

THE CHALLENGES POSED BY CBD PRODUCTS MANUFACTURED FOR WIDESPREAD PUBLIC CONSUMPTION

*CND Side Event
March 3, 2020*



Presenter

John Redman
Chief Executive Officer
**Community Alliances
for Drug Free Youth**

501(c)3 founded in late 1970's as a grassroots parent-led anti-drug movement

Substance abuse prevention organization that works at the state, national and international levels to encourage multi-stakeholder collaborations that drive policies and actions that:

- Target illicit drug usage and related problems
- Promote research-based prevention strategies and programs
- Create initiatives that support community-based drug awareness and education



“We have a profound responsibility to support sound drug policy that will explicitly protect our youth”

A faint, light blue world map is centered in the background of the slide. The map shows the outlines of the continents and major ocean basins. Overlaid on the map is the word "INTRODUCTION" in a white, serif, italicized font.

INTRODUCTION

ECDD / WHO: recommendation for discussion today

In section 5.5 (Cannabidiol Preparations) of Annex 1 of ECDD's 41st Report, ECDD recommended the following:

Recommendation 5.5:

The Committee recommended that a footnote be added to Schedule I of the 1961 Single Convention on Narcotic Drugs to read: "Preparations containing predominantly cannabidiol and **not more than 0.2 percent of *delta*-9-tetrahydrocannabinol** are not under international control".

ECDD rationale:

"The cannabidiol preparation approved for the treatment of childhood-onset epilepsy, Epidiolex, contains **not more than 0.15% Δ 9-THC by weight** and has no effects indicative of potential for abuse or dependence. In keeping with the recommendation that preparations considered pure cannabidiol not be controlled and recognising that trace levels of Δ 9-THC may be found in such preparations, such as the concentration of 0.15% in Epidiolex, while acknowledging that chemical analysis of Δ 9-THC to an accuracy of 0.15% may be difficult for some Member States."

The problems for discussion here today

The recommendation is based on misuse of Epidiolex® data and it raises significant public health issues.

The problems:

- The THC content of the Epidiolex bottle is 0.01% w/v, which is **20 times less** than the maximum THC level recommended by ECDD to be allowed in CBD preparations. There is therefore **no safety data to support** this recommendation.
- **“0.2% THC” entails a significant amount of THC** – this raises significant public health issues.
- The ECDD recommendation also implies that there are no public health issues with CBD itself – **CBD is not risk free**. In fact, data suggests there are significant liver toxicity and drug to drug interaction issues.
- There are already significant problems with the CBD products being sold in key markets such as the US and Europe – undisclosed levels of THC, pesticides and heavy metals, significant variance from label claims – putting consumers at risk. **Removing all CBD products from scheduling = ‘Wild West’** with no regulations = consumer harm.

Who is going to speak and why

- **Dr Jennifer Triemstra, Cannabinoid Educator, Greenwich Biosciences**
 - World leaders in cannabinoids, including CBD, and gold standard
 - Background on cannabis, what 0.2% THC means in reality, public health risks with CBD
- **Jaclyn Bowen, Executive Director, Clean Label Project**
 - Extensive independent testing of CBD products
 - Significant issues with CBD products already being sold to consumers – what future may look like if all removed from scheduling
- **John Redman, Chief Executive, CADFY**
 - Extensive insights on THC
 - Risks of allowing for 0.2% THC and call to action for you all

CADFY's concerns:

Despite scientific evidence that THC (tetrahydrocannabinol) is a public health threat, especially among children and adolescents:

- Availability and consumption of products containing THC is steadily rising
 - Illicit, recreational and therapeutic usage
 - At higher concentrations and doses shown to induce dependence and addiction
 - Without the public's awareness of health concerns or amounts contained in products consumed
- Rampant promotional activities for both regulated and unregulated products, some targeted at vulnerable populations
- Regulation is lax, at best



We're treating THC as a Commodity

One dropper, two dropper, three...

Oregon – 5mg THC produces psychoactivity; THC-edible \leq 5mg THC/serving



Restricted by age

Common **dispensary** products available



A joint contains 63 mg,
amount absorbed is

17 mg



Edibles can be 50 mg/
package and serving is

5 mg



! NOT restricted !

Common **Grocery or Convenience Store**
CBD products available



A 30 count bottle can
have 360 mg and a
single 4-gram CBD
gummy can have

8-12 mg



30 milliliter bottle of
CBD oil could contain 82
mg and a serving

1.8-2.7 mg/ml

One
Serving



1.8-2.7 mg

Two
Servings



3.6-5.5 mg

= about 1/2
teaspoon

Three
Servings



5.4-8.2 mg

Two servings
is over the
limit and
easily abused

Available at a store near you...

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CERTIFICATE OF ANALYSIS

Product Name: Charlotte's Web Hemp Extract Oil Maximum Strength Mint Chocolate 30mL
Product Batch: A00700
Product Code: 910.069
Best By: July 2020

Parameter	Result
Cannabinoids <small>Testing performed by Eurofins Food Chemistry Testing - Boulder, CO</small>	
THC	2.8 mg/mL
THC-A	0.033 mg/mL
THC-V	None Detected
CBD	64.3 mg/mL
CBD-A	0.44 mg/mL
CBD-V	0.31 mg/mL
CBG	0.32 mg/mL
CBG-A	None Detected
CBN	0.23 mg/mL
CBC	2.3 mg/mL
Total THC per Bottle	84 mg
Total THC per Serving	1.4 mg

THC 2.8 mg/ml

Manufactured By: Charlotte's Web Inc.
Manufacture Date: 16JAN19, 18JAN19 - 20JAN19
Batch Size: 297,540 mL
Units Manufactured: 9,773



THC 2.89 mg/ml

PROVERDE LABORATORIES Test Certificate

Certificate ID: 45017
Client Sample ID: GR121218 50mg/ml
Lot Number:
Matrix: Tincture - MCT Oil

Received: 12/18/18
Scan QR Code for authenticity

Green Remedy Inc.
4104 Bishop Lane
Louisville, KY 40218
Attn: Chris Smith

Authorization: Jon Podgorni, Lab Manager
Signature: *Jon Podgorni*
Date: 1/11/2019

PJLA Testing
Accreditation # 80585

The data contained within this report was collected in accordance with the requirements of ISO/IEC 17025:2005. I attest that the information contained within the report has been reviewed for accuracy and checked against the quality control requirements for each method. These results relate only to the test article listed in this report. Reports may not be reproduced except in their entirety.

CN: Cannabinoid Profile & Potency [W1-10-17 & W1-10-17-01]
Analyst: LG
Test Date: 1/9/2019

The client sample was analyzed for plant-based cannabinoids by Liquid Chromatography (LC). The collected data was compared to data collected for certified reference standards at known concentrations.

ID	Weight %	Conc.
D9-THC	0.30 wt %	2.89 mg/mL
THCV	ND	ND
CBD	5.58 wt %	53.63 mg/mL
CBDV	0.04 wt %	0.34 mg/mL
CBG	0.05 wt %	0.50 mg/mL
CBC	0.15 wt %	1.47 mg/mL
CBN	ND	ND
THCA	ND	ND
CBDA	ND	ND
CBGA	ND	ND
Total	6.12 wt %	58.83 mg/mL
Max THC	0.30 wt %	2.89 mg/mL
Max CBD	5.58 wt %	53.63 mg/mL

Ratio of Total CBD to THC 18.5:1

Max THC (and Max CBD) are calculated values for total cannabinoids after heating, assuming complete decarboxylation of the acid to the neutral form. It is calculated based on the weight loss of the acid group during decarboxylation: Max THC = (0.877 x THCA) + THC. ND = None detected above the limits of detection (LLD)

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GREEN REMEDY
FULL SPECTRUM HEMP EXTRACT
NATURAL
500mg CBD
1 FL. oz. (30mL)

A faint, light blue world map is centered in the background of the slide. The map shows the outlines of the continents, with a slightly darker blue color for the landmasses and a lighter blue for the oceans. The word "CONCLUSIONS" is superimposed over the center of the map.

CONCLUSIONS

Conclusions and Request for Action

- ECDD/WHO recommendation is based on inaccurate use of data – not therefore evidence based – and entails significant risks to public health, notably:
 - **Significant levels of THC** – 0.2% THC entails **notable risks**
 - **Liver toxicity and drug to drug interactions with CBD**
 - **A Wild West CBD market** with poor quality products and consumer risk – particularly in developing markets
- Urge the ECDD/WHO **to revisit the recommendations** and ensure they are evidence based and full scope of risks to consumers considered
- Encourage Member States to **scrutinise the recommendation/s** and the data supporting them, and to think carefully before voting for them
- All speakers here today are ready and **willing to share evidence-led points of view** and discuss the recommendations, and wider public health issues, with you over the coming days here in Vienna and in the months to come