

IMAGINE YOU ARE A CANCER PATIENT undergoing chemotherapy treatments. The dingdong of your doorbell might be music to your ears—and relief for your pain and nausea—as a courier delivers drugs to your door.

Wrapped in foil-lined pouches, your medical marijuana will come like any other pharmaceutical drug; clearly labeled for content and potency, instructions for use, and an expiry date.

RCMP won't swoop in and seal your deal with an arrest for possession of an illegal substance. The pot you bought came from a safe source, grown, packaged, and specially delivered by your dealer, the federal government.

In July of 2001, Health Canada implemented the Marijuana Medical Access Regulations (MMAR), a program allowing, under the Canadian Charter of Rights and Freedoms, a person who suffers from severe and debilitating medical conditions to access marijuana.

Before recreational users start freely rolling fatties, make no mistake—the privilege to partake is limited those who, with physician approval, qualify under specific, governmentcreated criteria. Cannabis (marijuana) is a controlled substance and the growing and possessing of the product remains illegal.

Health Canada media relations officer, Ashley Lemire, puts it this way: "The importation, exportation, trafficking, production, sales, preparations, derivatives and similar synthetic preparations of cannabis is prohibited by law unless"—and here's where things get interesting—"Authorized by Health Canada."

CANNABIS FOR THE CURE

According to Health Canada, those who can apply to possess Cannabis fall into two categories. The first includes people requiring compassionate end-of-life care, those who suffer epileptic seizures, severe pain/and or muscle spasm from multiple sclerosis, spinal cord injury and disease, or arthritis, as well as pain, loss of appetite and severe nausea from cancer and HIV/AIDS infection.

The second category is reserved for those who have debilitating symptoms other than those described in the first category. A medical specialist must confirm a patient's diagnosis and testify conventional treatments have failed or are inappropriate.

GETTING THE GOODS

Prairie Plant Systems Incorporated (PPS), a Saskatoon based company specializing in the growing, harvesting, and processing of plants for pharmaceutical products and research, runs the government grow-op in Flin Flon, Manitoba.

Cultivation, harvesting, drying, packaging, storage, and testing of plants are performed under strict and controlled conditions in a biosecure, underground growth chamber. Soil-free mediums, irrigated potable water monitored for microbial and metal contents, and limited use of pesticides help produce proper pot.

Milling of the plant results in a homogeneous product, required for research purposes and accurate THC levels. Irradiation ensures users with compromised immune systems are not exposed to toxic spores.

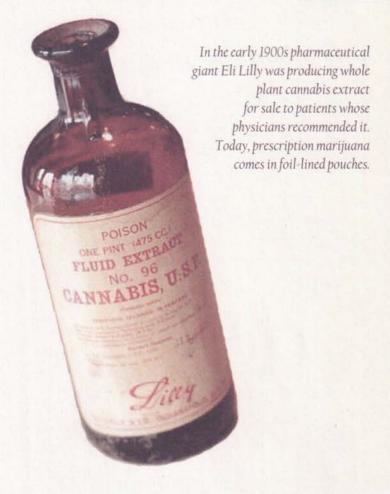
And prices are competitive. Dried marijuana costs \$5 a gram—plus tax. A packet of 30 seeds (3 seeds produce one plant) will run you \$20—plus tax. Like any dealer, the feds want to be paid up front, According to Health Canada's website (www.hc-sc.gc.ca) the program has grown in popularity and significant debt has been incurred as a result of accounts in arrears.

You can put your pot on your credit card but don't expect help from provincial plans. Marijuana is not approved as a therapeutic drug under the Foods and Drug Act. You can, however, claim costs as medical expenses on your taxes.

Health Canada will issue a month's supply of dried marijuana at a time, based upon the daily amount proposed by the medical practitioner, or the government will send a one-time-only shipment of seeds so that a license holder may produce his or her allotted supply.

Not comfortable growing your own stash? The government also issues Licenses to Produce on behalf of patients, to qualifying third parties.

It sounds simple enough. But according to many medical experts, the effects of medical marijuana are anything but clear.



WIELDING WEED: MORE GREY THAN GREEN

Conflicting study results on the medical effects of marijuana along with lack of ability to monitor patient intake, not to mention the controversial nature of the subject, combine to make the prescribing of marijuana murky for Canadian physicians.

A Kelowna doctor (identified as "Dr. Smith" to protect patient confidentiality) says while the call for cannabis is common, endorsing the drug makes him-and many of his colleagues-uncomfortable. "I am in fact a vocal opponent," he says. "The few patients I prescribe for were already using marijuana. They are typically complex patients who historically claim the drug is beneficial but it's very difficult to monitor."

Dyck's Kelowna pharmacist manager, Cameron Zaremba, agrees. "The medication is ordered directly through Health Canada but it isn't approved and it does seem like a messy way to give a drug. There are variable ingredients and it's hard to monitor." Zaremba says while he doesn't see marijuana as a panacea for relief, he does try to keep an open mind, directing interested patients to further information.

Dr. Smith concedes marijuana may alleviate specific symptoms (particularly in spinal cord patients) but he ultimately believes giving the drug the medical nod may cause more head shaking problems than it cures.

Of particular concern to the doctor is the THC (delta-9tetrahydrocannabinol) component of cannabis. Marijuana contains over sixty cannabinoids and several hundred other chemical substances, with THC being the most prominent psychoactive cannabinoid. Its concentration determines the potency of the drug according to Health Canada—and can b incredibly dangerous, according to Smith and innumerable medical professionals like him.

"If you talk to pediatric psychiatrists involved in early psychosis intervention," Dr. Smith explains, "There is a strong anti-marijuana stance in that group due to the effects they say come from heavy marijuana use in preteens and patients in their early twenties."

According to the Canadian Mental Health Association's website (www.cmha.ca), "Marijuana is safer than other street drugs in that no known overdose deaths are recorded from marijuana alone." But the same information page cites several studies suggesting heavy use of marijuana can bring on psychotic states in healthy people and that young people who frequently use the drug are more likely to develop schizophrenia later in life.

Further warnings advise, when used in conjunction with other therapeutic drugs that share the same metabolic pathways, marijuana may mess with the prescribed drug's effects.

NOT THE DEVIL'S WEED

If you want clean, quality cannabis for medical use, Kelowna's BeKind Okanagan Growers and Compassion Club (www.okanagancompassionclub.com) claims to be your answer.

Co-founders, Bob K and his brother in law, Paul (both prefer not to use their last names) opened the club's doors in August of 2009 with a mandate to promote and advocate for the health and emotional well being of medical cannabis users.

While the pair appreciate Health Canada's program, they believe it doesn't support quality of product or ease of accessibility people in crisis need. "The process is too

lengthy," Bob explains. "Physicians are reluctant to sign and even then, the government can turn people down. Without our assistance, people are waiting years to get help."

Club clients include a man with neuropathic pain who was unable to navigate Health Canada's website and a woman with fibromyalgia whose husband was getting ripped off, buying marijuana of questionable content at Kelowna's City Park.

"People of all walks of life use our services," Bob says. "A lot of them are women over 40 who don't want anyone to know they use cannabis. These people are professionals but we've serviced the homeless and drug addicted too."

Which is not to suggest BeKind isn't a reputable business. "This isn't a place to get high," Bob insists. "You can't come in here without medical documentation saying you have a condition that Cannabis helps."

Rob Callaway, a member of the team with a Masters degree from UBC Okanagan, passionately educates visitors. "The general public only hears about the THC content," he explains. "But CBD (cannabidilo) is the anticonvulsant, anti-anxiety component that counters the psychotic affects of THC. Health Canada only offers one strain and it seems to be too low in CBD."

"We help people get exactly what they need," he says. "If you have epilepsy we suggest you smoke Sativa product. For spinal cord patients, Indica is good."

Ada Bertucci, an Okanagan Valley resident with Multiple Sclerosis, has been using medical marijuana since 1994. She used to buy 'outdoor' (pot with no name to it, from places like the park) but now she gets everything she needs, including dried marijuana she smokes and cookies she ingests, from BeKind. "Marijuana helps with muscle spasm, pain management, and insomnia," she explains. "I used to take Valium. Now I only use Cannabis. It has kept me sane and spiritually it helps me deal with my diagnosis."

For the most part, RCMP aren't interfering. Staff Sergeant, Brian Gateley, unit commander for the South East District Federal Drug Section in Kelowna, says medical marijuana users stay within police radar. "We hear about people using it according to regulations. They aren't really the problem. Our concern is more with distributors using licenses inappropriately."

"Technically we are illegal," Bob admits. "But the supreme court of Canada says compassion clubs must be recognized for the good they do. It's civil disobedience."

LAST DANCE WITH MARY JANE

You can't help but like the North Okanagan's Marcel Dubois (not his real name). A charmer with an infectious smile, he'll bend your ear, weaving his way through a lifetime of memories, spinning stories in his gravelly French Canadian accent. But you may not approve of his medical methods.

"I drink too much coffee," he admits. "Ten to fifteen cups a day." His physician shakes her head at the implausible invincibility of his lungs, subjected to steady streams of smoke—and not just the tobacco type.

"I've been smoking pot for half my life," Dubois says. "It relaxes me."

He used to smoke marijuana recreationally but since surviving colon caner in 1985 (he now has a colostomy) Dubois turns to cannabis for comfort. "I don't bother with the government kind," he admits. "I get if for free from friends."

He says he has his doctor's approval, claiming cannabis relieves pain, helps him sleep, and improves his appetite, not to mention his indigestion. "I used to have ulcers. I tried every kind of medication but now I smash marijuana up really fine and sprinkle it on my cereal with a banana and brown sugar. The ulcer is gone."

Dubois lives alone. He's still driving, hunting, and woodcarving. He says quite simply, the secret to his longevity is not slowing down. An artist, sculptor, carpenter, musician and violin-maker, he's always "smoking busy."

"Marijuana keeps me going," he grins. "That and Aloe Vera gel."

At 101-years-old this October, clearly Dubois is onto something.

What may not be so obvious is where to stand on the issue of medical marijuana. It's a complex, controversial subject—one demanding thorough research, expert advice, a little caution and a lot of open-mindedness before decisions can be made. At the end of the day, it's very Canadian.