

House Bill 892 - CBD Only Bill

Hello my name is Vincent Lopez, I'm testifying neutral on HB892 and I'm representing myself and the Patient Alliance for Cannabis Therapeutics.

I'm here today to express the reality in which I and many other Texas patients are having to endure with chronic debilitating conditions and how CBD only legislation represents a minimal comprehension of what cannabis actually is and what it can do; HB892 does not represent a solution for the many other patients in Texas who need safe-access to whole plant cannabis extracts and oils.

Sunday, I purchased 2 bottles of 100mg high CBD oil here in Austin for \$24.95 per bottle and I can order 200mg of Charlotte's Web Hemp Oil from their website for \$49.99. With the availability of these over the counter products; I am respectfully requesting that CBD/THC ratios be left up to the physicians treating patients.

A native of Austin, Texas, I'm a community volunteer and an advocate for patient rights. I'm a patient of Becker Muscular Dystrophy, a muscle deteriorating disease exhibiting symptoms of intractable back pain, joint contractures, muscle stiffness and spasticity, and progressive muscle weakness resulting in a tremendous loss of balance, muscle coordination, and impairment throughout my limbs, pelvic, ankles, wrists, and fingers.

My muscles will continue to deteriorate, my mobility will continue to suffer, and my pain will continue to increase. What we need to understand is that with various forms of Autism, Cancer, Epilepsy, Muscular Dystrophy, Multiple Sclerosis, etc., the concentration of both THC and CBD compounds are what is often required in treating these deadly diseases!

HB892 would help a minimal few with one form of Epilepsy while there are many other forms of the disease that would go untreated, which brings forth the potential in creating a medical system that is extremely limited in its qualifying conditions, deeming other patients to be more important than others, which should never be the case.

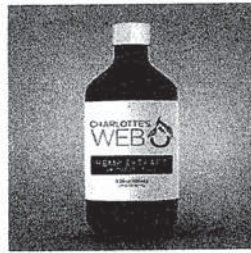
I find immoral and unethical, forcing Texas families to separate from one another and forcing children into exile because of a state that cannot show them the compassion required.

Cannabis provides pain relief, muscle relaxation, stimulates appetite, and sustains quality sleep, essential to my daily health in assisting the patient community of Texas.

I'd like to thank the Public Health Committee in taking the time to hear from patients today and trust that you'll keep in mind of the many reasons expressed to why CBD only legislation would not be an adequate solution for the number of Texas patients suffering!

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Coming Soon

House Bill 837 - Affirmative Defense Bill

Hello my name is Vincent Lopez, I'm testifying in favor of HB837 and I'm representing myself and the 1400+ members of the Patient Alliance for Cannabis Therapeutics.

I'm here today to express the reality in which I and many other Texas patients are having to endure with chronic debilitating medical conditions and how the need to protect the physician/patient/caregiver relationship is so vital when pertaining to the medicinal use of cannabis.

A native of Austin, Texas, I'm a community volunteer, an advocate for patient rights, and a local publisher. I have lived life from a wheelchair for 25 years as I'm a patient of Becker Muscular Dystrophy, a muscle deteriorating disease exhibiting symptoms of intractable back pain, joint contractures, muscle stiffness and spasticity, and a progressive amount of muscle weakness resulting in a tremendous loss of balance, muscle coordination, and a great amount of impairment throughout my limbs, pelvic, ankles, wrists, and fingers.

Let's take note that illness is a non-discriminate act of consumption that can bring detrimental affects to our friends, families, our children, and even ourselves.

With this progression, muscles will continue to deteriorate, mobility will continue to suffer, and pain will continue to increase. It's hard to accept that one day soon, my physical ability will cease to exist, in turn, not allowing me to self-medicate. This will inevitably fall onto the hands of my mother; HB837 can provide the protection she deserves!

How much longer shall I suffer the eternal confrontation of disease and disability of which no man or law could even compare to? Every day I'm at risk, placing myself (just like many others) in a "catch 22" situation, but it's the pain I'm contending with, not the law, that always wins! I ingest cannabis by way of smoking or vaporizing the flower; I'd consider cannabis oils, concentrates, or extracts, but that's a felony in Texas; no need for my situation to be more strenuous than what it already is.

Cannabis provides pain relief, muscle relaxation, stimulates appetite, and sustains my sleep which is essential to my overall daily health, allowing me to stay productive in assisting and working with the medical cannabis patient community of Texas.

I would like to thank the Public Health Committee in taking the time to hear from patients today and trust that you'll keep in mind of the sacrifices made by patients to express themselves to you as voting constituents of this state in regard to the crucial need for an affirmative defense pertaining to the protection of the physician/patient/caregiver relationship. No medical treatment should ever be governed by lawmakers and politicians, that's a decision that should be based on the professional opinion of the physician in regard to the patients care.

House Bill 3785 - Comprehensive Medical Bill

Hello my name is Vincent Lopez, I'm testifying in favor of HB3785 and I'm representing myself and the Patient Alliance for Cannabis Therapeutics.

I'm here today to express the reality in which I and many other Texas patients are having to endure with chronic debilitating conditions and how the passing of HB3785 can significantly bring forth a better quality of life pertaining to the medicinal use of cannabis.

A native of Austin, Texas, I'm a community volunteer, an advocate for patient rights and a local publisher. I have lived life from a wheelchair for 25 years as a patient of Becker Muscular Dystrophy, a muscle deteriorating disease exhibiting symptoms of intractable back pain, joint contractures, muscle stiffness and spasticity, and a progressive amount of muscle weakness resulting in a tremendous loss of balance, muscle coordination, and a great amount of impairment throughout my limbs, pelvic, ankles, wrists, and fingers.

Let's take note that illness is a non-discriminate act of consumption that can bring detrimental affects to our friends, families, our children, and even ourselves.

In June 2014, I successfully began to wean myself off the prescribed narcotic of Codeine which I had been taking to help with sleep & pain; over time the addictive properties of the Codeine initiated continual side-effects of constipation and appetite suppression; what once was helping me attain up to 5 to 6 hours of sleep had rapidly declined to 3 to 4.

It was clear that I needed to get off the Codeine and cannabis helped me do that; once it was completely out of my system, the effects of my cannabis use began to take full-effect, stimulating my appetite, maintaining my nausea, and increasing my quality of sleep back to 7 to 8 hours.

Cannabis provides pain relief, muscle relaxation, stimulates appetite, and induces and sustains quality sleep which is essential to my overall daily health, allowing me to stay productive in assisting and working with the medical cannabis patient community of Texas.

HB3785 would provide safe-access for patients to whole plant medical cannabis and the combinations of CBD & THC ratios often required in treating a number of these deadly diseases such as Autism, Alzheimers, Cancer, Epilepsy, PTSD, Multiple Sclerosis, just name a few.

As patients, how much more shall we suffer this eternal confrontation of disease and disability of which no man or law could even compare to?

I would like to thank the Public Health Committee in taking the time to hear from patients today and trust that you'll keep in mind of the sacrifices made by patients to express themselves to you as voting constituents of this state in regard to the crucial need for medical cannabis legislation. Thank you!

To whom this may concern,


I am the mother and caregiver of Vincent M. Lopez. This is my testimonial regarding what I have personally witnessed with his medicinal use of cannabis. He has Becker Muscular Dystrophy which includes symptoms of muscle weakness, muscle spasticity and stiffness.

Cannabis has helped with his nausea. The liquid prescription medication he was taking in Codeine was not helping with pain, his appetite was being suppressed and he consistently became constipated. Once he left the liquid prescription medication of Codeine, he started to eat better and obtained a better quality of sleep.

Cannabis helps with his pains which are severe and will get even more devastating as the illness progresses. I assist and take care of my son who now requires 24/7 supervision. I've seen how much pain he endures, but when cannabis is taken, he feels immediate relief; I'm talking about severe pain all throughout his body, spine, shoulders, legs, and pelvic region. I have also seen how cannabis helps with his nausea so he can keep his food down.

No person with an illness, such as my son, should have to suffer when cannabis does so much good. This medicine in cannabis needs to be made available. Also, children are suffering and dying as some have a medicinal need for cannabis as well, a great percentage of Texas families are having to leave the state to possibly get help elsewhere, which is not a feasible option for my son and I. There is a tremendous need for some compassion here, there is a tremendous need for whole-plant medical cannabis legislation to be put into law - hoping something comes through for sick disabled human beings.

It breaks my heart to see what he has suffered, with this condition and it also breaks my heart in knowing that cannabis can be of great benefit, but is not provided due to its illegality - which is a shame. As a Texas resident, I'd like to believe that our Texas lawmakers are representing their constituents as they have been elected to do so - "to be the voice of the people".

Sincerely,

Josephine M. Lopez



Respected Legislators,

Novaleigh was born in Austin, TX. When she was four months old, we got the phone call on a Saturday night, from an endocrinologist, asking us if we had a minute to sit down and talk.

My world was flipped upside down when she told me more than half of my child's brain hadn't developed during pregnancy, her pituitary gland was underdeveloped, she was legally blind, and had a large unilateral cleft lined with grey matter consisting of almost the whole right side of her brain.

We were told, she would never sit, walk, talk, and she would most likely suffer from epilepsy. She would have to take growth hormone shots every night in her stomach back and legs, she would have to take thyroid pills and steroids to keep her alive, and while there was a chance she wouldn't have seizures, they were more likely to happen than not. We had no time to grieve- at that moment, our lives transformed into a never ending battle to make sure our daughter would live. We had to drop what we were doing and take nova to the children's hospital first thing the following week.

We dove head first into uncharted territory. They didn't tell you about any of this in the "what to expect when you're expecting" books, and when you were growing up, this wasn't something they teach you in school. You had to learn to follow your instinct and be your child's voice- and you had to learn that very quickly.

I was 18, and Nova's dad was 20, and we found ourselves making decisions and living a life we never imagined we would have.

We were in the hospital so much we might as well have lived there. Our daughter was in the spotlight of the ICU, and it seemed like every doctor in the hospital wanted to take a look at her. When your child has a rare diagnosis, they can be treated like a guinea pig, or some sort of doll in a display case.

We had to give our daughter endless cocktails of pills and tube feeds, we had to watch her get poked all hours of the night, put under sedation time and time again, and just when you thought you'd get to spend a few weeks at home with her and adjust to life outside of the hospital, you were right back in again.

Schizencephaly reared it's ugly head day in and day out. But we hadn't seen the worst of it.

When nova turned five months old, while her dad was giving her a bath, she had her first seizure.

The first of many. For the next two years, on top of all of her other medical complications, she would suffer from endless seizures of all kinds. She spent many of those days in status epilepticus. Status means that you are in a constant state of seizure and this is extremely life threatening. If she wasn't in status, the breaks from having a seizure were few and far in between. If there was ever a moment I got to see her smile, it was so short lived. I began to realize that I had never seen my daughter truly live, or be truly happy.

Her team of doctors wasted no time prescribing seizure med after seizure med. Valium, Onfi, Zonogran, Sabril, Keppra Diazepam..... Medicine stacked on medicine that would fail to control her seizures, but would subject her to paralyzing side effects, ranging from dizziness to trouble breathing to having to take her to the hospital again because she was completely unresponsive and any effort to wake her up had failed. Most days my daughter was so limp and lifeless that I would question how she could ever have a quality of life because of the constant seizures and the side effects from these poisons on top of that.

We had many MRI and EEG scans, showing that the right posterior of her brain was firing 24/7 and her cleft was a playground for seizures. After trying every seizure treatment available, the neurologist came to us to let us know she was a good candidate for brain surgery. The plan was to spilt her corpus colossum, and preform a Leisonectomy, to remove most of what brain she had left. In the end she would be left with anywhere from 5 to 10 percent of a brain. The surgery was also not guaranteed to work, and it was a very extreme procedure that the neurologist would not tread on lightly. They Gave me the news that there was a chance Novaleigh would not come out of the operating room alive.

I agreed to the surgery very reluctantly... And we were sent home to wait for a spot to open for ova to get a MEG scan in Houston to prepare for the surgery. I packed a bag and once a spot opened for the scan we would fly south to the children's hospital there, and the surgery would follow shortly after.

But while sitting in my bed on Friday while nova slept, I broke down. Cried quietly so she couldn't hear, and called her dad to come have a talk face to face. I told him I was packing up all of our things and we were moving to Colorado. We had to try cannabis oil first. You heard the stories everywhere, on the news and on the internet. Parents claiming that their children were saved from oil made from cannabis plants. To some it sounded far-fetched. But many people supported our decision. Shortly after realizing I could not allow anyone to remove a significant amount of my child's already fragile brain, we packed our house, put nova in her car seat, and we left our home in Austin Texas, the place we had lived our entire lives and swore we would never leave. We left our families, had to break our leases, and say goodbye to the place we were born and where we grew up, the only place we ever knew.

Colorado has welcomed our family with open arms.

Now it is April, and Novaleigh has been on cannabis oil for 11 months.

My daughter is NOT taking Charlotte's Web. She is not taking oil made from a strain that is CBD only.

She is taking a THC rich oil, and my daughter does experience the psychoactive effects of cannabis. Does this worry me? Absolutely not. My daughter is happy and physically and developmentally blossoming.

Novleigh has been on cannabis oil for almost a year. Not only has she has a 95 percent reduction in seizures, but due to her seizures being controlled, she is now only taking two anti-epileptic drugs, and she just had her first EEG scan with ZERO seizure activity in her life. But something else has also happened that I never could have seen coming. Two weeks ago at Nova's endocrinologist appointment, we received the news that her severely underdeveloped pituitary gland has started to work on its own. Not only has it never functioned before, it is so underdeveloped that it cannot be seen on an MRI, and since birth, nova has relied on thyroid medication, steroids, and growth hormone injections in order to live. Because her pituitary gland is working on its own now, she will no longer have to receive nightly shots, and next month we will discontinue her thyroid medications.

I will never forget seeing her doctor throw her hands up in the air, and say: "I don't know. Her pituitary gland is working by itself now. I don't know, I don't know."

We had to leave our lives, our homes, our family, and our friends in Texas for this, and while Colorado is wonderful, it would be a lie for me to tell you I didn't miss my home. But the truth is, before all of this, my daughter didn't have a quality of life, and she may not be here with me today if I hadn't decided to take this huge, uncertain leap of faith, to fight, and to gain access to legal cannabis oil for her. I believe that every human being, child or adult, deserves access to this natural, safe, and effective medicine. The difference between life and death, sickness and health, should not depend on ones zip code. The people that need access to this medicine have already suffered enough. I get to see my sweet Novaleigh sit up by herself now, and she sounds like an angel when she says mama. Not only does every child that has endured similar suffering deserve the same chance to know what it's like to talk, to speak, to try to stand..... Parents like myself deserve to see their children live and flourish without having to fight for a right for them to live.

Thank you,

Barbara Bunker

Personal Testimony Submitted in SUPPORT of HB 3785 and HB 837

Dear Representatives,

I write this testimonial on behalf of myself. My name is Michael Spell. I am a practicing Acute Care Nurse Practitioner board certified in the state of Texas. I have been in practice since May of 2005. For the last year I have been working in a pain management practice. I have witnessed first hand our society's dependence on dangerous opiate drugs. Unfortunately despite best efforts many patients and caregivers find themselves battling addiction they acquired simply as a result of the desire to live life without pain. Many chronic conditions such as degenerative disc disease, coccydynia, radiculopathy, Crohn's colitis, ulcerative colitis, complex regional pain syndrome, and myriad others demand opiate medication to achieve some semblance of quality of life.

In the course of my practice there have been a few instances where patients have come to our practice already heavily dependent on opiate medications. One such example was a patient suffering from below waist paralyzation and associated neuropathic pain. The patient was on twelve 8mg Dilaudid tabs for breakthrough pain as well as 300mg of extended release morphine per 24 hours. Naturally myself and the collaborating physician were not willing to continue this patient's current opiate treatment out of concerns for his safety. In order to assist in alleviating his pain we initiated Marinol. This was an off label use. The patient responded well to our change in his treatment. After two months the patient's opiate requirements were down by 45% and he reported improvements in overall pain control with the addition of Marinol compared to his old therapeutic regimen.

While Marinol may be useful to mitigate pain for this patient it is inferior to whole plant medical cannabis for many other conditions. It seems to me to be a rather schizophrenic position for our state to prohibit whole plant medicinal cannabis when we have access to synthetic THC as Marinol which is listed as a schedule III drug. Clearly the compounds in the cannabis plant have medicinal value. The maximum medicinal benefit is achieved by an entourage effect that only whole plant medical cannabis can provide. It is unfortunate that so many in our state are forced to suffer pain and debilitating symptoms or live life with the ever present danger of incarceration for violating outdated, medically repudiated drug prohibition laws.

I urge you to search your consciences and pass these bills through committee to a vote on the floor of the state house. These issues deserve the attention and debate that only the full legislature can provide. The constituents of this state, 83% of which agree with changes in marihuana prohibition laws according to recent UT/Texas Tribune poll, deserve this debate. This is your chance as a representative of our state to get behind popular public opinion and allow the suffering patients of our state to obtain relief.

Cordially,

Michael Spell, MSN, RN, ACNP-BC

Texas Legislature, Regular Session 2015

April 16, 2015

In Support of Medical Marijuana
House Bills 892, 837 and 3785

My name is Tracy Steinbach and I live in Plano, Texas. I am the mother of Sarah Steinbach, age 23, who is Autistic and Epileptic from an acquired brain injury as an infant. I am lucky to know the cause of Sarah's brain injury as often parents never find out. Sarah was diagnosed with Mercury Poisoning from the Thimerosal in her childhood vaccines. This was diagnosed after three separate lab tests all showed the same level of Mercury Poisoning, and there was no other source of Mercury exposure. However, this diagnosis was not made until she was 9 years old. Until then, she had various diagnoses including neurologically impaired, Epilepsy of Unknown Etiology, Pervasive Developmental Disorder-Not Otherwise Specified, Autism and a whole host of other diagnoses related to her brain injury.

Sarah began having seizures shortly after her six month round of vaccines. She was hospitalized and remained status epilepticus for about two weeks. When she was released from the hospital she was still having seizures. Since then Sarah has used almost every medication for seizures that exists, but none have ever completely stopped her seizures. She is currently on two last-line medications, Felbatol (Felbamate) and Banzel (Rufinimide). At her last seizure study in 2008 at Children's Medical Center in Dallas I was told that she was having many subclinical seizures daily as well as the tonic-clonic (previously known as Grand Mal) type. She was diagnosed in that seizure study with two focal points, which makes her ineligible for epilepsy surgery. Her current primary diagnosis for her Epilepsy is Refractory Partial- Complex Seizures that Generalize. She also has a diagnosis of Catamenial Epilepsy, which is Epilepsy that is related to her menstrual cycle. Additionally, she has been diagnosed with Gelastic and Dacrystic Seizures (laughing seizures and crying seizures, respectively).

Since Sarah was about 7 years old she began to show signs that her immune system was not working properly and she became very frail having bouts of pneumonia about 4 times per year. She was diagnosed with Hypogammaglobulinemia from long-term anti-seizure medication use. So, since January of 2002 until this past February, Sarah has received monthly infusions of IVIG in a hospital setting. She is no longer tolerating those infusions and she is having reactions to them that cause her to have febrile seizures following administration, and so they have been stopped. I do not know what the result of stopping these infusions will mean for Sarah yet. Only time will tell as long as she has to continue taking these medications. Perhaps at some point she will go back to the monthly

infusions. These infusions cost about \$10,000.00 per infusion, so the state of Texas is getting a little break from this expense right now!

There are several bills that have been introduced this session related to legalizing Medical Marijuana, including HB 892 that provides for the use of low-THC marijuana. I support legalizing all cannabis for use as medication because it has been shown to be safe and effective for a variety of medical conditions, including Refractory Epilepsy. For doctors, it is always about finding more useful medications to treat their patients-expanding the "tools" in the "toolbox." For patients, it is all about finding relief from the debilitating symptoms of their conditions.

There has been a lot of discussion around the successes that children with Refractory Epilepsy have had using Charlotte's Web Hemp (CWH) Extract or Oil. There is also a lot of confusion. The Stanley Brothers, the manufacturers of CWH, began producing CWH as medical marijuana despite the fact that this strain of Cannabis has extremely low levels of THC because their Colorado license to grow and dispense was for Medical Marijuana only. However, that changed with a new law passed in Colorado that now allows the Stanley Brothers to grow and sell CWH as Hemp Extract or Oil, and they sell it as a nutritional supplement. They are now making this product available to "patients" (and I use that term loosely) in all of the states except NY and FL and can ship directly because they are producing this product out of the country. I have begun giving it to my daughter using a very conservative dosing schedule and have informed her neurologist and immunologist of this. While I was quite skeptical that it would have any effect on her seizures, I am amazed to say that she seems hardier, healthier and she is having much fewer seizures (she has had some breakthrough seizures when sick a couple of times, including after the last IVIG infusion)!!! I do not need a prescription to give this to her because it is considered a nutritional supplement. However, if I want her nurse to give it to her, then I would need the neurologist to write a prescription for it, just as her doctors write prescriptions for any other OTC medications and nutritional supplements that I want her home healthcare nurse to give to her. Under current Texas law Hemp Oil is legal, although the regulations state that it should contain no more than 0% THC. This needs to be changed to reflect the federal definition of Hemp which states that it may contain no more than .3% THC. I don't believe that any more changes to Texas law regarding Hemp Oil or Hemp extract are needed beyond this. Any further changes beyond making the current law comply with the federal definition of hemp would be onerous, burdensome and unnecessary.

My daughter has compulsive self-injurious behaviors that are exacerbated by anxiety and boredom. She constantly compulsively picks her finger and toenails, including pulling out some of her toenails completely. Additionally, she picks her lips until they bleed, and even picks at her eyelids sometimes. CWH has had no effect on these behaviors. Sarah cannot take any of the medications on the market for OCD symptoms because they all exacerbate seizures. However, I would like to try using edible or liquid THC products to see if these behaviors could be lessened or eliminated. Certain strains of cannabis have anti-anxiety properties and can improve mood. Therefore, Texas would need to pass a Medical Marijuana bill in order for me to use THC products to address these

issues. I cannot stress enough how important it is to Sarah's health and functioning to be able to reduce or eliminate her compulsive picking. I cannot leave her alone for more than a moment without worrying about the damage that she will inflict on herself while I am not with her to stop her. Because I do not have 24-hour nursing now that she is over 21, this means that it is a constant battle that I am losing to stop her self-injury. She also does not have a day program to direct her energies, which is also part of the problem. Her podiatrist has already tried to convince me to allow him to surgically remove all of her toenails!!! Of course, I would not agree to this as I find this solution to be far too aggressive. Using THC seems very promising given its established efficacy for anxiety and pain, and it sure doesn't cost thousands of dollars every month (unlike her current regimen of drugs)!!!

As the legislature considers the various Medical Marijuana bills, I would like to stress that people of all ages should be given access to Medical Marijuana when their doctor feels that it is warranted. Had my daughter had access to the various products being produced today when she was young, I feel certain that she would have had a much better life. Because anti-seizure medications are given on a try-it-and-see basis, my daughter has suffered many severe reactions to these medications, including a life-threatening reaction to Neurontin at age 5 during which she attacked me and my mother biting us both seriously many times!!! That reaction required four adult EMTs to hold her down while I dressed her (she had writhed in pain screaming on the bed as she ripped off her clothes!), and then she was wrapped in a pediatric restraining jacket in order to transport her to the ER where she had to be sedated!!!

By legalizing marijuana for medical use, patients are guaranteed as to what they are purchasing, including if the medical marijuana product was grown organically without the use of pesticides or herbicides. This is similar to FDA regulation of prescription medications. Further, by passing a medical marijuana bill, patients seeking relief by using cannabis products are not left without any other option than illegal sources of medical marijuana products. No sick person wants to put their liberty in danger by breaking the law in order to find relief from their symptoms. Therefore, I support House Bills 837 and 3785.

Thank you for your time and consideration.

Tracy Steinbach
2904 Laguna Court
Plano, TX 75023
tsteinbach@tx.rr.com

Respected Legislators,

My Dad, William R. "Bill" Wester was an amazing man, husband, father, and grandfather. He was smart, funny, gentle, kind as well as an avid reader and poker player. He was a friend to everyone who came in contact with him; even those who frequently lost money to him in Texas Hold'Em games. As Naval Veteran who served on the USS De Moines. He taught Red Cross swimming lessons for decades so that he could share his love of the water and swimming with children and adults alike.

Bill was not my biological father but he was the man who chose to be my Dad when married my Mom. He was an amazing role model and example of a good man. He encouraged us to be active in our community and showed us the joy and fulfillment volunteerism brings. All of his kids are still active members of the Garland ELKS lodge #1984 because of his influence.

When his first grandson was born, he became Papa Bill and over time, delighted in the role of Papa for another 12 grandchildren as well. He taught most of his grandchildren to read as well as swim. He even potty trained most of his grandsons. As wonderful of a grandfather as Bill was, he was an even better husband.

He worshipped my Mom and delighted in making her happy from the moment he came into our lives. Until Bill, I had very few memories of my Mom happy. He was her "Knight in Shining Armor" and they were like honeymooners for over 20 years.

Slowly our Bill was taken from us, he started not getting lost while driving and having problems remembering how to play poker. He started forgetting how to dress himself. For a while, he could still comprehend what he read, so we put up written instructions for every task he forgot how to accomplish. Then the avid reader could no longer read. None of the Alzheimer's medications his Alzheimer's specialist at the VA prescribed help his symptoms.

Bill began experiencing what is called Sundowning Syndrome, which is confusion and agitation beginning in the evening. He barely slept at night and was instead up worrying about an endless list of things. He would get agitated with my Mom, so I came over at night and stayed up with him to keep him from going outside or waking my Mom up and upsetting her with his change in personality. None of the medications he was prescribed helped these symptoms, most made them markedly worse or made him basically comatose. Desperate and considering placing my Dad in an Alzheimer's facility, my Mom agreed to try tincture made from Cannabis to see if it might help my Dad's symptoms. He slept all night with the very first dose and woke up alert and much less confused.

Medical Cannabis tincture given once during the day and again at bedtime helped my Dad sleep through the night instead of pacing and worrying until exhausted, he would finally fall asleep for a few hours. It also helped alleviate the agitation toward my Mom in the evenings. They were once again able to have a loving relationship, instead of the confused combative one Alzheimer's had cruelly given them. They slept together in the same bed again. For the first time in almost 3 years, I was able to spend nights in my own home and my Dad was able to spend the last 9 months of his life in his home once again in love with his wife.

Cannabis has no recorded overdose or toxicity related deaths associated with it. In comparison, according to the FDA's own website; there are over 2 MILLION serious ADRs (Adverse Drug Reactions) yearly. 100,000 DEATHS caused by prescription medications yearly. ADRs are the 4th leading cause of death ahead of pulmonary disease, diabetes, AIDS, pneumonia, accidents and automobile deaths. The nursing home patients ADR rate— 350,000 yearly.

My Mom and I could have been arrested for possession the Cannabis Concentrate that gave us our Bill back. Please vote yes on HB 837 and afford patients and caregivers the right to use medical records and doctors statements to defend themselves if they ever find themselves facing charges for possession of often more effective, safer plant based medication.

Bill's Favorite Daughter,

Tracy Ansley

Tracy Ansley 5390 County Road 2658 Royse City Texas 75189

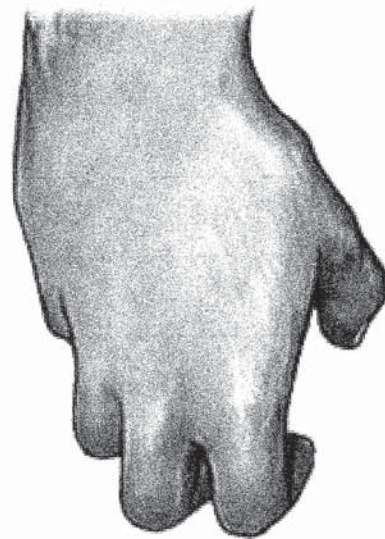
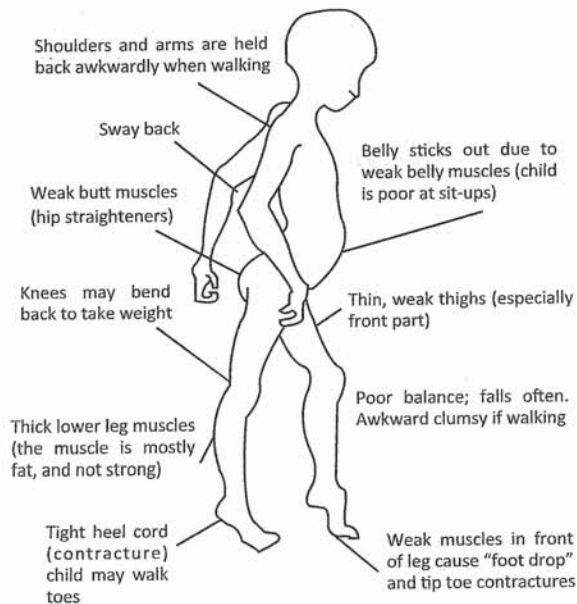
Becker muscular dystrophy

Becker muscular dystrophy is an inherited disorder that involves slowly worsening muscle weakness of the legs and pelvis. Becker muscular dystrophy is very similar to Duchenne muscular dystrophy, except that it gets worse at a much slower rate and it is less common. The disorder is passed down through families (inherited). Having a family history of the condition raises your risk. Becker muscular dystrophy occurs in about 3 to 6 out of every 100,000 births. The disease is found mostly in boys.

Females rarely develop symptoms. Males will develop symptoms if they inherit the defective gene. Symptoms usually appear in boys between ages 5 and 15, but may begin later. Muscle weakness of the lower body, including the legs and pelvis area, slowly gets worse, causing 1) Difficulty walking that gets worse over time; by age 25-30, the person is usually unable to walk; 2) Frequent falls; 3) Difficulty getting up from the floor and climbing stairs; 4) Difficulty with running, hopping, and jumping; 5) Loss of muscle mass; 6) Toe walking; 7) Muscle weakness in the arms, neck, and other areas is not as severe as in the lower body. Other symptoms may include breathing problems, Cognitive problems (these do not get worse over time), Fatigue, Loss of balance and coordination.

There is no known cure for Becker muscular dystrophy. The goal of treatment is to control symptoms to maximize the person's quality of life. Some doctors prescribe steroids to help keep a patient walking for as long as possible. Activity is encouraged. Inactivity (such as bed rest) can make the muscle disease worse. Physical therapy may be helpful to maintain muscle strength. Orthopedic appliances such as braces and wheelchairs may improve movement and self-care. Genetic counseling may be recommended. Daughters of a man with Becker muscular dystrophy may carry the defective gene and could pass it on to their sons.

A.D.A.M., Inc. is accredited by URAC, also known as the American Accreditation HealthCare Commission (www.urac.org).



Contracture of fingers of right hand
(clawed hand)

Cannabinoids Help Muscular Dystrophy Symptoms

Cannabinoids are now known to have the capacity for neuromodulation, via direct, receptor-based mechanisms, at numerous levels within the nervous system. These provide therapeutic properties that may be applicable to the treatment of neurological disorders, including anti-oxidative, neuroprotective effects, analgesia, anti-inflammatory actions, immunomodulation, modulation of glial cells and tumor growth regulation. Beyond that, the cannabinoids have also been shown to be "remarkably safe with no potential for overdose." CBD-rich strains are best choice. Sativa dominant x Indica.

References

1. Kliegman RM, Behrman RE, Jenson HB, Stanton BF. Muscular dystrophies. In: Kliegman RM, Behrman RE, Jenson HB, Stanton BF, eds. Nelson Textbook of Pediatrics. 18th ed. Philadelphia, Pa: Saunders Elsevier; 2007:chap 608.

Medical Marijuana and Muscular Dystrophy

Muscular dystrophy encompasses an entire group of more than 30 inherited disorders, all of which cause the loss of skeletal muscle tissue and accompanying muscle weakness. Unfortunately, all of the disorders that make up the muscular dystrophy, or MD, group are known to degenerate, or get worse over time. As a result, keeping the patient comfortable and as pain-free as possible is often one of the most prominent treatment goals. Muscular Dystrophy Common Groups Treated with Marijuana Among the common members of the group of MD disorders are Becker muscular dystrophy, Duchenne muscular dystrophy, Emery-Dreifuss muscular dystrophy, Facioscapulohumeral muscular dystrophy, Limb-girdle muscular dystrophy, Myotonia congenita, and Myotonic muscular dystrophy. Muscular dystrophy encompasses an entire group of more than 30 inherited disorders, all of which cause the loss of skeletal muscle tissue and accompanying muscle weakness.

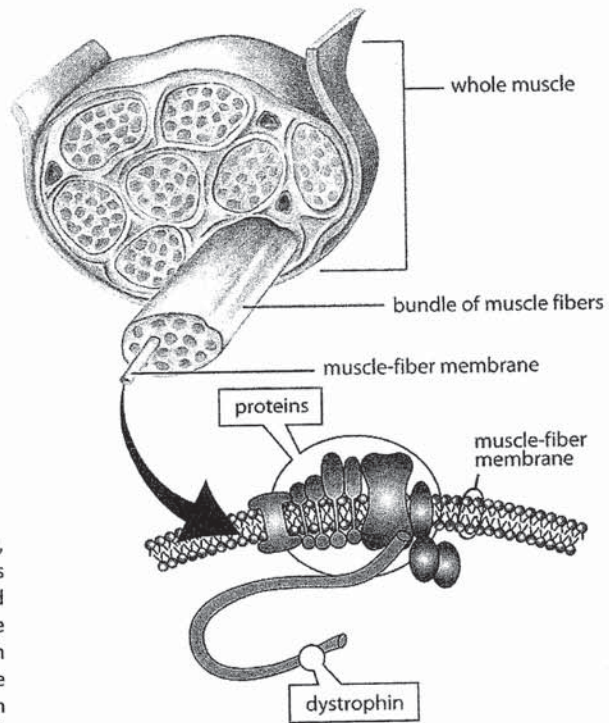
MD itself does not typically cause severe pain; however, secondary chronic pain associated with the disorders is estimated to affect two-thirds of the sufferers. Pain is caused by muscle cramps or spasms as well as stiff joints, pressure sores and muscle twitches. While traditional treatments such as physical therapy, heat application and exercise can alleviate some of the pain associated with MD, narcotic pain medication is often required at some point. Opiates, the group of pain medications typically prescribed for sufferers of chronic pain, can help to alleviate pain; however, they also come at a high cost. Side effects of opiate based medications can be severe and dangerous. Aside from the risk of addiction, opiate based pain medications can also cause severe constipation, dizziness, drowsiness, respiratory depression, nausea, vomiting, difficulty urinating, itching and a variety of other negative side effects. In addition, patients who use opiate based narcotic pain medications typically build up a tolerance to the medication rather quickly, meaning more of the same medication is needed to control the pain.

Medical marijuana may help MD sufferers who live with chronic pain avoid building up a never-ending tolerance to opiate based pain medication. A recent study looked at the effect of adding medical marijuana to the daily regime of patients who consume opiate based pain medication for chronic pain. The study found that the participants experienced an average drop in pain level of 27 percent while not significantly affecting the blood-levels of the prescription drugs. For MD patients, in particular, excessive levels of opiates in the blood can be extremely dangerous given the respiratory problems common to MD sufferers. The fact that medical marijuana was able to reduce pain levels without increasing opiate blood levels is important.

Smoking marijuana has been found to be the most effective and rapid mechanism for relaying the active compounds to the brain, thereby allowing the sufferer to feel immediate relief from pain as well as offering better control over medication levels. Smoking anything, however, is clearly not good for your lungs or respiratory system. An MD sufferer may have a particularly compromised respiratory system. Luckily, there is another, equally effective, yet healthier mechanism for using medical marijuana - vaporization. Because the active compounds in marijuana, known as cannabinoids, are volatile, they can be vaporized at a temperature level significantly lower than that needed to reach combustion, or smoke. As a result, hot air can simply be drawn through the marijuana, which in turn vaporizes the cannabinoids and frees them for inhalation.

Unfortunately, there is no known cure for any of the MD disorders. Conventional treatment attempts to control seizures and muscle spasms as well as provide physical, respiratory and speech therapy in order to give the patient the best quality of life possible. Medical marijuana has been known to help treat some of the side effects associated with Muscular Dystrophy. Unfortunately, all of the disorders that make up the muscular dystrophy, or MD, group are known to degenerate, or get worse over time. As a result, keeping the patient comfortable and as pain-free as possible is often one of the most prominent treatment goals.

<https://www.marijuanadoctors.com/content/ailments/view/114?ailment=muscular-dystrophy>





CBD ONLY VS WHOLE PLANT LEGISLATION

With the emergence of the CBD-focused House Bill 892 and Senate Bill 339, there are many point of views and legitimate concerns that need to be considered and kept in mind. We have to see this from both sides of the spectrum with respect to the "parental point-of-view" of where CBD only legislation can help those suffering, but only a minimal few, a very small percentage in regard to the patient community of Texas. We need to keep in mind to the big picture and the implications that CBD-only legislation poses in regard to our efforts for "whole-plant" medical cannabis legislation in Texas.

It is not the position of the Patient Alliance for Cannabis Therapeutics to influence and/or persuade anyone to testify FOR, NEUTRAL, or AGAINST either one of these bills, all we can do is provide our point-of-view in reference to both HB 892 and SB 339.

One aspect that we must keep in mind is that in the case of such CBD strains, for example "Charlotte's Web", these strains are classified and considered as Hemp products, due to the non-existent levels of THC. What we need to be clear on is that the bills of HB 892 and SB 339 are not "medical cannabis bills", they are bills that will and should be classified as to what they really are, Hemp bills.

In regard to HB 892 and SB 339, our biggest concern lies in the potential that these CBD bills have in possibly creating a medical system that is, one, extremely limited in its qualifying conditions, only covering a very small percentage of patients suffering from one type of epilepsy, when there are many other forms of the disease and many other conditions that will not be helped by just CBD only, and two, the bills limit ratios on