



Episode 834: Medical Marijuana Is Allowed Only in Some Places, Right? Not If This Company Has Anything to Say About It

Guest: Jordan Page

WOODS: I didn't know anything about this organization you're involved in until you emailed to tell me about it, and now I'm completely fascinated. So give me the one-minute pitch. You've got a 60-second ad on TV. I want you to tell me the gist of what's the name of the organization and what does it do.

PAGE: Sure, sure. Well, the organization's name is CannaSense. It is a medical cannabis collective that helps patients in all 50 states gain access to cannabis medication. We have a streamlined process that is in strict compliance with the Compassionate Use Act of 1996 and the Affordable Care Act and the U.S. Constitution. We help patients that have all different kinds of illnesses that cannabis treats, and we found a legal framework with which to help them get legal access, even in states where there are no marijuana laws.

WOODS: I find this very interesting for a number of reasons. I have a natural interest in anything involving getting people out from under government regulations, sure.

PAGE: Sure.

WOODS: But this is particularly interesting and clever, because we've all observed these different medical marijuana laws being passed in the various states, and even in some states that have passed them they're still somewhat restrictive. They'll say the physician may prescribe this but only for the following ailments, only in the following cases.

PAGE: Exactly.

WOODS: And you're saying that the legal argument being used here bypasses all of that. Now, I've read the rationale for it, the idea being that you've got — It's a combination of California law, the Affordable Care Act, and the provision in the Constitution saying that the states need to give full faith and credit to certain things that are done in other states. And you put together and that allows physicians to prescribe cannabis medication to people in all the states. Do you mind just watching us through each of those steps, each of those legal steps?

PAGE: I'd be happy to. So let me kind of start from the beginning here. This was all put together by a couple of visionaries, Neil Schloss and Louis Santiago. Lou is a well-

known cannabis activist for probably the last 40 years. He was one of the first people to introduce CBD oil as an alternative to smoking marijuana. And as many people know, the CBD oils have no psychoactive properties. And Neil Schloss is a very successful CPA over in New Jersey. He was big in the Ron Paul movement. I've known him for years, and we've been friends for a long time. And they put their heads together and put together a great legal team, and over the last ten years created this framework by doing lots and lots of research and studying case law and just putting it all together.

So the steps – I call this the trifecta of the legalities of CannaSense. So the Compassionate Use Act of 1996 was a California law that was actually very groundbreaking in its time, and it allows for anyone to become a member of a marijuana cannabis collective with the recommendation of a doctor. And so years go by, and along comes Obamacare, the Affordable Care Act. And everybody has something to say about Obamacare, but at least one good thing that it did was it created telemedicine, where you can see your medical professional through the Internet and get your prescriptions that way. And legally it's the same thing as seeing them in person, but seeing them from the comfort of your own home. And then we have the Article IV, Section 1, which is the reciprocity clause, as you mentioned, of the Constitution, that full faith and credit is given to every state, that the laws and acts passed in their state will be honored in every other state, even if that state's laws are different.

So we set our patients up with a teleconference doctor's appointment with a California doctor, through a particular California doctor service that we have partnered with exclusively called PrestoDoctor. And there's a staff of doctors that are available for patients to meet with, and they do appointments seven days a week. So we set our patients up with a teleconference call with a doctor, and they get a California medical card through this process. They get a treatment plan, and they get a recommendation for membership in CannaSense, which is a California prescription for membership. And that recommendation is then processed by the CannaSense staff to maintain compliance with these laws and legitimacy of the recommendation, and within one business day they're approved, and then they can order from the store. We then ship from our fulfillment center. We ship to all 50 states. And it goes right to the patient's home, so they're not exposing themselves to elements that they don't want to expose themselves to.

It comes right to their home. We have a very streamlined, very easy, and inexpensive process, because as you mentioned, Tom, even in states where medical marijuana laws have been passed, you're still jumping through just tremendous hoops. It is extremely expensive. You're asking permission and trying to convince some person that you need this medicine that you have every right to have in the first place. So our process, it's extremely inexpensive. It's a fraction – a fraction of a fraction – of the cost that most people are paying for their doctor's appointments and getting their medical cards, and it's an extremely quick and easy process.

WOODS: Before we go any further, I just want to elaborate on something you said almost as an aside, because I bet a lot of people who don't follow this closely might have wondered about this. Somebody using medical marijuana, they probably think, Well, they may be getting their ailment treated, but what does that mean? They have

to be stoned all the time in order to get treatment? And it turns out that's not the case.

PAGE: Correct.

WOODS: So why is that not the case? What's the explanation for that?

PAGE: Well, because there are many different compounds in the cannabis plant, and we call these cannabinoids. And CBD is a cannabinol that is just pure medicine. It has no psychoactive properties. THC 9, tetrahydrocannabinol 9, is the psychoactive compound in cannabis that gets people high. Now, it gets a bad rap because it's psychoactive, but it's also a very powerful medicine. It's a very powerful anti-inflammatory.

And what most people don't know, Tom – and I do mean most people – is that every human body is endowed with a cannabis system, an endogenous cannabinoid system. Whoever you believe created the human race, whether it was God or evolution or otherwise, we were created to interact with this plant, because we have a system that is specifically there to use cannabis to help create homeostasis throughout the whole body.

The cannabinoid system is really like the Internet of the human body. It's a communications network with specific receptors that use cannabis to create communication between all of the systems. If a system gets out of line – like in autoimmune disorders when the immune system is attacking healthy cells, using cannabis can actually shut down that component of the immune system that attacks healthy cells to get it back on track. It's a system that is being studied widely now. There's a lot of information about it, but there has not been a common understanding until recent times.

And I mean, cannabis as actually traditional medicine has been used for thousands of years to treat all different kinds of problems, but as far as the science behind it, it's evolved so much in such a short time; we've really discovered so many aspects of the cannabis system and the cannabis plant and what it's capable of doing for the human body beyond people using it recreationally to get high. There are so many applications for it. And quite frankly, the extracts of the plant are extremely concentrated and extremely powerful medicines.

And the combination of THC and CBD, the combination of the psychoactive and non-psychoactive is really kind of like the jab-cross, the 1-2 punch for the medicine aspect of this. And really, there's lots of illnesses that you can get where you really need both to truly counteract it.

But CBD is a very powerful medicine in its own right. It's very good as an anti-inflammatory, as an anti-seizure medication, anti-anxiety. It can actually counteract the anxiety-causing aspects of the psychoactive properties in THC. So if you're medicating with cannabis oils and you're feeling anxiety, you can actually take CBD, up your dose of CBD to counteract the anxiety and bring it down. So there's a lot of aspects of it that are common misconceptions.

I know when I was much younger – I mean, I haven't consumed cannabis for probably 17 years, and when I was consuming it, I was a kid; I was irresponsible and had no appreciation or any kind of responsible use habits about it. I wasn't using it medicinally, and I had the wrong motivations entirely.

And like I said, I'm not a recreational user of the plant, but I believe very much in the healing power of the plant and what it's capable of doing. There are so many illnesses that we see that are seeing a complete reversal of symptoms. There's a lot of anecdotal evidence, personal testimonies of people saying this disease or that disease is basically gone. I don't experience it anymore since I started taking cannabis oil.

We've seen thousands now of cases of children who have terrible seizures, grand mal seizures and the like, who, some of these kids can have 500 seizures a day and it destroys their families and bankrupts their families, and they try everything that modern medicine has to offer, and the very last thing that they ever try after they've been on 23 different medications at the same time, they go to Colorado and get on some CBD oil, and the child has the first seizure-free day of their life.

And so there is a tremendous amount of evidence for this and science behind it. I've been passing around some information. I've got over a hundred clinical studies and scientific journals proving the effects of cannabis and its effects on cancer and tumors and all kinds of different illnesses.

And it's just overcoming the stigma, the social stigma that was perpetrated starting in the 1930s that cannabis is the devil's weed, reefer madness and getting people over that hump. But I think a lot of the culture is waking up. I'm talking to a lot of folks from the older generations who realize now that they were lied to, and they have all these different problems now, and they're ready to try cannabis.

And I talk to patients every day. Literally seven days a week I talk to patients, and the feedback I'm getting from them since I began working with CannaSense back in September is that this has been life-changing and it was a Godsend. I have folks who, this has affected them so much and improved their quality of life so much, they cry on the phone with me just talking about how much joy it actually brings them to have pain-free days, to be able to sleep at night, to be able to eat for once.

It's an incredible – because so many folks have inflammatory diseases, and cannabis is a potent anti-inflammatory. It helps with anxiety and seizures; it helps with PTSD, autoimmune disorders. I get a lot of people who have multiple sclerosis who are seeing tremendous reversal in their symptoms, because cannabis treats all the different things that MS causes. Lyme disease also, Tom, is a huge plague that I never understood and never took the time to look into, but the things that the folks with Lyme disease suffer is horrendous, and again, cannabis goes right to the heart of all of the symptoms that they have, and it does not have any dangerous side effects like pharmaceutical drugs do.

WOODS: I have a lot of questions I want to ask you. Let's first thank our sponsor.

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I guess the main thing on my mind here involves the fact that this kind of treatment, as far as I know, remains medically controversial. Now, that's not to say that you can't find people who have had success with it or swear by it, but it doesn't seem to me that there is medical consensus around it necessarily. And even when you ask Ron Paul, who granted, he was an OB and it's not really his area, he didn't necessarily sound to me anyway like he was completely on the medical bandwagon as much as he was on the liberty bandwagon of this. How do you sort all that out?

PAGE: Very easily. We have look at the motivations of the American medical establishment. I mean, the pharmaceutical industrial complex is a trillion-dollar industry. And cannabis is a direct threat to their bottom line. I mean, essentially that's what that is. I mean, the federal government owns the patent on medical cannabis, and yet they're the ones saying that it has no medicinal value. So there's a very blatant, huge conflict, and you know where I stand on all of that. But just for the listeners who may not know, the holder of the patent on medical cannabis is the federal government. So the pharmaceutical industrial complex was able to become what it became because of the demonization of cannabis.

And cannabis is a safe, natural treatment. And I wouldn't call it an alternative treatment; it's a traditional treatment. Like I said, it's been used for thousands of years and was only really demonized in the first half of the 20th century to pave way for the Controlled Substances Act, which ended up taking cannabis out of medicine, allowed the pharmaceutical industrial complex to grow into the leviathan that it is now, and it also allowed the prison industrial complex to explode too, another trillion-dollar industry. Both industries are build on the misery of human beings, and half the people in the prison system in America – we have the largest prison system per capita in the world, and half of the people in prison are there for nonviolent drug offenses, the vast majority of which are there for cannabis. So cannabis is a cash cow for police and for prisons, and keeping it illegal is also extremely profitable for the pharmaceutical industrial complex. So there's a huge conflict in modern medicine.

And doctors, quite frankly – as far as it remaining controversial, doctors, quite frankly, are not taught anything about cannabis in medical school. It's not part of the curriculum. I've talked to many doctors about this, and they're not taught anything about it. It's only when they start beginning to do their own homework and their own research that they start to find that – most of these doctors don't even know that there is a cannabis system in the body. So if they don't have the information, if most mainstream doctors aren't privy to that, then how are things ever going to change?

And so we have a whole new generation of medical doctors, internal medicine doctors, who are taking the time to actually research cannabis. And there is a tremendous amount of scientific proof of the effects of cannabis on the human body and treatment of a whole cornucopia of various diseases. And it's starting to become more and more mainstream, and more and more people are getting it. I mean, the folks that I talk to, Tom, are not people with dreadlocks who go to Grateful Dead concerts. They're retirees who have tried literally everything, and someone finally said, "Why don't you look into cannabis?" and they've researched it, they've tried it. It was the only thing that's ever helped them with whatever illness that they have, and now they're believers.

It really comes down to having to experience it for yourself, to see that this is an alternative to the mainstream medical establishment's answers, which many times they don't have answers. All they have are more drugs with more side effects that need to be treated with more dangerous drugs with more dangerous side effects, and it goes on and on. I mean, I talk to folks all the time who are on 25 different medications at the same time and have been on them for 18 years, and all they want to do is wean off of these drugs and get healthy. And so cannabis provides that answer.

But then the problem becomes they live in a state where there is no medical marijuana, and they're actually exposing themselves to legal issues. And so that's where CannaSense comes in, because again, we have the legal framework with which we operate under, and we're in strict compliance with the laws that I mentioned – the Compassionate Use Act, the Affordable Care Act, and Article IV, Section 1 of the U.S. Constitution – as well as the Tenth Amendment, which, all rights not given to the federal government are reserved for the states or the people. And that's you and me. We have the right to our medicine.

And one of the most brilliant parts about this process for patients anyway is that, especially in states where there are no medical marijuana laws passed, is that CannaSense has also created the CannaSense Foundation. And the foundation has five different points of charitable work that they do: cancer research, helping children, helping veterans, and providing hospital care, providing charitable hospital care. But the most important one in my mind is our legal defense fund.

And so the CannaSense Foundation has an endowment and continually receives donations to the legal defense fund so that if in the unlikely event that any of our members or patients ever have to defend themselves, if there are ramifications for their use or possession of cannabis and they're a member of this program, that the CannaSense Foundation will actually provide them for a fully paid-for legal defense team so that they won't have to deal with a public defender or having to shell out thousands of dollars in defense of themselves. The CannaSense Foundation will actually provide them with a legal defense team at no cost.

WOODS: Okay, that's an interesting point. I hadn't realized that – or actually, now that I think about it, maybe I did. I was having a discussion about this the other day, but that had slipped my mind. Because I was going to ask you if so far – I know this hasn't been around for super long, but have any patients run into any legal difficulties so far?

PAGE: No, not yet. And quite frankly, we don't anticipate that they will, because again, we advocate responsible use. We advocate of course never operating motor vehicles under the influence of THC, anyway. CBD has no psychoactive properties, so there's no problem there. But any kind of product that has psychoactive properties we advocate, of course, never operating machinery or motor vehicles. And using it responsibly, using it medicinally, not recreationally – not that I have a problem with people using it recreationally at all. Again, I'm with Ron Paul. I'm all for freedom. But the discussion here is about medicinal use.

So in the year and a half that CannaSense has been actively shipping to all 50 states, it hasn't happened once – which isn't to say that we're not anticipating it. I mean, we're not anticipating it, but we're ready for it if it ever does happen. I mean, more than half of the board of directors of CannaSense are all high-powered attorneys. This entire legal framework was assembled by attorneys. And so being in strict compliance with these laws is very important. It's crucial to the program, really, and it gives a huge level of comfort to our members and patients who, they're not interested in breaking the law; they want to be in compliance with the law.

I mean, there's the other argument that you shouldn't have to worry about that, that natural law says that you have the right to do what you want to do with your body, that you own yourself, which of course I agree. But we recognize that we're living under certain levels of tyranny in this country, or we wouldn't be having this conversation. And so that being said, there is a legal framework that is an avenue around the roadblock of this bizarre and absurd Schedule I classification of a non-narcotic plant.

WOODS: Early on you said something about the doctor service that you guys are using. Could you tell me more about the kind of doctor I might encounter if I used CannaSense? Is this a totally mainstream doctor? Am I going to be dealing with somebody, as Pat Buchanan might say, wearing sandals and beads? What am I going to see when I'm having that Skype meeting? Just so I'm ready, that's all.

PAGE: Sure, you're talking to a board-certified California internal medicine physician who is well versed in cannabis medication. They're just like any doctor you would see at any doctor's office in America, only they have intimate knowledge of the effects of cannabis as used as medicine. So yeah, again, this isn't about sandals and dreadlocks; this is just a very straightedge, very straightforward doctor's appointment that you get, but you're just doing it over the Internet.

WOODS: Now, you know this much more intimately than I do because you actually have been working there for a number of months, so tell me what major thing in this story I've left out in asking you these questions. What am I overlooking? Is there anything big?

PAGE: Well, I would say that this program is really one of a kind, Tom. There are many medical cannabis collectives, but none of them ship to all 50 states under this legal framework. None of them offer the legal protections that CannaSense offers. None of them offer a compensation aspect to members who are able to refer other members. So this is actually a way for patients to actually get their medication at no cost if they're helping to refer other members into the program and essentially become caregivers like myself. Even though they're patients, they can also be caregivers and help other patients get access to their medication.

And in essence, if you look at it from a distance, this could effectively end the medical refugee crisis, people having to leave their home states of origin and move to Colorado or Washington or California or Alaska in order to get it under the color of law in those states. Because the laws favor this anyway, and operating in compliance with this particular program, with this particular system, it is legal. I mean, I guess it's going to depend on which agent of the state you ask, but in essence if you were to argue this in

court, I mean, the argument is there. The argument is there. The Compassionate Use Act, Article IV, Section 1, it just makes sense. And this is helping just so many people not have to relocate their families in order to get lifesaving medication.

And for a lot of people, this is a question of life and death – not for everyone. For some people it's a question of ongoing suffering or not ongoing suffering. And some people – I mean, I've talked to a lot of people who work for the government, and they get drug tested and they're not willing or they're not able most of the time to leave that job and find something else, and so even though this is exactly what they need and this is exactly what helps their particular condition, they unfortunately and sadly choose not to do it because they're afraid. I mean, there's a huge amount of fear that goes into this with a lot of people, and we're trying to offer them an option to take some of that fear away and give them some rest in that and to not have those worries about the legal ramifications, because we have their back.

WOODS: Well, it's very interesting what you're doing, very, very interesting. As I said, I know nothing about it, but then as soon as I heard the explanation for how it could be legally justified, I thought doggone it, these people are clever. That is a clever – I don't see – it seems like you've got a bulletproof presentation there. So it's very, very interesting. I hope people will check it out, CannaSense.com, right?

PAGE: That's correct, and if any of the listeners are interested in looking more into the program, they can email me at JordonPageMusic@gmail.com or at JPage@CannaSense.com. I get mail for CannaSense at both emails. And I'm happy to talk to anybody that is interested in pursuing medical cannabis and helping them get access. Because really that's what this is about, Tom. It's about helping patients get access where they have none. And we don't just service folks in non-medical states. We service folks in medical states too, because again, it's a much cheaper, simpler, and quicker process, and you're not asking for permission. You're not asking the state for permission. You're simply using the letter of the law and a very simple, streamlined process to get access to the medication that you need.

WOODS: Well, it's tremendous and very interesting. So CannaSense.com, I'm going to link to it at TomWoods.com/834. Always fun talking to you, Jordan, and it's a very, very interesting project. I wish you the best of luck with it.

PAGE: You too, Tom. Thanks so much for having me on.