17 January 2020

Committee Secretary
Senate Standing Committees on Community Affairs
PO Box 6100
Parliament House
Canberra ACT 2600

By email to: community.affairs.sen@aph.gov.au

Dear Committee

Re: Current barriers to patient access to medicinal cannabis in Australia

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) welcomes the opportunity to contribute to the Senate Standing Committee on Community Affairs’ Inquiry into the current barriers to patient access to medicinal cannabis in Australia (the Inquiry). The RANZCP is the principal organisation representing the medical specialty of psychiatry in Australia and New Zealand and is responsible for training and educating psychiatrists, as well as representing psychiatrists on policy issues. The RANZCP has more than 6700 members including more than 5000 fully-qualified psychiatrists and 1600 members who are training to qualify as psychiatrists. The RANZCP is guided on policy matters by a range of expert committees which are well-placed to provide advice in relation to the Inquiry.

The RANZCP emphasises the importance of regulating medicinal cannabis using the same rigor and safeguards as other pharmaceuticals and ensuring that any education in relation to prescribing medicinal cannabis is based in the most up-to-date, sound research and evidence. Such education activities should be provided by bodies which do not have conflicting interests or pecuniary stakes in the medicinal cannabis industry. In the RANZCP’s clinical memorandum in relation to the medicinal use of cannabinoids, the RANZCP supports more research into the use of cannabis for medical treatment, particularly treatment for mental health conditions, as the efficacy of medicinal cannabis as a treatment for these conditions is unconfirmed.

Education and training in relation to the regulation of medicinal cannabis

The RANZCP advocates for continued regulation of medicinal cannabis, in line with the regulation of other unapproved therapeutic goods. However, we note that the opportunities for training and education from government bodies about the regulation of medicinal cannabis are somewhat limited.

The RANZCP considers that education and training activities about the regulation of medicinal cannabis should be provided by independent bodies which do not have interests in the marketing and commercial sale of medicinal cannabis. The RANZCP considers the TGA, as the relevant regulator, is best placed to provide education and training in relation to this issue. The TGA could provide holistic training which addresses the relevant regulatory, medical, therapeutic and legal considerations involved in the regulation of medicinal cannabis. We consider that this could be achieved by the TGA nominating ‘access to medicinal cannabis’ as one of its education priority areas for 2020-2021.
There is also a need for process-based information in relation to making applications to the current Special Access Scheme and Authorised Prescribed Schemes established by the *Therapeutic Goods Act 1989* (Cth) (the TG Act). Although the TGA website provides lengthy information in relation to the schemes, and specifically accessing medicinal cannabis, there is no clear, easily accessible information about how to apply to each of the schemes. We therefore advocate for the development of a process map, infographic or other such document, specifically tailored to the needs of medical practitioners, which would set out the application process for each scheme. This publication could complement the other educational measures suggested above.

We note that in many state and territory jurisdictions, there is a requirement for the relevant Department of Health or related government entity to approve a medical practitioner to prescribe medicinal cannabis. The RANZCP is of the view that any educational activities or publications formulated by the TGA should be created in conjunction with the relevant state and territory body to ensure that the information provided is comprehensive and references the interaction between Commonwealth and state and territory laws in this area. The RANZCP would be willing to consult with the TGA or the Commonwealth Department of Health to provide feedback in relation to any education activities or publications that are developed.

Additionally, the RANZCP has previously expressed its concern in relation to the process whereby a specialist medical college can endorse a medical practitioner who is applying to become an Authorised Prescriber. At the time of consultation relating to the amendments, the RANZCP advised that it would not provide such endorsements and has not provided such endorsements following the commencement of those amendments. The RANZCP would willingly provide advice or further information in relation to its concerns in this area.

**Training and information for medical professionals about prescribing medicinal cannabis**

The RANZCP emphasises that training and information for medical practitioners about prescribing medicinal cannabis, particularly for mental health conditions should be based on sound evidence. Such training and information should only be provided where there is evidence that shows medicinal cannabis is an effective, safe and empirically supported treatment for mental health diagnoses and relevant population groups.

The RANZCP’s [Clinical Memorandum: Medical use of cannabinoids](#) identifies that further knowledge needs to be acquired in relation to the efficacy, effectiveness and safety of using cannabis in psychiatric treatment. Any training for medical practitioners in this area must also recognise this current gap. The RANZCP encourages continued research into the medicinal uses of cannabis, including for psychiatric indications, to ensure that medical practitioners can provide their patients with appropriate treatments which are supported by evidence.

Should you wish to discuss this submission further, please contact Ms Rosie Forster, Executive Manager, Practice, Policy and Partnerships on (03) 9601 4943 or at rosie.forster@ranzcp.org.

Yours sincerely

Associate Professor John Allan

President

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