.1 Key themes in support of some form of medicinal cannabis framework

Themes identified by the qualitative analysis – **in support** of some form of medicinal cannabis framework. A total of **295 responses** included further written comments and the themes identified are as follows:

- Type of regulation
- Example of other jurisdictions
- Further comment on one of offered frameworks
- Perceived medical benefits
- Community impact.

3.1.2 Key themes not in support of some form of medicinal cannabis framework

Themes identified by the qualitative analysis – **not in support** of some form of medicinal cannabis framework: **Less than 10 written comments** were received and the themes identified are as follows:

- Risk of harm
- Should remain illegal.

3.2 Additional comments/proposals concerning the use of medicinal cannabis in children and young people - question nine

3.2.1 Key themes in support of the use of medicinal cannabis in young people

A total of **1,702 responses - included** gave additional comments **in support** of the use of medicinal cannabis in young people.

The qualitative analysis identified the key themes as shown below:

- Type of regulation
- Level of age restriction (if any)
- Requirement for education
- Perceived medical benefits.

3.2.2 Key themes not in support of the use of medicinal cannabis in young people

A total of **39 responses** included additional comments **not in support** of the use of medicinal cannabis in young people.

The qualitative analysis identified the key themes as shown below:

- Risk of harm
- Should remain illegal.

3.2.3 Key themes regarding lack of information and knowledge of the use of medicinal cannabis in young people

A total of **80 responses** have included additional comments around the lack of information and knowledge of the use of medicinal cannabis in young people.

The qualitative analysis identified the following key themes:

- Potential harms/benefits
- More research into the effects on young people needed
- Respondent felt the question was unclear/poorly worded
- Respondent felt they didn't understand/weren't informed enough/didn't know.

3.3 Medicinal cannabis, further comments to be taken into account

Themes identified by the qualitative analysis of additional comments.

3.3.1 Key themes in support of some form of medicinal cannabis framework

A total of **1,228 responses** included further written comments **in support** of some form of medicinal cannabis framework and the themes identified are as follows:

- Perceived personal benefit
- Cannabis as an alternative
- Economic benefit
- Details/examples of a framework.

3.3.2 Key themes not in support of some form of medicinal cannabis framework

A total of **13 responses** included further comments that were **not in support** of some form of medicinal cannabis framework.

The qualitative analysis identified the key themes as shown below:

- Risk of harm
- Should remain illegal.

3.3.3 Key themes regarding lack of information and knowledge

A total of **22 responses** included further comments around the lack of information and knowledge of the use of medical cannabis.

The qualitative analysis identified the key themes as shown below:

- Potential harms/benefits
- Clinical evidence
- Don't understand/not informed/not sure.

3.4 Themes identified that are out of scope of the consultation

A total of **615 responses** received were out of scope of this consultation and the themes are as follows:

- General support for legalisation and decriminalisation
- Recreational/personal use
- Grow own
- Crime reduction
- Coffee shops
- Tourism
- Industrial hemp.

Detailed responses to all of the information within Section 3 can be viewed in a separate detailed 'thematic analysis document' which accompanies this report.

4. Qualitative Comments

Respondents were given the option to provide their views and comments in relation to an alternative framework, the use of medicinal cannabis in children and young people, and any further comments in relation to medicinal cannabis.

Respondents who gave their permission for their views to be published can be found on the Consultation Hub. <https://consult.gov.im/>

Examples of some of the comments received under the identified headings are below:

4.1 Alternative framework

“The tighter the restriction the higher the odds of people turning to illegal methods to source cannabis which in turn leads to potential for criminal record/loss of employment opportunity etc.”

“We need to keep the framework within the Manx biosphere and not bring in outside companies i.e. pharmaceuticals or any other non-Manx companies.”

“Prescribe for any illness or symptom that medicinal cannabis can alleviate under direction of GP or medical professional.”

“The Isle of Man is used to setting up regulatory frameworks for a number of industries and I believe we can do the same thing for all cannabis industries. This new industry must be regulated and controlled in order for it to prosper and allow taxation. The Government Departments (DHSC, DfE and Customs and Excise) have the skills to police and regulate to industry.”

“Option ‘B’ should be on NHS at current costing.”

“I think a cautious approach to start with. Selective conditions adding to them as research becomes available on the effectiveness of each.”

“My view is that access to all should be limited to those with genuine medical issues that the accredited dispensaries should have to be provided with a medical record from their GP/specialist on the Isle of Man or from the UK/EU.

“Set up Government agricultural intensives to establish both a market for cultivating Cannabis as well as research grants to entice talent to the island for research into other uses. The current body of knowledge surrounding the use of cannabis has for far too long been restricted by overzealous archaic laws and the Island could position itself as a world leader in researching a full spectrum of therapies derived from cannabis. With an aging population there is room for a lot of research into various treatments such as

pain management, and the tax income from highly skilled and qualified people will go a long way to dealing with future budget constraints. The island could very well see a boom in R&D from pharmaceutical companies trying to get in on the action.”

“We would benefit from having local business dispensary units rather than through Pharmacy and the NHS.”

“I know it may be seen as an extreme view over here as the island has always been behind the curve when it comes to ideas relating to community. But if you introduce a medical framework you’re just opening that up for abuse, meaning the work load on the constabulary won’t change where cannabis related charges are concerned.”

“I propose a copy of the Jamaican medical cannabis system, where fully researched and tested cannabis can be acquired by those in need. They have researched and developed an expertise and can prescribe the correct substance to suit the patient’s particular ailments. I would also suggest that the huge amount of end user anecdotal evidence from all around the world be taken into account.”

“I would suggest that the Island begin with a GP led system so that patients with a set range of medical problems would be given a “passport” allowing them to purchase a range of cannabis products from registered pharmacies with doses on monthly dispensing to assess if this was helpful for their conditions. Their GP would act as a traditional “gate keeper” for the process but trained pharmacists would help educate and monitor progress as well as any adverse effects. In this way data on observational studies could add to the evidence of effectiveness and help refine future policies.”

“I was torn between options C and D.”

“Option C brings cannabis based medicinal products into line with other potentially addictive drugs such as opiates, which cannabis may replace in some cases of chronic pain, lowering the harmful effects to that patient from opiate drugs. Using this option for research is vital and a robust system for reporting benefits and adverse effects must be introduced. It will also be essential to ensure that patients on cannabis products that have psychoactive components, such as THC, are prevented from driving while these effects impair their judgment.”

“I do not support proposals that restrict individuals having to go via the doctor.”

“I believe the accredited dispensaries should be pharmacists.”

“If medical evidence were to show beyond all doubt that cannabis does, in certain cases, have a health benefit and strict controls were legislated for, then the case for some sort of legalisation could be reviewed. Any breach of these strict laws should

and must carry extremely severe penalties. The NHS (taxpayer) should not, under any circumstances be responsible for any negative effects whatsoever, for the users of cannabis may suffer.”

“The framework should be built based around evidence from multiple other countries and States e.g. Netherlands, Canada, Australia etc.”

“This should remain illegal.”

“I believe that cannabis should not be introduced as a medicine in the Isle of Man. There is now very strong evidence which links cannabis use - whether for medicinal or recreational purposes - to irreversible psychosis. A recent study has concluded (along with many previously) that the use of cannabis is now linked to psychotic disorders, i.e. mental illness. The study estimated that 30% of first-time cases of psychotic disorders in south London, and half of those in Amsterdam, could be avoided if cannabis was not available.”

4.2 Additional comments/proposals concerning the use of medicinal cannabis in children/young people

Figure 7: Word Cloud showing examples of key themes identified in the feedback



Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

“I think for children under 16 years it should be a case by case basis and should be over 16 years treated as adults.”

“Only to be administered in supervised conditions. Not prescribed for home use to over 16 year olds.”

“I would want a consultant to prescribe to anyone under the age of 18 years.”

“While I fully support cannabis being made available to the public either through medical prescription or direct dispensaries, access should certainly be limited to over 18’s only.”

“I believe that cannabis can still affect developing minds under the age of 21 years and as such feel that it should be restricted to adults over 21 years.”

“Cognitive development continues until 25 years, studies have shown cannabis to have little effect on cognitive development after the age of 25 years.”

“I think the legislation should be written in such a way that it allows for prescribing behaviours to remain in line with the latest clinical evidence and shouldn’t exclude under 18s as a blanket rule.”

“We believe that medicinal cannabis should only be used where there is proven benefit, in conditions such as autism (under 18) and/or conditions for over 18’s where it can be shown to have benefits in cases such as pain relief and uncontrolled epilepsy (under 18’s). Due to the overall lack of data on some of the medical issues a cautionary approach should be taken and it should be restricted except for approved cases only.”

“Clinicians should receive specific and objective training on the uses of medicinal cannabis, with specific reference to young people included. All decisions should be evidence based. Sometimes, there will be a grey area, where a balance has to be calculated between potential risk and potential reward.”

“The benefit of medicinal cannabis has not been rigorously tested. There is limited evidence of benefits. There are adverse effects e.g. dizziness, vomiting, hallucinations etc.”

“I agree that the risk of irreversible mental illness resulting from the use of cannabis is most prevalent in children/young people. However, the risks of the same fate befalling those who are older is still statistically significant and in my view outweigh any medicinal benefit that cannabis may result in.”

“Doctors and parents should be left to decide what’s best for their child. Not enough information is available on the benefits to children with other severe conditions, so a blanket restriction is unfair. Let doctors have access to all possible treatments.”

“In severe cases of epilepsy, chemotherapy and for palliative care it should be an option to help children. Comparable to the vaccination argument which is the bigger risk: a life with constant pain and the mental issues that go with that or the risk of potential damage on cognitive development? Which will provide a better life?”

“Recent evidence suggests that there are many conditions, such as epilepsy, where existing pharmaceutical drugs have not been effective for children. The harm caused by the pharmaceutical drugs appears to be much more severe when compared with the reported potential harm of THC but regardless, parents should not be deprived the option of choosing medicinal cannabis.”

“In any case where the prescribing of medicinal cannabis is concerned there would need to be a cost/benefit assessment given the potential effects of the medication: as would be the case when prescribing any other drug. I think it would be entirely suitable for young children to be prescribed the drug if it helped to alleviate conditions for which there was no other treatment, or to improve quality of life in the case of the chronically or terminally ill.”

“Cannabis is obviously mentally harmful for children and teenagers. Encompassing the drug into a full legal framework would not only allow access to those who may benefit, but equally as importantly, it will have an economic impact on the black market. Taking cannabis off the streets and into a controlled regulatory medicinal market may have the added benefit of forcing the black market off the streets, helping to safeguard society as a whole.”

“So long as policy moves in line with proper medical research, which may well not be in line with public attitude then I see no issues with the prescribing to young people in the future.”

“If there’s documentation to prove that this medication is of help then it should be available, trying this out cannot do any harm. So many horrible pharmaceuticals are used regularly.”

“As long as the correct research is conducted to ensure the cannabis is both of benefit and very low risk mentally, then there should be no issue. There is an unprecedented variety of strains with only more to be discovered, with many not actually contributing much, if at all, to any long term negative mental issues.”

“Only if it was completely necessary because nothing else worked.”

“It’s enlightening to see the Isle of Man Government taking a proactive approach to this matter. There are children with serious medical conditions where a very small and carefully administered dose would literally change their life through ease of pain.”

“If the benefits outweigh the cognitive development issues then it should be prescribed if the parent wishes for some medical conditions.”

“Ensuring that safeguarding is in place to protect children/young people where medicinal cannabis has the potential to be prescribed for the child yet used by an adult. Ensuring the child or young person’s safety is at the centre of all decisions.”

“Like any drug, it can harm the developing brain, but if the benefits outweigh the harm then it should be available to young people. That can only be decided by the GP/consultant.”

“Common sense approach is needed - all medicine is used on a harm/benefit framework, as should cannabis.”

4.3 Further comments

This section has been further broken down into identified themes.

Figure 7: Word Cloud showing examples of key themes identified in the feedback



Source: Isle of Man Government Consultation, Medicinal Cannabis - Feb 2019

4.3.1 Personal benefit

“This has proven to help people and I think people who are in constant pain should be allowed to take this for medical purposes to help them.”

“I am astounded that it has taken this long for anybody to look further into this, given the already published reports/results of its benefits. I have never used any form of cannabis myself to date, but I hope that if I require it to help me lead a better/less pained life, that it will be available under guidance for me.”

“I would support the issue of granting licenses to allow patients to cultivate limited amounts for medicinal use.”

“If the government could understand the benefits of medicinal cannabis and how the population suffers as a result of not being given choice, perhaps then something could be done.”

“I am not concerned for recreational use, only the medicinal benefit to those whose lives can be greatly improved and possibly saved.”

4.3.2 Economic

“We are a relatively small economy. Surely with a new abundance of jobs and money in such a possible industry, it could only be positive to the Island as a whole.”

“Medicinal cannabis production will be good financially for the island, as we can sell to worldwide pharmaceutical companies.”

“It would be fantastic for the Isle of Man economy to do this. We could be a market leader and the income derived put back into schools, hospitals, infrastructure, etc.”

“I think it could help to diversify the economy provided we do not allow the cultivation to be too extensive and therefore detrimental to our biosphere status.”

“Taking steps now to develop an industry which is regulated and taxed appropriately may open the Isle of Man up to trade and a new revenue source.”

“If the use of medicinal cannabis is to be allowed, it should not be seized on by Government as a revenue generator. The product should be available at an affordable price not inflated by taxes.”

4.3.3 Keeping it local

“It should be within the Manx Biosphere and kept with Manx companies.”

“This is a great for financial growth and can only be a good thing, more home grown Manx produce that can only have a positive effect on the Island.”

“It is my firm belief that large companies currently responsible for the production of cannabis in the UK should not be permitted to grow and control cultivation on the Isle of Man.”

“I feel strongly this should be done by a LOCAL company/farm, not a large pharmaceutical company. A local network of farms and business could work well together and be of tremendous benefit to the Island.”

4.3.4 Regulations

With proper controls I would absolutely support this as it will provide an accessible source of medication and a lot of revenue for the Island which should be used to support our severely overstretched Health Service.”

“The Isle of Man is great at regulation, get it right and this could provide any number of opportunities for the Island including health tourism - but most importantly improve the quality of care for the Island’s patients where medicinal cannabis could alleviate symptoms and distress.”

“There should be public consultation on the regulatory framework prior to agreement to grow medicinal cannabis.”

“I would want and expect strict controls to be put in place to ensure that only the medical form of cannabis is produced on the Island.”

“I would support the issue of granting licenses to allow patients to cultivate limited amounts for medicinal use.”

4.3.5 Farming/Agriculture

“This seems like a great opportunity to support and boost the local farming community.”

“Would benefit the Manx economy and give farmers an option to support the cultivation and manufacture of medicinal cannabis.”

“Support local farmers first. Licenses should be issued to those with an agricultural history on the Island, not to large pharmaceutical companies.”

“I think it would be a fantastic step for modern farming in a climate where all farmers are in danger of serious decline.”

“DEFA has responsibility for the profitable and sustainable future of the agricultural industry in the Isle of Man. Crop diversification is currently encouraged by the Department and subject to a suitable regulatory framework being in place, the Department would work with the industry to test the feasibility of cultivating medicinal cannabis. Medicinal cannabis is a high value crop with good export potential. It is likely that trials, advice and equipment could be supported through existing Government grants. The Department is also aware that there is a significant

difference in infrastructure and licensing requirements for the growth of hemp for fibre and medicinal cannabis in other jurisdictions and that some of the farms currently interested in growing medicinal cannabis may be better suited to growing hemp for fibre, especially where high tech indoor growing and/or significant security (or other) infrastructure is required for medicinal cannabis. ”

4.3.6 Cultivation

“I support the cultivation and manufacture of medicinal cannabis because we would have genuine provenance of the products derived from cannabis and so mitigate any doctoring by unscrupulous third parties. I also believe the Island could benefit economically from UK patients and possibly those from further afield, by manufacturing its own products. ”

“Don’t think the Island is really a great place to cultivate it in open fields, however, building hothouses will not only utilise available (limited) land but also be a boon for the local construction industry. ”

“The cultivation and manufacture of cannabis in the Isle of Man should be one of the primary concerns of the consultation. The Isle of Man Government can better regulate and monitor quality of produce if cultivation takes place locally, and will lead to job creation and an increase in tax revenue. ”

“I would like to see the Island itself benefiting from the cultivation. I would like to see any profits being taxed here and for the Island community to benefit financially from a new industry. ”

4.3.7 Investment

“Needs proper investment and backing from the Government to ensure quick action, which could put us at the forefront of the business. ”

“As long as no subsidies are paid to the companies who choose to grow it. ”

4.3.8 Concerns

“I would have concerns over how closely/strictly this would be monitored; we have already seen several other industries that are supposedly strictly regulated flaunt rules and regulations too frequently. The main concern with this would again be people growing it and the temptation for people involved selling the crop illicitly, if not properly regulated. ”

“My main concern is how cannabis is taken. However, that arises from my concern over smoking and the use of tobacco alongside cannabis which I strongly object to. I presume medical cannabis isn’t smoked and therefore have no objection.”

“I am slightly concerned about medical tourism i.e. patients from areas where medical cannabis is not allowed, accessing/utilising the system, to obtain this medication. With this leading to misuse or overloading the Isle of Man medical system.”

“I am concerned cannabis agriculture could impact the ability to enjoy the environment. For example, the construction of security fencing, cameras, policing around crops could have a negative effect on the already shrinking local rural environment.”

“I think this proposal is just the start of a slippery slope to legalise the unrestricted use of marijuana. The government is trying to reduce “normal” smoking on health grounds, but seems unconcerned with the negative health effects of cannabis.”

“Do not let the production be regulated by the Isle of Man Government employees. This should be done by an external third party. This will keep costs down and will ensure the best quality product.”

4.3.9 Clinical

“It is still relatively early days in the research of medicinal cannabis. However there is no doubt that this potent herb offers significant benefit in many chronic diseases. As a clinician, I see firsthand the side effect and often inefficiency of many prescribed medications. We need to evolve and work with what mother nature has to offer us. It is time to move forward and let many chronic disease sufferers get access to highly beneficial compounds such as cannabinoids found in medicinal cannabis.”

“The key thing is that there must be proper clinical evidence for its use - to exactly the same standard as any other medication, not just anecdotes and bending the criteria due to demand.”

“It is already possible for many medicines such as opiates to be prescribed for medical conditions, how is this any different? If it can help it should be available on prescription.”

“The Isle of Man could do with more income and this could provide it. But better than that, it can advance research and be mentioned at the forefront of medicinal research. It would bring in educated people and give the opportunity to flourish.”

“I would encourage evidence based research as a matter of priority to look at the subject of cannabis use. Having worked in the medical/care profession I have seen the damage of over-medication on patients, lack of medication reviews on patients and lack of understanding how chronic conditions can have a massive impact on your quality of life. Time to look at alternatives which may reduce the number of medications a patient has to take to control pain and other issues. Let’s get out of this cycle of prescribing as a one size fits all and consider a new type of treatment which may help patients and may have less detrimental effects overall on their health.”

“Import cannabis based drugs properly tested and approved and administer under strict medical supervision.”

“Scientific and anecdotal evidence appears to indicate that cannabis can be effective in treating or alleviating a range of diverse conditions. It should be part of the mainstream drug treatments which a GP can prescribe. Restricting prescribing rights to consultants could cause inordinate delays, due to waiting times for seeing consultants, and some conditions may not require a consultant’s opinion so these people would not have access.”

“Surely this is a medical matter that should be debated by the medical profession.”

4.3.10 General comments

“I believe this is a big step for the Isle of Man to introduce a product which can help so many people with so many different problems and especially people with chronic pain.”

“Approval of cannabis for medical use should never - in any circumstances - lead to any debate about the general legalisation of the drug for recreational purposes.”

“As long as it is in a safe and secure environment.”

“Subject to the ecological impact to the island.”

“The cost of security on the cultivation sites should also be considered.”

“I am delighted the Island is having such a positive approach and seeking public opinion.”

“I believe that using cannabis medicinally should be the choice of the patient. If a consenting adult, over the age of 18 believes that cannabis would alleviate the symptoms of any specific medical condition, then they should have the freedom of choice to be able to choose this plant as a medicine.”

“As I understand it, medicinal cannabis does not have the same ‘mind-bending’ effect as ‘weed’ which, when used by my grandson in the UK, had a noticeable detrimental effect on his mental health, which he is still living with seven years on.”

“Glad you are looking at it away from the confusion of drugs policy. Never touched the ‘stuff’ as a drug and wouldn’t even if it was legal, but if I had a medical condition for which it was a reasonable and cost effective treatment I would expect to be prescribed whatever worked.”

“I think the Island has the opportunity to progress further than just using medicinal cannabis. There is potential to open research and development to allow the full benefits of cannabis to be explored. This then opens the opportunity for the Island to flourish as a leader in medicinal cannabis treatments and create something unique and very beneficial for the Island.”

“As long as it is kept as a controlled drug, prescribed only by a doctor then I am all for it.”

“We don’t have public consultations over other potential prescribed drugs, why is cannabis treated differently?”

“Depending on the findings of the consultation and if the proposed market size due to population was too small, the issue of maintaining economic viability by the use of identifying potentially external markets would need to be considered.”

5. Summary

The focus of this consultation was on the medicinal use of cannabis with the objective of reducing the symptoms of a medical condition. Respondents to this consultation expressed strong support for option D, offering quality assured medicinal cannabis products direct to the public through accredited dispensaries as the preferred approach for the Isle of Man. There was also clear support for option C, developing a framework similar to the Netherlands model.

The paper supporting the consultation indicated that the harms of cannabis are strongest for children and young people, due to its impact on cognitive development. However the benefits may outweigh the harms for severe intractable epilepsy. The DHSC proposed restricting access to medicinal cannabis for other indications to adults over 18 years. The majority of respondents supported this approach. Respondents were also strongly in favour of the cultivation and manufacture of medicinal cannabis on the Island.

All respondents had the opportunity to provide further information and many shared their views on specific topics such as alternative regulatory frameworks, the use of medicinal cannabis in children and young people and the opportunity to provide additional comments.

Furthermore, a number of comments were received from respondents that were out of scope of this consultation and were in relation to:

- Industrial hemp, which was part of a separate consultation running at the same time as the medicinal cannabis consultation.
- Decriminalisation and legalisation of cannabis for personal use.
- Comments from respondents who gave their permission for their comments to be published can be seen on the Isle of Man Government Consultation Hub.
<https://consult.gov.im/>

Acronyms and Abbreviations

DfE	Department for Enterprise
DEFA	Department of Environment, Food and Agriculture
DHA	Department of Home Affairs
DHSC	Department of Health and Social Care
EU	European Union
GP	General Practitioner
NHS	National Health Service
THC	Delta-9-tetrahydrocannabinol
UK	United Kingdom



Isle of Man Government

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