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August 8, 2018

Karen L. Smith, MD, MPH  
Director and State Public Health Officer  
California Department of Public Health  
1615 Capitol Avenue  
PO Box 997377, MS 0500  
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Dear Dr. Smith:

On behalf of the California Conference of Local Health Officers (CCLHO), I sincerely appreciate the opportunity to provide input on the California Department of Public Health (CDPH) Proposed Cannabis Regulations. CCLHO was established in statute in 1947 to advise the California Department of Health Services (now the California Department of Public Health), other departments, boards, and commissions, as well as officials of federal, state and local agencies, the Legislature and other organizations on all matters affecting health. CCLHO membership consists of all legally appointed physician health officers in California's 61 city and county jurisdictions. CCLHO discussed and voted on recommendations regarding the proposed cannabis regulations at the CCLHO Board meeting on August 2, 2018.

With the recent legalization of adult-use cannabis and the continuing commercialization of medical cannabis, California is entering a new era, which holds the potential for both benefit and harm. Cannabis already affects communities throughout the state, and this will only increase in the coming years, with unknown net long-term impacts. As such, it is incumbent on us, as policy makers, subject matter experts, and leaders to be deliberate and conscientious in designing the statutory framework in order to both protect health and to ensure the success of the policies enacted by the legislature and approved by the voters.

CCLHO believes that great attention should be given to protecting public health and minimizing negative health impacts. In the interest of protecting the health of our citizens and communities, we urge you to include the following considerations in regulation. However, we do recognize that CDPH does not have full oversight or authority over all aspects of legal cannabis:

#### **The need to conduct ongoing research and epidemiology and measure impacts:**

Changing cannabis policies mean California has an opportunity to lead in Cannabis scholarship and research. There is particular urgency in understanding more about biologic effects; health, societal and cultural impacts; and changes in norms and behaviors over time. Funding and support for the creation of metrics and on-going measurement of cannabis impacts is critical so that we can accurately evaluate and adjust policy as needed to protect health.

#### **The need to ensure product safety:**

Cannabis is a rapidly evolving industry creating new and innovative products that have not been widely tested or used. It is critical that the regulatory entities enact policies to maximize product safety. Regulation is needed to ensure safe content of cannabis products and prevent product contamination by pesticides, solvents and other chemicals. Edible products should be self-stable (non-potentially hazardous food products) and have clear, correct labels. In particular, CCLHO supports a prohibition on the infusion of alcoholic beverages with cannabis products and the prohibition of any product containing a non-cannabinoid additive that would increase the potency, toxicity, or addictive potential or that would create an unsafe combination with other psychoactive substances, such as with caffeine or nicotine.

**The need to protect against overdose and accidental ingestion:** Products need to be immediately identifiable as cannabis products. CCLHO supports limits on the amount of active ingredients allowed per dose and per package, and product packaging and labeling designed to prevent accidental ingestion. For non-medicinal use, an edible cannabis product should not contain more than 10 milligrams THC per serving; and 100 milligrams THC per package. Product labels should be unobstructed, conspicuous, clearly written, and have the universal cannabis symbol.

**The need to properly warn against use in pregnancy and breastfeeding.** CCLHO believes the statement that "cannabis use while pregnant or breastfeeding may be harmful" is insufficient. The warning should clearly state that cannabis should not be used by those who are pregnant, breastfeeding or planning to become pregnant. For example, The American Congress of Obstetricians and Gynecologists (ACOG) states that for breastfeeding, "marijuana use is discouraged."

**The need to prevent non-medical youth use.** Available research shows that cannabis may negatively impact the developing brain in individuals up to age 25. This is an important detail: while adult-use may be legal for ages 21 and older, chronic use in youth and during early adult life is more risky than use above age 25. CCLHO recommends adding an additional statement to warning labels that reflects the clear evidence indicating impact on the developing brain and the recommendation against use by individuals under 25 years of age.

To prevent youth and young adult use, funding is needed for comprehensive prevention programs, including ongoing outreach and education work. Strategies are needed to reduce the chance youth will use cannabis, such as policies to address product visibility, glamorization of product use, advertising that targets youth, and discounting of products to youth friendly price points. In addition, cannabis products and labels should not be designed to be attractive to children (such as cartoons; imitations of candy packaging; likeness to images, characters, or phrases that are popularly used to advertise to children) or have information that is false or misleading. Moreover, cannabis products should be prohibited from a design that easily confused with commercially available foods that do not contain cannabis.

Thank you again for this opportunity to provide input on this important public health issue. If you have any questions, please feel free to contact me at [Ken.Cutler@co.nevada.ca.us](mailto:Ken.Cutler@co.nevada.ca.us) or at 530-265-7154.

Sincerely and on behalf of the CCLHO membership,

*Original signed by Dr. Ken Cutler*

Ken Cutler, MD, MPH  
President, California Conference of Local Health Officers

cc: Lori Ajax, Chief, Bureau of Medical Cannabis Regulation