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## **Epilepsy Community Disappointed DEA Won't Reschedule Cannabis to Improve Access for Research**

### **DEA Does Not Recognize Medical Value of Cannabis Despite Promising Research, Considers Expansion of Sites That Can Grow Cannabis for Research**

Landover, MD - The epilepsy community, comprised of 3 million Americans living with epilepsy and seizure disorders, their families and caregivers, as well as the health care providers that care for them and the scientists who are searching for new treatments and a cure, eagerly awaited the Drug Enforcement Agency's (DEA) announcement regarding rescheduling of cannabis to benefit greater research. Removing cannabis from Schedule I in the Controlled Substances Act would have lifted federal barriers to cannabis research. This would have paved the way for new treatments as well as much needed information that can help families make informed choices about medical cannabis.

"We are disappointed that the DEA has not rescheduled cannabis. Without action from the federal government, we continue to face challenges that make it hard for researchers to explore the connection between seizure control and cannabis. Children and adults experiencing uncontrolled seizures need innovative therapies that can improve their health and quality of life, so we remain committed to passing federal legislation that would lift barriers to cannabis research and protect these individuals and their families," said Phil Gattone, president and CEO of the Epilepsy Foundation.

To date, 25 states and the District of Columbia have adopted laws that allow for cultivation, production, dispensing and possession of medical cannabis or cannabidiol (CBD) treatments. There is one therapy derived from cannabis currently in the market, and another is undergoing clinical trials within guidelines outlined by the Food and Drug Administration (FDA). All this points to the medical value of cannabis.

The Epilepsy Foundation is encouraged that the DEA is considering expanding the number of sites that can grow cannabis for research and will closely monitor the implementation of this expansion. We are hopeful that the criteria will not be too burdensome and allow for the meaningful expansion of growing sites. Currently it is difficult for scientists to conduct laboratory-based research studies to better understand how cannabinoid compounds might be working in the brain and to organize clinical trials involving cannabis because it is a Schedule I substance and only the National Institute for Drug Abuse (NIDA) can cultivate cannabis for medical research. Despite these barriers to research, scientists and manufacturers have attempted to complete clinical trials using CBD, a non-psychoactive component of cannabis, within FDA guidelines.

"This decision by the DEA highlights ongoing barriers to additional research on cannabis. More pre-clinical and clinical studies are needed to fully understand its role as a treatment option for the epilepsies. We strongly support research that will allow families and physicians to have well informed discussions regarding the potential benefits and risks of cannabinoid-based therapies," said Brandy Fureman, vice



president of research and new therapies for the Epilepsy Foundation. “The DEA’s decision to allow more organizations to grow cannabis for research is a positive step forward, but we remain concerned that the process may be too onerous and that answers to these necessary and important questions will not be available in the near term.”

While the DEA acknowledged some promise for CBD for epilepsy and seizures, they only looked closely at 11 studies, none in epilepsy or children, and none published since 2013. Recent studies and preliminary findings from clinical trials involving cannabis have shown minimal side effects or abuse potential for CBD when used to treat uncontrolled seizures. The complexities associated with cannabis research remain a formidable barrier to advancing our understanding of the connection between cannabis, seizure control, and improved health outcomes.

Despite the need for greater research into the connection between cannabis and health outcomes and the uncertain legal climate, individuals turn to medical cannabis products when FDA-approved therapies have failed. They may fall victim to unscrupulous individuals selling unsafe products marketed as medical cannabis, feel the need to consider breaking federal and state laws by traveling across state lines to obtain cannabis treatments in other states, or move to another state where they can access these treatments.

The Epilepsy Foundation will continue to advocate for removing federal barriers to cannabis research and policies that promote innovation for the nearly one million people living with uncontrolled seizures.

### **About Epilepsy**

When a person has one or more unprovoked seizures, they are considered to have epilepsy. Epilepsy affects 3 million people in the U.S. and 65 million worldwide. This year, another 150,000 people will be diagnosed with epilepsy. Despite all available treatments, 4 out of 10 people with epilepsy continue to experience uncontrolled seizures while many more experience less than optimal seizure control.

### **About the Epilepsy Foundation**

The Epilepsy Foundation, a national non-profit with nearly 50 affiliated organizations throughout the U.S., has led the fight against seizures since 1968. The Foundation is an unwavering ally for individuals and families impacted by epilepsy and seizures. The mission of the Epilepsy Foundation is: to lead the fight to overcome the challenges of living with epilepsy and to accelerate therapies to stop seizures, find cures, and save lives. The Foundation works to ensure that people with seizures have the opportunity to live their lives to their fullest potential. For additional information, please visit [epilepsy.com](http://epilepsy.com).

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