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Chair of the Advisory Council on the Misuse of Drugs
Dr Owen Bowden-Jones

c/o Zahi Sulaiman
Secretary to the Advisory Council on the Misuse of Drugs (ACMD)
Home Office Science Secretariat
Home Office
4th Floor (NE), Peel Building
2 Marsham Street
London SW1P 4DF

26 July 2018

Dear Owen,

SCHEDULING OF CANNABIS-DERIVED MEDICINAL PRODUCTS

I would like to thank the ACMD for the short-term advice dated 19 July on the scheduling of *Cannabis-derived medicinal products*. This is a complex and developing area and I appreciate the pace and rigour with which the ACMD have provided their short-term recommendations.

I share your concerns about the need for patients to have access to medicinal products which meet safety and quality assurance standards. I have been clear that my intention has always been to ensure that we have a system in place which enables those in need to have access to the most appropriate course of medical treatment. It is vital that patients are able to access appropriate products in a timely manner but in doing so we must also balance the need for patient safety and prevent the harmful effects of drug misuse. As such, I accept in principle your first two recommendations that the term *Cannabis-derived medicinal products* should be defined and that only products meeting this definition be made available on prescription as Schedule 2 drugs under the Misuse of Drugs Regulations 2001 (“the 2001 Regulations”).

The Department of Health and Social Care (“DHSC”) and the Medicines and Healthcare products Regulatory Agency (“MHRA”) are currently working with the Home Office on how best to define *Cannabis-derived medicinal products*. I will consult the ACMD following our progress on the definition in the coming weeks. It is our intention to make any required

amendments to the 2001 Regulations by autumn 2018, pending further advice from the ACMD.

I agree with the ACMD's third recommendation to develop additional 'checks and balances'. My officials have been liaising with DHSC to discuss any legal amendments and clinical advice which should be developed to maintain appropriate prescribing whilst minimising the risk of diversion.

As referred to in my commission to the ACMD, I am aware that not all elements of cannabis could be considered as part of the short-term advice. With synthetic cannabinoids, I am concerned about the known harms that these substances can cause. As such, I accept the ACMD's fourth recommendation to keep synthetic cannabinoids in Schedule 1 to the 2001 Regulations pending the 'longer term' review by the ACMD due in July 2019.

I support your conclusion on the need for further clinical trials to establish the effectiveness and safety of *Cannabis-derived medicinal products* and the need to resolve the issue with potential 'barriers to research'. I remain committed to finding an appropriate resolution to this issue at the earliest opportunity and will respond to your advice on legitimate use of controlled drugs: research and healthcare separately.

I will be writing to the ACMD in the coming weeks to consult in further detail on the proposed definition and suggested additional supporting clinical and legal frameworks.

A handwritten signature in black ink, appearing to read 'S. Javid', with a small comma at the end.

Rt Hon Sajid Javid MP