

## **MEDICAL CANNABIS — PRESCRIPTIONS**

### *Statement*

**HON COLIN TINCKNELL (South West)** [9.55 pm]: Tonight I would like to bring to the house's notice some more information about the important issue of medical cannabis. Members may be aware that earlier today I asked a question on this issue. Part of the answer was disappointing and another part I was reasonably pleased with. The part that disappointed me was that the Western Australian Department of Health has no current plans to establish a clinical advisory service for the prescription of medical cannabis. However, the Minister for Health reported back to me through the parliamentary secretary that he will ask for a review of any additional services offered in New South Wales; I was pleased to hear that.

Medical cannabis is an important issue to bring to this place and the other place for discussion. I note that in the discussions taking place in this place and the other place right now with regard to voluntary assisted dying and palliative care, medical cannabis is a very important part of the medical issues we face in this state. We have a fantastic health system. I think the health system in Western Australia and generally around the country is close to being second to none; however, it can be improved. Since this government came to power it has legalised the use of medical cannabis in WA, but the system is still quite bureaucratic and requires too many people carrying clipboards, red tape and you name it. It has been made quite difficult to access.

In New South Wales, GPs can legally prescribe medical cannabis if they believe it is an appropriate treatment option and they have already obtained the relevant authority from the Therapeutic Goods Administration. I think this is something our government needs to look at closely. It is important that GPs remain engaged in their patients' overall care with regard to the prescription of medical cannabis. Having bureaucrats involved in that process is an unnecessary evil, as far as I can see, and does not add to the process, especially when we consider the models that are currently running in both New South Wales and Queensland.

I want to be brief tonight, but I will read out a few little quotes from a NSW government information leaflet that I think are very important.

The New South Wales Cannabis Medicines Advisory Service provides —

- Current scientific evidence—sourcing and interpreting
- Advice tailored to patient-specific clinical context
- Product selection, formulations, dosing regimens, titration
- Regulatory requirements, application and approvals process
- Guidance for monitoring, reporting therapeutic and adverse effects
- Clinical trials
- Resources and protocols.

As members can see, it is very thorough, and a model that is considered to be working very well at the moment in both New South Wales and Queensland. Medical cannabis is very important to patients. I will not get all the ailments into this speech, but health professionals, in prescribing medical cannabis, have clearly identified that it helps with the management of anorexia, chemotherapy-induced nausea and vomiting, nausea in palliative care—we have been talking about palliative care in relation to the voluntary assisted dying legislation, and other discussions going on in that space—dementia, non-cancer pain, spasticity, and many other ailments. This is why I raised the matter again. I applaud the government for advancing this matter from the previous situation, and I would like to now take it to the next stage, so that we can help the people of Western Australia who really seriously need cannabis medicine to ease their suffering.