FOR IMMEDIATE RELEASE
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Hawaii State Department of Health approves
Amyotrophic Lateral Sclerosis (ALS)
as a qualifying condition for medical cannabis use

HONOLULU – The Hawaii Department of Health has added Amyotrophic Lateral Sclerosis (ALS) to the list of qualifying conditions for medical cannabis use. The decision was based on a rigorous review and analysis of written and oral testimony, a public hearing, and peer-reviewed scientific evidence.

Of the 29 states and U.S. jurisdictions that permit medical cannabis, 19 include ALS as a qualifying health condition.

Although the Hawaii Department of Health found little evidence to support the value of medical cannabis for ALS; DOH determined medical cannabis may be appropriate for patients diagnosed with ALS after receiving a comprehensive assessment by a patient’s physician or APRN and a risk-benefit discussion.

The Petition Process
In April 2017, the Department of Health opened the petition process to allow patients, physicians, and advance practice registered nurses (APRNs) to petition the department to add new debilitating medical conditions to the existing list of conditions that could benefit from the use medical cannabis.

Unlike prescription medications that undergo rigorous clinical trials for the treatment of certain health conditions before being released to consumers, medical cannabis does not have that same level of evaluation by the U.S. Food and Drug Administration.

Under Hawaii Revised Statutes, all new conditions must be thoroughly reviewed from an evidence-based perspective and be subject to a public hearing. This year, the Department of Health received two such requests and began the review process.

The other condition submitted for consideration was general anxiety disorder (GAD). The Department of Health declined this request because at this time there is inconclusive medical evidence that cannabis has beneficial use in the treatment or alleviation of symptoms of anxiety, social phobia, and social anxiety disorder (SAD), and no evidence specific to GAD.

In addition, because the prevalence of GAD, high rate of comorbidities, and dearth of scientific
evidence to support the use of cannabis in the treatment of GAD, the potential for adverse outcomes is a public health concern.

**Next Year’s Petition Process Deadline**
Next year’s deadline to request the addition of new health conditions is Feb. 19, 2018. The petition form is available online for patients, physicians, and APRNs and must be submitted by the deadline to be included in the public hearings tentatively scheduled for May 2018. Any petitions received after Feb. 19 may be considered the following year.

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