



## Why Won't The DEA Allow Us To Discover The True Nature of Marijuana?

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George Hodgin's mission seemed simple: manufacture uncontaminated, chemically consistent cannabis for use in scientific research on marijuana's medical effects, all while complying with federal regulations surrounding the production of a drug still classified by the Drug Enforcement Administration (DEA) as highly dangerous.

Despite new rules the DEA promulgated eighteen months ago, with the stated goal of allowing expanded cultivation of marijuana for scientific research, George Hodgin is still in administrative limbo.

Hodgin, a former Navy SEAL, approached us recently for advice after encountering numerous regulatory roadblocks. We have no special knowledge or ability in that direction; but perhaps publicizing his endeavors will nudge public opinion (and regulators) in the right direction.

Expanding research access to high-quality marijuana is important. The [Marijuana Policy Project](#) estimates that roughly 2.5 million patients use medical marijuana – just in states with legal medical marijuana programs. This number is likely an underestimate, as it does not account for individuals obtaining marijuana for medical use through non-medical channels.

Marijuana's illegality at the federal level prevents the collection of much needed data that could help drive future research.

Veterans represent a particularly important category of medical marijuana users. Although Veterans Health Administration physicians are prohibited by federal law from recommending medical marijuana, [new guidelines](#) issued in December 2017 revise existing standards to encourage doctors and patients to discuss the use of medical marijuana without fear of recrimination.

A [January 2017 report](#) from the National Academies of Sciences, Engineering, and Medicine acknowledges the difficulty researchers face in acquiring appropriate cannabis products and recommends actions be taken to ameliorate the situation; yet, obstacles remain.

The major difficulty facing those who want to produce or obtain cannabis products for research purposes is that the DEA currently classifies marijuana as a Schedule I drug, which means the DEA views it as having “no currently accepted medical use.” But thirty states and the District of Columbia have laws permitting the medical use of marijuana. Additionally, the research available suggests potentially widespread medical applications for marijuana.

Legal restrictions on access have severely hampered medical research into marijuana’s possible effects. One solution would be to reschedule marijuana, yet the DEA has repeatedly denied petitions to do so. In a July 2016 denial, the DEA asserted that marijuana has no currently accepted medical use in the United States because, among other reasons, “the scientific evidence is not widely available.”

This will be true, by definition, so long as the DEA makes it virtually impossible to conduct scientific research. Catch 22.

In August 2016, the DEA changed its rules to allow registered entities to supply researchers with the quality and quantity of marijuana needed for scientific study. Despite the rule change, however, the DEA has yet to approve a single application.

In testimony given to the Senate Judiciary Committee last October, Attorney General Jeff Sessions confirmed that 26 applications are outstanding from marijuana suppliers; but the DEA has not approved a single one.

The DEA’s resistance is part of the long-running, tough on drugs approach it has taken since the 1970s. As recently as 2013, courts upheld the DEA’s monopoly on the production of (federally) legal marijuana. The current administration shows no intention of changing this stance.

In a recent poll, 91 percent of Americans supported the use of medical marijuana. For years, the DEA’s opposition to legalization or rescheduling has hinged on the argument that no scientific evidence suggests medical benefits.

Despite hopes that the August 2016 rule change would usher in a new era of research, the past year and a half has proven that inaction remains the status quo. Until something changes, countless sufferers of pain, PTSD, and other ailments will remain trapped in a legal gray zone.

Allowing properly vetted companies to manufacture and distribute research grade marijuana legally is the least the DEA can do.

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