



Oregon Board of
Chiropractic
Examiners

Effective Date:
January 16, 2020

Date approved/ratified:
January 16, 2020

Hemp and Marijuana Derived Products

POLICY

The purpose of this policy is to provide licensees with guidance regarding the use and recommendation of hemp and marijuana derived products.

Authority:

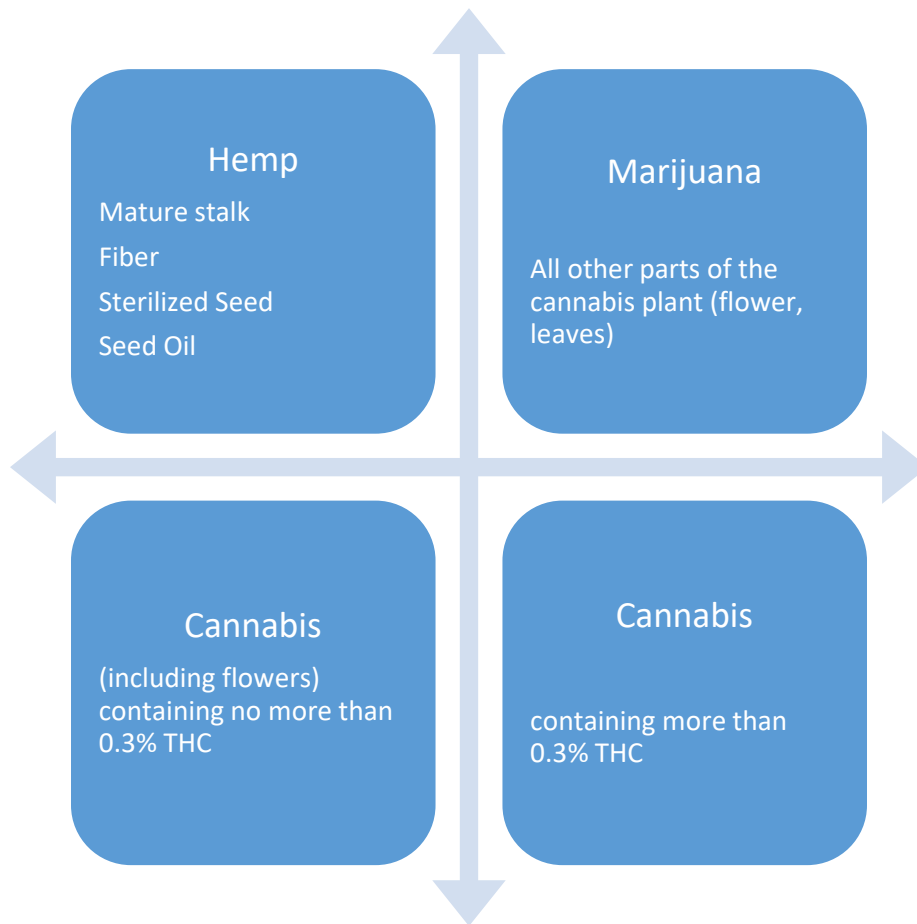
- 1) ORS 475B, OAR 603, and OAR 333
- 2) ORS 475B and OAR 845-025 regulate recreational marijuana
- 3) ORS 571 details the requirements for the sale and use of CBD products
- 4) ORS 614 details the regulations around recreational marijuana.
- 5) ORS 676.150 details health professionals' duty to report
- 6) ORS 684 details the scope of practice for chiropractic physicians
- 7) OAR 811-015-0010, Clinical Justification
- 8) OAR 811-015-0070 Scope of Practice Regarding Examinations, Test, Substances, Devices, and Procedures
- 9) Oregon Retail Sale of Cannabidiol (CBD) Products FAQ:
https://www.oregon.gov/pharmacy/Imports/Cannabidiol_CBD_Informational_6.2019.pdf
- 10) FDA Regulation of Cannabis and Cannabis-Derived Products, Including Cannabidiol (CBD) <https://www.fda.gov/news-events/public-health-focus/fda-regulation-cannabis-and-cannabis-derived-products-including-cannabidiol-cbd> (last visited October 31, 2019)
- 11) FDA and Marijuana: Questions and Answers
https://www.fda.gov/newsevents/publichealthfocus/ucm421168.htm#dietary_supplements (last visited December 26, 2018)
- 12) Statement from FDA Commissioner Scott Gottlieb, M.D., on signing the Agriculture Improvement Act of and the agency's regulation of products containing cannabis and cannabis-derived compounds,
<https://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm628988.htm> (last visited December 26, 2018)

Definitions:

“Industrial hemp” has the meaning as defined by ORS 571.300 (2017). By definition, such products contain an average tetrahydrocannabinol (THC) concentration that does not exceed 0.3 percent on a dry weight basis.

“Marijuana” and “cannabinoid products” have the meaning defined in ORS 475B.015 (2017).

“Cannabinoid,” “cannabinoid product,” “cannabinoid concentrate,” “cannabinoid extract,” “cannabinoid tincture,” and other similar terms have the definitions specified by OAR 845-025-1015 (2019) and ORS 475B.791.



Regulatory Oversight

	Medical Marijuana	Recreational Marijuana	Industrial Hemp
Product	Marijuana	Marijuana products and CBD products derived from marijuana or industrial hemp containing $\geq 0.3\%$ THC.	CBD products containing $\leq 0.3\%$ THC derived from industrial hemp..
Location of Sales	Designated growers or OHA regulated medical marijuana dispensaries.	Licensed OLCC recreational marijuana dispensaries.	Any retail location.
Restriction on Sales	Must have a medical marijuana card. Individuals with a qualifying medical condition and a recommendation for medical marijuana from an attending physician may apply for a medical marijuana card.	Must be >21 years of age or older. Source of CBD must be labeled – hemp or marijuana.	None. Unless the product is used for the sale of inhalant delivery systems and their components, then must be 21 years of age or older.
Regulatory Body	Oregon Health Authority (OHA)	Oregon Liquor Control Commission (OLCC)	Oregon Department of Agriculture (ODA)

*Please note that these regulatory bodies above may have specific statutory or rule requirements for sale of products. Please contact those agencies directly for further information.

All hemp items sold at retail in Oregon must comply with the product testing required for like-marijuana items (solvents, pesticides, etc.).

PROCEDURES

1. Medical Use of Cannabidiol (CBD)

As of the date of the enactment of this policy, the U.S. Food and Drug Administration (FDA) continues to ban the use of CBD in food products and restricts its use as a dietary supplement. Based “on the evidence, FDA has concluded that THC and CBD products are excluded from the dietary supplement definition under sections 201(ff)(3)(B)(i) and (ii) of the FD&C Act, respectively. Under those provisions, if a substance (such as THC or CBD) is an active ingredient in a drug product that has been approved...or has been authorized for investigation as a new drug for which substantial clinical investigations have been instituted and for which the existence of such investigations has been made public, then products containing that substance are outside the definition of a dietary supplement. FDA is not aware of any evidence that would call into question its current conclusions that THC and CBD products are excluded from the dietary supplement definition under sections 201(ff)(3)(B)(i) and (ii) of the FD&C Act.”

The FDA has also issued warning letters to companies selling CBD products claiming that they prevent/treat diseases like cancer, diabetes, psychiatric disorders, etc. Examples: “soothing tincture for chronic pain,” “CBD can successfully reduce anxiety symptoms,” “For many, CBD holds the answers to treating depression.”

2. Clinical Justification.

The Board’s existing rules require that the chiropractic physician utilize clinical rationale and justification that, “within accepted standards and understood by a group of peers, must be shown for all opinions, diagnostic, and therapeutic procedures. Accepted standards mean skills and treatment which are recognized as being reasonable, prudent, and acceptable under similar conditions and circumstances.”

3. Scope of Practice.

In considering the inclusion of new substances in the practice of chiropractic, the Board may take into account all relevant factors and practices, including, but not limited to: the practices generally and currently followed and accepted by persons licensed to practice chiropractic in the state, the teachings at chiropractic schools accredited by the Council on Chiropractic Education or its successor at any time since 1974, relevant technical reports published in recognized journals, and the desirability of reasonable experimentation in the furtherance of the chiropractic arts.

A chiropractic physician may utilize substances that are supported in peer reviewed literature, which has clinical rationale, valid outcome assessments measures, is consistent with generally recognized contraindications to chiropractic procedures, and where the potential benefit outweighs the potential risk to the patient.

4. Current Conclusions

As chiropractic physicians do not have prescription rights within Oregon statute, there is no statutory authority to allow chiropractic physicians to recommend or prescribe marijuana, CBD, hemp, or products derived from these substances.

To dispense, use, or sell topical products derived from marijuana or hemp, licensees must abide by the laws and rules established by the OHA, OLCC, and ODA, as applicable. This is an explanation of OBCE’s position and licensees act at their own risk with regard to federal prohibitions/requirements.

According to the FDA, under the FD&C Act, it is illegal to market and sell CBD as a dietary supplement.

https://www.oregon.gov/pharmacy/Imports/Cannabidiol_CBD_Informational_6.2019.pdf

Additionally, chiropractic physicians cannot sell recreational marijuana unless properly licensed through the OLCC to do so.

(<https://www.oregon.gov/olcc/marijuana/Pages/FAQs-Licensing-General.aspx>.)