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Review of the *Narcotic Drugs Act 1967*

The Country Women's Association of Australia (CWAA) appreciates the opportunity to provide input into the Commonwealth Government's Review of the *Narcotic Drugs Act 1967* (NDA) and the Discussion Paper released by the review secretariat and Professor John McMillan AO.

The CWAA is supportive of the legalisation and effective management of the use of medicinal cannabis for terminally ill patients and chronic pain sufferers. The Association's current policy on the matter was passed at its 2006 conference and reconfirmed in February of this year, and is extracted below for the review secretariat's reference.

That the CWA of A requests the Federal Government to consider the legalisation of cannabis for medical purposes, for the relief of pain in the terminally and chronically ill.

The NDA is an important piece of legislation in that it contains the framework for the management of the cannabis plant for medicinal use by state and territory governments. The relevant parts of the Act are those that were inserted by the *Narcotic Drugs Amendment Act* (February 2016) (the 2016 amendments), the subject of this review. It is our view that since those amendments a rather unworkable policy framework has formed Australia wide, which we trust is able to be rectified following this statutory review.

Patient access (and the PBS)

The CWAA believe that it is imperative to consider the fundamental issues of patient access to medicinal cannabis as well as the potential for cannabis medicine to be listed under the Australian Pharmaceutical Benefit Scheme (PBS). Despite the Discussion Paper explicitly ruling out these matters, we believe these matters are central to the test as to whether the legislation is achieving its desired effect as per the objectives of the 2016 amendments. This review should examine whether the legislation in fact does provide for the management and safe use of this medicine in Australia.

As mentioned in the Discussion Paper, this is an untested field of regulation for Australia, and so we appreciate many matters are still in the formative stages. However, the unworkability of the register and approvals process, coupled with the fact that it is estimated there are in excess of 100,000 of patients accessing medicinal cannabis on the illegal (unregulated) market, indicates that the legislation is sub-par.

A messy commonwealth system paired with ad hoc state/territory approval processes

The legislation at a Commonwealth level should provide for a streamlined means for state and territory governments to enable access to medicinal cannabis. The Commonwealth system is not only cumbersome but nonsensical in that the medicine is simultaneously approved and not approved. This occurs because of the requirement of compliance with production standards (GAP/GMP, TGO 93 and 100), and yet it remains unregistered by not being included on the Australian Register of Therapeutic Goods. This also means it is not able to be recognised through the PBS system and treated like other conventional medicines.

Depending on the regulatory system of the individual state or territory, will really determine whether proper access is able to be achieved for patients in that state or territory. CWAA advocates for equal opportunity for all patients be they in regional rural or remote areas, or metropolitan, for all states and territories of Australia.

We understand through data obtained by the advocacy group *United in Compassion* that there are a number of states/territories with less than 13 approvals, whereas the collective number for Australia is over 2000, showing a huge discrepancy in regulation across the states and territories. The NDA needs to enable *equivalent* State and Territory legislative arrangements for approvals and ultimately, equality of access for patients.

What's more, the current scheme only permits prescriptions by specialists rather than general practitioners (GPs). This is not the case for conventional medicines. This is a significant issue for CWAA as this is particularly disadvantageous to those patients in regional, rural and remote Australia, where specialists are very rare if at all existent. For the chronically ill or chronic pain sufferers, travelling hundreds or even thousands of kilometres to see a specialist is going to be extremely difficult if at all possible.

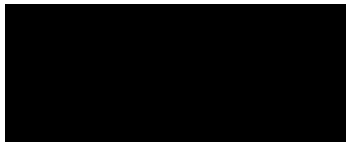
GPs are the ideal professional to prescribe this medicine. Not only are they the first point of call for patients involved in chronic health management, they are accessible for patients in regional, rural and remote Australia.

The big picture

The legislative controls of medicinal cannabis in Australia have really resulted in very limited patient access to this medicine. The CWAA believe there is a huge potential for this product to relieve suffering and pain of terminally and chronically ill patients. Just as the cannabis plant is unique in its ability to ease pain and suffering, and reduce symptoms, the medicine requires a unique policy approach. There is also a unique opportunity for industry and the supply chain in Australia. We implore the Review Team to look at all available options that will increase patient access to the medicine across all States and Territories.

I would be pleased to discuss further the recommendations raised in this letter with the Secretariat. Again, we are appreciative of the opportunity to provide input into this important review.

Yours sincerely



Tanya Cameron
National President