



WHO Expert Committee on Drug Dependence Closed Door Sessions May Result In International Cannabis Re-Scheduling

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Global health experts are preparing to formally raise no objections for wider medicinal use of marijuana following groundbreaking talks in Geneva, as calls grow for the creation of a pan-European marijuana lobby group to help shape and formulate policy.

The World Health Organization's (WHO) Expert Committee on Drug Dependence (ECDD) [reviewed the chemical composition of cannabis](#) and its impact on the body in closed door sessions from November 12 to 16, and experts believe the groundswell of support will result in a downgrading of cannabis at international level.

The ECDD, studying the effects of cannabis officially for only the second time since the 1950s, will present its findings to the United Nations and the public on December 7, in regard to a revision of the International Conventions' Schedule, which currently ranks marijuana alongside heroin and crack.

Earlier this month, members of an influential European Parliament committee [voted to tackle](#) regulatory barriers blocking research and funding of medicinal cannabis, triggering a wave of optimism in European circles that the market could be opening.

"There is a sudden realisation this is happening, and the European Union needs a view on it," said consultant neurologist and medicinal cannabis expert Professor Mike Barnes. "We have formed a Medical Cannabis Society in the UK, of clinicians and doctors, and I would like to see a European-wide medical cannabis society, for just that purpose; to lobby, to put a sensible balanced view forward."

The 11-strong ECDD committee [heard evidence](#) on the effectiveness of the compound cannabidiol (CBD), considered by many a 'miracle' medicine at the heart of the legalisation debate. The WHO itself has previously identified CBD as having potential to ease symptoms relating to Alzheimer's, Parkinson's, multiple sclerosis, anxiety, depression, and cancer.

It is the first time that the ECDD has conducted a full review of cannabis and cannabis-related substances since the International Drug Control Conventions were established in 1961 and 1971. Until now, cannabis has been under the strictest control (schedules 1 and 4).

In research papers ahead of the meeting, the WHO said the increasing number of countries exploring the potential therapeutic applications of cannabis-derived products or cannabis-based medicines has triggered a rapid rise in quality scientific work on the medical use of cannabis-derived products, and "there is evidence that these products can have effective therapeutic applications."

"There is no reason why the medical use of cannabis should not be regulated by the same procedures as other medications ... where its effectiveness has been demonstrated in randomized clinical trials," WHO researchers said.

Although the WHO has no powers itself to decide if cannabis should be legalised, it does hold sway with the UN hierarchy when decisions are made over drug categories.

Professor Barnes, who this summer secured the first long-term licence for the use of CBD in the high profile case of young British epilepsy sufferer Alfie Dingley, told Cannabis Law Journal he hopes to coordinate a European group that will help legislators draw up a new medicinal cannabis framework.

He said the WHO would be crucial in setting the tone, as the largest barrier is reversing the UN convention that binds cannabis as a Schedule 1 narcotic.

"It makes it difficult for an individual country to make it legal," Professor Barnes said. "Some have got round it in all sorts of creative ways, but it would be enormously helpful if the UN, as a result of recommendations from the WHO, made the changes. I am told if the WHO comes out and says they would favour medicinal cannabis, the UN would almost certainly follow."

The European cannabis market could top €115.7 billion (£102 billion) by 2028, according to recent research, but with no formal bloc-wide voice the industry risks letting a once-in-a-generation opportunity to influence any new laws slide.

“Millions of patients in America and Canada have access to medicinal cannabis and it’s crazy that patients suffering with the same conditions in the UK and Europe don’t,” added Robert Jappie, head of the regulatory practice at law firm Mackrell Turner Garrett. “We are going to see big changes across Europe. That is why these organisations, the EU and WHO, are having to review their positions; it’s a huge opportunity for business.”

Health group portfolio holders in the European Parliament, the EU’s elected legislative, passed a formal resolution in regard to granting greater support to cannabis research, which puts the matter on the agenda of the wider bloc. The matter will be debated at the full parliament later this year, with growing public and media support that the time has come for a review of laws.

“We are trying to break down the barriers to getting licensed cannabis based drugs to the patient who is suffering immense pain,” said Liberal Democrat MEP Catherine Bearder, a member of the parliament’s health committee.

She said the wildly differing regulatory regimes at national level across the EU were causing silos, as there is no single bloc directive on cannabis to provide domestic lawmakers with a common rulebook.

“If there is a licensed drug at national level somewhere else, a British doctor should be able to get hold of that and prescribe it,” she said. “We need a European Medical Cannabis Association or something similar, a constant voice when there are pharmaceutical reports going through. The potential is there, but we need more people, MEPs and others, to listen.”

The economic argument is likely to be the centre of most of the lobbying efforts, as the world looks to Canada and the US as test cases for both taxation and evidence of harm reduction.

Jappie said he had seen detail inside the UK’s economic impact assessment on medicinal cannabis which could earn the Treasury £3.5 billion (€4.2 billion), and was a driver behind his law firm’s move to open a

specific cannabis regulatory department. "It's a simple business decision," he said. "We are saying it will happen and are taking steps to help businesses prepare."

Canada has positioned itself as the dominant player in the global cannabis scene, and experts believe the big firms are watching Europe "like eagles" ahead of any potential rolling back of regulations in the single market.

"All the big firms seem to be coming from there, it's all driven by Canada at the moment," said Professor Barnes. US firms have been hamstrung by variances in state and federal law, however pot stocks surged following the midterm elections as several states voted to legalise, taking the total number of US territories with some access to 33.

"I think a big barrier has been removed with [former Attorney General] Jeff Sessions disappearing," said Barnes. "He is very consistently anti-cannabis, and with him out of the way there is a better chance of removing the illegality."

Sessions was fired by President Donald Trump following the US midterm elections, to the joy of pro-marijuana businesses in the US. Trump himself has said on record he would favour legalisation of medicinal cannabis at federal level.

"The big players are stuck in their own states at the moment," said Barnes. "They cannot export. Once that changes the big US growers will enter the market alongside the Canadians, who are right now totally dominant."