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Collection/Record Group: Clinton Presidential Records

Subgroup/Office of Origin: National AIDS Policy Office

Series/Staff Member: Kristine Gebbie

Subseries:

OA/ID Number: 8300

FolderID:

Folder Title:
[Americans for Compassionte Use] [loose]

Stack:	Row:	Section:	Shelf:	Position:
S	66	5	1	3

K. Gebbie Box 1 page 2
Vaccine Meeting 7/25/94
Mtg w/ Rutgers University
Site Visit Richmond AIDS Ministry
Marrakech
- other misc. folders, brochures, posters, papers on AIDS in box.

ENCLOSURES FILED OVERSIZE ATTACHMENTS 8299
1 box filed 1/9/97 TT NARA 5954

Box 2 - Kristine Gebbie -
misc folders and booklets including:
April 14, 1994; National Task Force on Aids Drug Development
Non-profit Liaison Network
Act-up DC Chapter
(other papers and memos in no particular order)

ENCLOSURES FILED OVERSIZE ATTACHMENTS 8300
1 box filed 1/9/97 TT NARA 5955

Memorandum

To: Kristine Gebbie 10 November 1993

From: Luke Adams

Re: Medical Marijuana, Dennis Peron, and Americans for Compassionate Use

To follow-up on our conversation Monday, I am forwarding to you some barely readable documentation from Dennis's organization. Of particular note are the more readable letters from Dr. Walter Krampf from Davies as an affidavit, and from California State Senator Henry Mello (no liberal) to Janet Reno.

These map out the basic arguments for medical marijuana, and the problems with Marinol. I look forward to hearing back on what responses you get from DEA, Justice, et al., about putting forward a single policy. Clearly, ACU and many AIDS activists would like to have a policy statement from your office.

Dennis will be in DC from 11/17-11/23 for a series of meetings and talks. He would like to give you greater detail on the issues currently involved over that time. Is it possible to set up a meeting between Dennis and Buck, or some more appropriate person in your office? Would you have time to meet with him?

I can ask Buck if he has some time to spend with Dennis in an informational meeting. If it is okay with you, it will probably be okay with him; just let one of us have the word.

Incidentally, I would like to tell you in confidence that, although there were significant negative rumors about Buck and a lot of typical gay movement lateral hostility, I have found that he has been well received by those AIDS activists with whom he has directly worked, and by those who have heard him speak. Mike Shriver, from Mobilization Against AIDS, has commented to me about the ease of dealing with Buck, and of his appreciation for that. My experience with Buck is that he has certainly been forthcoming, concise, and diligent. I have read a lot of the hit-pieces on him and have listened ad nauseam to William Waybourn's criticisms, but my experience has been of a seemingly different Buck than the one described. I wish every government worker with whom I have dealt had been as helpful and pleasant, even in disagreements.

I appreciate your taking time with the policy issues I have raised, and for having returned my call so promptly. I also appreciate your level of frustration, which seems close to mine, in the staffing delays. I continue to hope we will find a way to work together more formally. I think that you, unlike so many, "get it."

EXHIBIT A

NATURE OF EXPERT WITNESS TESTIMONY

DECLARATION OF WALTER KRAMPF, M.D., M.P.H.

I. My name is Walter Krampf. I am a physician with a private practice at Davies Medical Center specializing in AIDS and HIV disease. I am also employed by the City and County of San Francisco, Department of Health, where I work 8 hours a week as a general physician and HIV specialist at District Health Center #1. Furthermore, I am involved in an AIDS epidemiological study at the University of California, San Francisco School of Medicine. I have been an Assistant Research Epidemiologist since 1983 involved with a group of researchers studying a cohort of 450 gay men. I am a member of the County Consortium, a group of Bay Area health care professionals involved in AIDS which has two meetings a month dealing with the practical, theoretical, social and political aspects of AIDS care and AIDS research. I am a member of the Bay Area Physicians for Human Rights and on the medical staff at Davies Medical Center and the California Pacific Medical Center.

II. I received my Bachelor of Arts degree from New York University, magna cum laude and Phi Beta Kappa. I was graduated from the Albert Einstein College of Medicine in New York City, Alpha Omega Alpha. I received a Masters degree in Public Health from the School of Public Health, University of California at Berkeley. In 1963 I was awarded a National Science Foundation Fellowship. (I include other awards.)

III. I have collaborated on two papers on AIDS published in the medical literature. I gave an oral presentation on AIDS at the First International Conference on Homosexuality and Medicine in England in 1986 and a poster presentation at the Third International Conference on AIDS in Washington, DC in 1987. I have collaborated on papers presented at the Fifth International Conference on AIDS in Montreal in 1989. I have attended four of the seven International Conference son AIDS. I was a panel member on a workshop sponsored by the Univers ty of California School of Medicine on the care of the AIDS patient in 1988. I have given several in-service talks to the health care staff of the Department of Health on AIDS and the care of persons with AIDS and to the nursing staff at Davies Medical Center. I have appeared three times on the locally produced Viacom Cablevision series, "Holding Hands" where I was interviewed and responded to questions from the viewing audience on the treatment of AIDS. The most recent appearance was March 1992. I have an in-service talk to the students at the University of California, Berkeley School of Public Health on AIDS. My Master's thesis at the University of California at Berkeley to receive my degree in Public Health was on the Chronic Effects of Marijuana Use.

IV. Through both my clinical practice and my epidemiological research I am familiar with AIDS and the entire spectrum of HIV disease, its manifestations, complications and treatments. In addition to the research on AIDS, I have been aware of the studies done to test marijuana's effectiveness in treating several conditions and disease states, specifically the research on the effectiveness of

Marinol (synthetic FDA approved tetrahydrocannabinol, the most active ingredient in cannabis) in alleviating the nausea and vomiting that accompanies chemotherapy and studies done to show its effectiveness in stimulating appetite and leading to weight gain.

Many patients with AIDS receive standard anti-cancer chemotherapy for malignancies associated with AIDS, specifically Karposi's sarcoma and lymphoma. In addition, many of the antibiotics used to treat the opportunistic infections that result from a suppressed immune system cause nausea and vomiting that are troublesome and frequently would prevent the insertion of these necessary medications without a method to suppress the unpleasant side effects. Marijuana significantly suppresses these symptoms in many patients.

One of the worst effects of HIV diseases is weight loss as a consequence of direct HIV effects on the intestinal tract and indirectly due to malignancies and/or systemic infections. I have prescribed Marinol frequently and successfully to treat these symptoms. Many patients have told me about the similar effectiveness of smoking marijuana and/or ingesting it orally. Anecdotally, smoking marijuana seems to be the most effective and the most controlled way for the patient to administer the medication to achieve the best desired effect with much less problem with under or over medicating. Patients who have difficulty smoking, possibly due to underlying lung disease such as asthma, find oral marijuana quite successful.

Marijuana is remarkable in that it is unusually non-toxic. There is no lethal dose, something that not one of the medications I am licensed to prescribe has, and the range of the therapeutic dose is very wide, a characteristic that is very useful in a medication. (The therapeutic dose is the range of a dose that is effective without being significantly toxic or lethal.) I have never seen a serious adverse effect from marijuana and certainly none that has had any long term consequences. The major complaint with Marinol is sedation which generally can be controlled by lowering the dose or the frequency of administration. Above and beyond the ability of marijuana to produce an increase in weight and an increase in appetite, it also frequently produces a sense of well-being.

Many patients are forced to use marijuana to control their symptoms because of the high cost of Marinol. Marinol costs the patient $3.00 for a 2.5mg capsule and $4.00 for a 5mg capsule with patients frequently needing 3 or 4 doses per day. This astronomical cost for medication ($12.00 to $24.00 per day for one medication) is out of the reach of patients without medical insurance or those with insurance who have to pay a significant copayment on their medications. This has driven many patients to try marijuana with amazingly successful results.

V. In my opinion, based on both clinical studies and personal observations on patients, the use of oral marijuana in certain patients with AIDS is quite beneficial and essentially benign. The federal government, through the Food and Drug Administration, has deemed that oral synthetic THC is "safe and effective" for treating people who experience nausea and vomiting associated with chemotherapy. Studies have shown the positive effects of Marinol on appetite and weight and many clinicians will prescribe Marinol for persons with AIDS who suffer from these symptoms whether caused by the disease itself or by other medications. I have much anecdotal information on the use of oral and smoked

marijuana on providing similar benefits to these patients with very few side effects.

Cannabis itself either smoked or eaten has not been afforded the status of Marinol, a position that makes no rational or fiscal sense fromthe point of view of the patient or the doctor.

Why patients with a terminal illness who tolerate marijuana and get good effects from it with practically no side effects, cannot legally get it, is both hypocritical and bad medicine

Senate

California Legislature

HENRY J. MELLO

FIFTEENTH SENATORIAL DISTRICT

Senate Majority Leader

MELLO FAX MEMO

TO: Bob Randolph

FROM: Cynthia Douglas
Senator Mello

DATE: 9/20 TIME: 10 AM

September 13, 1993

The Honorable Janet Reno
Attorney General
U.S. Department of Justice
10th & Constitution Avenue, N.W.
Washington, D.C. 20530

Dear Attorney General Reno:

I am writing to respectfully urge your personal review of the Drug Enforcement Administration (DEA) efforts to block marijuana's legitimate medical availability.

DEA's legal position, that marijuana has "no accepted medical use in treatment in the United States", is clearly in error. I am concerned that, unless you act quickly the Clinton administration may find itself defending this widely discredited Bush Administration policy. Specifically, I am referring to the pending case of ACT v. DEA No. 92-1168 which is scheduled for oral argument before the U.S. Court of Appeals (2d Circuit) on October 1st.

Last month the California Legislature adopted Senate Joint Resolution 8, Chapter 198, Statutes of 1993, which I authored. This legislation specifically recognizes marijuana's important medical value in the treatment of several life and sense-threatening diseases including glaucoma, cancer and AIDS. By adopting Senate Joint Resolution 8 the California Legislature officially calls on the Clinton Administration to end legal prohibitions against marijuana's medical use.

Let me emphasize this is not a "pro-drug" issue. It is a question of legal access to needed medical care. Last November, 77% of the voters in Santa Cruz, California voted to end federal prohibitions against marijuana's medical use. I have seldom seen such overwhelming public support for meaningful reform. In response to this vote by my constituents I sponsored Senate Joint Resolution 8 before the California Legislature.

Significantly, Senate Joint Resolution 8 secured bipartisan support in both the California Senate and Assembly. During public hearings, several legislators related personal stories of desperately ill friends or loved ones who, because of over-zealous DEA policies, were forced to illegally obtain the marijuana they medically required. The California Medical Association and patient-advocacy groups also endorsed Senate Joint Resolution 8.

In light of such support and especially because the filing of the DEA lawsuit pre-dates the arrival of the Clinton Administration, I strongly recommend that the Department of Justice immediately re-examine the Drug Enforcement Administration's generally discredited efforts to maintain the medical prohibition. Specifically, I urge you to suspend further legal action in the case of ACT v. DEA until you and others at the Department of Justice and the Department of Health and Human Services can review the Bush Administration actions in this area.

STATE CAPITOL
SACRAMENTO CA 95814
(916) 445-8643

1200 AGUAJITO ROAD
ROOM 1A1
MONTEREY CA 93940
(408) 373-0173

701 OCEAN STREET
ROOM 318A
SANTA CRUZ CA 95060-4068
(408) 425-0401

340 SALINAS STREET
SALINAS, CA 93901
(408) 757-8100

50 FIFTH STREET
OXNARD, CA 93030
(805) 240-7937

Rather than defending the Bush Administration's failed efforts to enforce the medical prohibition, I am hopeful that the Clinton Administration will be working with credible patients and physicians to find reasonable solutions.

Our experience here in California indicates that the medical community and the American people already know marijuana has important medial properties and strongly believe the natural plant should be legally available for prescriptive medical uses under certain circumstances.

Sincerely,

SENATOR HENRY J. MELLO
MAJORITY LEADER, CALIFORNIA SENATE

HJM:ckd(m6974)

Enclosure: Copy of Senate Joint Resolution 8

cc with enclosure:

Donna Shalala, Sec.HHS
Phillip Lee, Asst. Sec. HHS
Joyce Elders, U.S. Surgeon General
Henry Waxman, Chair, House Committee on Health
Bruce Lindsay, Domestic Affairs, White House
Robert Bonner, Administrator, DEA

Americans for Compassionate Use

3745 Seventeenth Street • San Francisco, CA 94114 • (415) 864-1961 • Fax: 864-0996

Dear Member:

Thank you for your vote on SJR 8.

You will be pleased to know Undersecretary of Health & Human Services Dr. Philip Lee has ordered a review of the current government medical marijuana ban. Dr. Lee agrees with the California Medical Association and the California State Legislature among others that marijuana is an effective medicine for those suffering from the effects of AIDS, glaucoma, epilepsy and cancer.

Unfortunately patients around the state are being arrested prosecuted for growing or using marijuana as medicine. This problem can only be solved by changing state law, so that patients not fear arrest.

I believe this could be accomplished with an amendment to the state Health & Safety Codes 11357 & 11358 pertaining to possession and cultivation of marijuana– a suggested change may read:

Amendment to HS11357:
Add language:
"Except for medical purposes."

Amendment to HS11358:
Add paragraph:
,except for medical purposes, with a doctors certificate, limit 10 plants.

We shouldn't allow politics to dictate that the spirit of SJR 8 be a meaningless piece of paper. This is our chance to help people, indeed help the most powerless of our society obtain a medicine – free of charge – that improves the quality of their lives.

Isn't it time to stop using our friends and relatives who may be sick, as political pawns. Isn't this the time to heal the divisiveness in our society.

We have taken the first step in a thousand mile journey towards a more compassionate nation. Do we have the courage to take the next step? We are seeking sponsors.

Sincerely yours,

Dennis Peron
Director

THE POT SHOP

HEALTH *Local "buyers club" open to AIDS, cancer patients.* **By John Batteiger**

JASON MENARD first learned of the Cannabis Buyers Club in San Francisco from his mother.

"She knew I was buying marijuana for pain relief, and she didn't want me getting it on the streets," said Menard, 28, who was diagnosed nine years ago with Reiter's syndrome, a rare form of arthritis that sometimes makes it impossible for him to walk.

"She was watching a network news program about a marijuana buyers club in Washington, D.C., so she called them up." Menard told the Bay Guardian. "It took a few phone calls, but they hooked her up with people here in San Francisco."

Menard, in turn, was introduced to a network of AIDS patients and activists who operate the Cannabis Buyers Club, an underground enterprise that sells marijuana to people living with AIDS, cancer, multiple sclerosis, arthritis, glaucoma, and other illnesses.

For customers of the Buyers Club, marijuana is a miracle that eases pain, relieves nausea and vomiting, and stimulates appetite for those suffering from weight loss and side effects of prescription medicine. "It's the power of the mushies," one customer exclaimed.

Marijuana is winning successes as a medicine, but it's still illegal. For that reason, the Buyers Club doesn't advertise, and new customers are accepted only by referral — usually by friends in it also by local physicians. It's open two hours a day, six days a week, selling marijuana in the lawful use of a small apartment.

The Buyers Club was organized two years ago by Dennis Peron, who gained friends and notoriety in the mid-'70s through the Big Top, a "marijuana supermarket" he operated in the 700 block of Castro Street.

Peron formed the Buyers Club in 1991, shortly after his lover, Jonathan West, died of AIDS complications. West had lost 15 pounds during a "marijuana drought" in the city a few years before Peron said, "and it was really unnecessary."

Keeping marijuana out of the hands of sick people who need it is a crime," Peron said. "So much suffering could be alleviated if we could only get marijuana to the people who need it — people who live longer, healthier lives because of it but who have to risk legal arrest to get it."

Peron now focuses his attention on the political side of the medical marijuana movement — he heads a volunteer organization called Americans for Compassionate Use (ACU). He said the group "certainly supports the Buyers Club, but we can't get personally involved in it because of the legal problems involved."

For people like Jason Menard, the threat of legal problems has taken a back seat to medical necessity.

Before the Buyers Club, he said, "I bought marijuana down by the Civic Center. I've been attacked down there, I've been mugged down there, and I've been ripped off at knifepoint. Now, I don't have to go through that any more."

At the Buyers Club, customers lounge on couches and chairs, taking hits off complimentary joints passed around the room, while waiting to buy marijuana. It's a friendly crowd, in part because of the referral network that links them all.

The product comes in four grades: "medicinal," which contains the most THC — the active ingredient in cannabis that produces the high — down to "cooking grade."

The regular price for a gram of medicinal quality marijuana is $70 for one-eighth of an ounce. But those on disability who can't afford to pay can get it for $25, or at no cost at all. Street prices for marijuana are often lower, but officials of the Buyers Club note that their customers are assured of a consistent quality in a safe environment.

Buyers clubs have formed in a dozen cities nationwide, and rules vary. Unlike the one in Washington, D. C., the San Francisco club does not ask customers to get written consent from a doctor to make a purchase. Its officers say many customers buy for ailing friends, and others say they have a sympathetic physician.

The club does, however, have a printed statement available to ease a customer in support by police. Above a signature line, it declares that the marijuana "will be used only for medicinal purposes as per San Francisco Resolution 741-92."

Club officers claim that the landmark resolution passed by the Board of Supervisors and signed by Mayor Frank Jordan in August 1992, empowering San Francisco police and the district attorney to give "lowest priority" to the arrest or prosecution of people using marijuana as medicine, gives them the "authority" to do business.

That claim might not hold up in a court of law, but it does carry the weight of local public opinion. Fully 80 percent of San Francisco voters in 1990 approved Proposition P, calling on city officials to legalize medical marijuana, and in 1978 a majority of voters approved Proposition W, decriminalization.

In the middle of all this sits the San Francisco Police Department.

Capt. Gregory Corrales, head of the SFPD's narcotics unit, said he didn't know the Buyers Club existed until told so by the Bay Guardian, which first got approval from Buyers Club officers before contacting the SFPD.

"Resolutions are policy statements, but we also have to follow the law," Corrales said. "Selling marijuana is against the law, and anyone selling marijuana is risking arrest."

Corrales maintained that budget cuts and staffing shortages have forced the narcotics unit to prioritize its work, "and marijuana users in general are always the lowest priority we have. And I don't even have to talk about people using it for medical reasons."

As for marijuana sellers, he noted that "sales of any drug are a felony, but it's a much higher priority to arrest a heroin dealer, a cocaine dealer, or a LSD dealer."

Without clear guidance from state or local statutes, Corrales suggested that the Buyers Club would operate at a greater risk only if it got too brazen.

"If we get community complaints about blatant sales — say, in a playground — we're going to make arrests," he said. "Other than that circumstance, we have to prioritize, like any other government agency nowadays."

Medical-marijuana advocates got an encouraging sign of police tolerance at the Oct. 3 Castro Street Fair, where chocolate-chip cookies containing generous portions of marijuana were sold openly at the Americans for Compassionate Use booth.

"Brownie Mary" Rathbun, a local celebrity for the pot-laced brownies she serves to AIDS patients at San Francisco General Hospital, was at the booth signing copies of her marijuana cookbook when an irate passerby, identifying himself as an assistant district attorney in Alameda County, brought a police officer to the scene and demanded that the cookie sales be stopped and the booth staffers be arrested.

Rathbun said the officer was "highly embarrassed" by the scene and finally asked the lawyer to keep on walking before returning to the booth. "He told us to cool it," Rathbun said. "Then he left."

Other advocates are forced into a similar stance. Police see marijuana is liberal, but they have more important things to do than bust people selling cookies to sick people. Lawmakers are reluctant to legalize marijuana for medicinal purposes, but they pass resolution after resolution in its favor.

Even with San Francisco's two voter initiatives in favor of legal marijuana, and the "lowest priority" resolution approved without dissent last August, three more resolutions that don't carry the weight (Continued on page 30)

GUARDIAN PHOTO BY LORI EANES

Santa Cruz County Sentinel

Saturday, Oct 16, 1993

AIDS patient allowed to use marijuana

Innocent verdict in medical use of illegal drug

The Associated Press

SAN DIEGO — An AIDS patient was found innocent of drug charges Friday when a Superior Court jury determined that he cultivated marijuana for medicinal purposes.

With the ruling, Samuel Skipper, 39, of La Mesa, was told by the jury that he can grow the drug at his home to combat AIDS-related symptoms.

The case is thought to be the first in California where a defendant claimed to use marijuana to ease symptoms of AIDS. Defendants in other trials have said they used marijuana to treat medical problems such as glaucoma or cancer.

Skipper admitted in court that he was guilty of growing the more than 70 pot plants seized at his La Mesa home earlier this year.

Skipper said he eats the buds from the green, leafy plant to help him live. He brought four peanut butter balls laced with marijuana to court earlier this week to try to have them introduced as evidence at trial. But they were confiscated by a bailiff and not shown to the jury.

An investigation is under way by the District Attorney's office to determine whether Skipper should be charged criminally with possession because of that incident.

Skipper said he brought the peanut butter balls into the courthouse at the request of his defense attorney Juliana Humphrey.

But despite the ongoing investigation, Skipper was elated with the verdict.

"They're outstanding citizens," Skipper said of the jurors. "They represent the conscious of the people."

Deputy District Attorney David Williams was disappointed with the jury's decision. Deliberations lasted less than three hours.

"I would like to have had it go the other way," Williams said.

The prosecutor had contended throughout the week-long trial that Skipper did not try legal means to treat his AIDS symptoms before turning to marijuana.

"There were certainly conventional treatments available that effectively dealt with the problems that his doctors knew of, and for every symptom that he described," Williams said.

But the jury apparently believed the defense.

"We felt the fact that he was HIV-positive ... was enough to warrant the defense of (medical) necessity," said jury foreman Robert Lenzi, 39, of La Jolla.

Lenzi said the jury's job was not to send a message to other AIDS patients, but to decide Skipper's case. However, he acknowledged that the trial could lead to other such cases.

"If it's found that cannabis can be used for people with HIV ... more work should be done to experiment with it and find out," Lenzi said.

The Associated Press

AIDS patient Samuel Skipper reacts with relief at Friday's verdict.

'We felt the fact that he was HIV-positive ... was enough to warrant the defense of (medical) necessity.'

— Robert Lenzi, jury foreman

San Francisco Chronicle
THE LARGEST DAILY CIRCULATION IN NORTHERN CALIFORNIA
THURSDAY, OCTOBER 21, 1993

Potted Justice

WHAT POSSIBLE interest is being served in putting a 73-year-old man who grew potted marijuana plants for therapeutic consumption in jail for nine months and seizing his life savings of $177,000 in cash and securities?

That is the strangely disproportionate punishment meted out this week by a Superior Court judge in Placerville to Byron Stamate, a retiree who freely admits that he grew marijuana in his guest house and used it for the relief of his own and his woman companion's back pains.

Convinced by the size of his bank account that the couple was growing marijuana for sale, El Dorado County's zealous law enforcement authorities resorted to the controversial asset seizure laws for major drug racketeering. They slapped a lien on his house, grabbed his savings account and liquidated $106,000 in stock securities — a total estate which does not seem unduly large after a lifetime of hard work.

THAT WASN'T all Stamate lost. His woman friend, who lived with him, committed suicide a year after his arrest — a tragedy that Stamate blames on harassment by county authorities.

Stamate already served six days in jail after his arrest. Unless the authorities are holding back very damaging evidence of big-time racketeering, that would seem to be more than enough to meet the dubious requirements of the law. At the least, his seized property and financial assets should be returned to him so that he can live out his retirement in the financial (if not physical) ease that is his due.

Elderly Grower Gets 4 Months For Pot Plants

He says he had just enough to ease his girlfriend's pain

By Ann Bancroft
Chronicle Correspondent

Georgetown,
El Dorado County

A 74-year-old man who admitted growing marijuana to ease his girlfriend's chronic back pain was sentenced yesterday to four months in jail and two months of house arrest, with possible random drug tests and searches of his home.

Byron Stamate, who said he believed that he was eligible for a drug diversion program when he pleaded guilty last month to cultivation of marijuana, said he will appeal the sentence by El Dorado County Superior Court Judge Eddie Keller.

He also is appealing the loss of his home and life's savings — $177,000 — seized by the Sheriff's Department and held since 1990 under the state's drug asset forfeiture laws.

Stamate was arrested in April 1990 after a squad of armed officers raided a cabin he owned outside Georgetown and found 464 four-inch marijuana plants and $26,000 in a locked box.

Stamate, raised in the Ozarks when marijuana was grown as a cash crop for making rope, said he learned early that the plant could be used as an herbal pain reliever. He grew pot to ease the pain of his wife's cancer before she died in 1980 and again when his girlfriend, artist Shirley Dorsey, was suffering from severe back pain.

Dorsey committed suicide after Stamate's arrest, saying she did not want to be forced to testify against him.

Stamate said the crop that led to his arrest contained just enough potent female plants to produce a year's worth of marijuana butter for Dorsey's pain control purposes and his own occasional private use.

Prosecutors, however, insisted that Stamate was growing the marijuana for sale, and Keller agreed that the cash box provided the appropriate evidence.

Stamate grew up during the Depression and said he has always kept large amounts of cash on hand in the event that the economy should again collapse and banks fail.

Stamate's supporters, including the publisher of the Georgetown Gazette, contend that he was singled out by law enforcement not for his crime but because of his assets. Stamate's assets amounted to a bonanza for financially strapped county law enforcement departments.

Under asset forfeiture laws, authorities may seize property suspected of being purchased with drug profits.

Medical pot poses dilemma for Marin

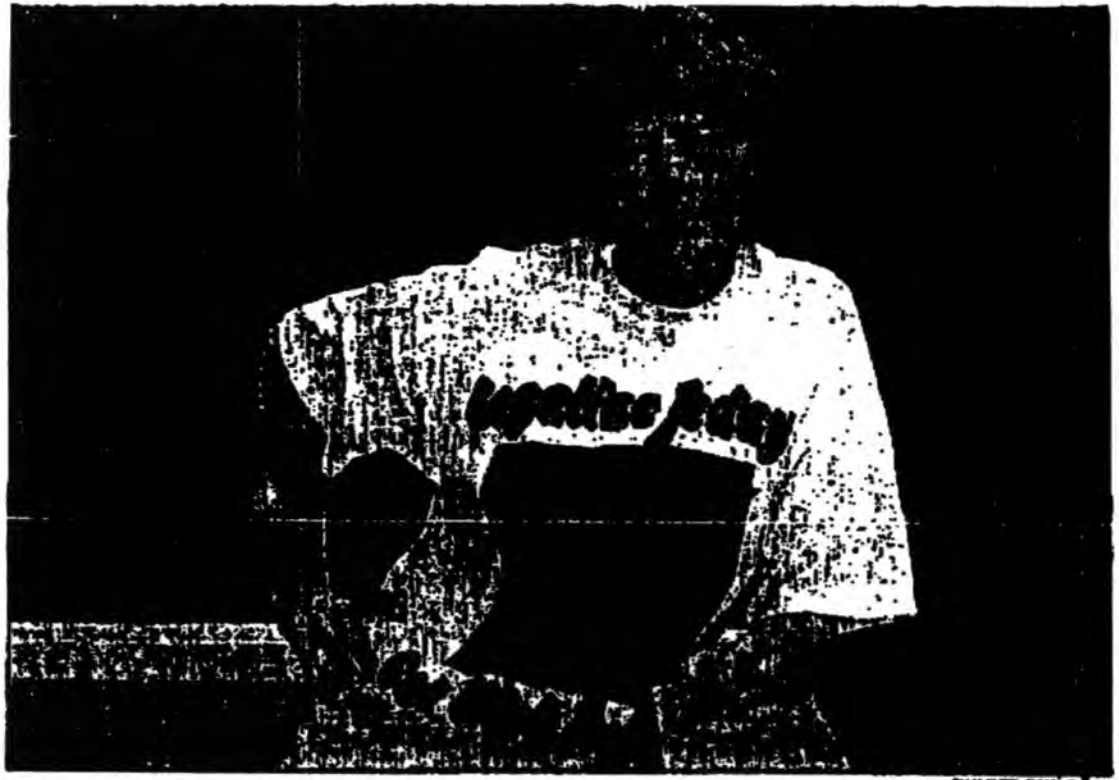
AIDS patient's case tests county's stand

By Michael Dougan
OF THE EXAMINER STAFF

FAIRFAX — When police raided Barbara Sweeney's apartment last week, she demanded that they take tender care of the two five-foot marijuana plants they carried away from her upper-story deck.

Sweeney, who uses cannabis to combat the pernicious wasting syndrome that accompanies AIDS, was confident her illegal plants would be returned in short order.

Reasoned Sweeney: The Marin County Board of Supervisors unanimously endorsed the legalization of pot for medical purposes in a resolution last year. So did the state Legislature when it recently passed Senate Joint Resolution No. 8, declaring that "the federal government continues to deny access to (marijuana) for political rather than medical reasons," placing "message before medicine, convenience before compassion, and politics before patients."



EXAMINER STAFF/D. Allen

Barbara Sweeney, who has AIDS, was growing marijuana for medicinal purposes until police seized the plants.

Sweeney, 39, believed she had the law on her side. She was wrong.

The Marin County District Attorney's Office decided this week not to file possession and cultivation of marijuana charges against Sweeney, blasting at humanitarian considerations. However, noted prosecutor Ed Berberian, "she will not be getting her marijuana back."

Drop that watering can

Nor did the Fairfax cops seriously consider Sweeney's plea that her plants be watered while the case was under consideration. "We don't water marijuana plants for somebody," said Detective Eric Hoot, who led the raid on Sweeney's home. "That would be cultivation of marijuana, and that's illegal. They've been destroyed."

Sweeney's expectations reflect a belief among some medical marijuana advocates that several county resolutions around California, including San Francisco, as well as the state bill, modify the legal status of pot. (Proposition P, passed by San Francisco voters in 1992, supports the medicinal use of marijuana.) The Marin measure "is simply an advisory resolution that does not have any binding affect," said Berberian. "It can't pre-empt state or federal law."

"The bottom line is that regardless of SJR No. 8 it is still illegal for anyone to grow marijuana," said Cathie Douglas, a policy consultant to state Sen. Henry Mello, D-Santa Cruz. Mello, along with Sen. Milton Marks, D-San Francisco, drafted the joint resolution, which urges federal officials to reclassify marijuana as a medically beneficial drug, available through prescription.

High hopes

Sweeney said she and members of a group called Hemp Renaissance of Marin had hoped the county resolution would inspire less rigid enforcement of the law in cases like hers.

"Barbara apparently was having a dialogue with the district attorney" over the return of her plants, said Lynette Shaw, a Hemp Renaissance leader and member of the county's drug advisory board.

Shaw said she'd encouraged Berberian to give back the plants,

[See POT, A-24]

◆ POT from A-23

Medical pot poses dilemma for Marin

even at the risk of having to defend his action in court. "I told him we have a legal team that would have defended the decision to return the plants all the way to the Supreme Court," she said.

Berberian denied contemplating the return of Sweeney's plants. "I told her that she shouldn't hold out any false hopes," he said. "The law just doesn't allow us to do that."

Nor did pleas by County Supervisor Harold Brown and Health and Human Services Director Tess Peters sway the District Attorney's Office.

"This is a fairly clear example in which the medical use of marijuana needs to be given some wide berth and some acceptance, instead of being viewed as criminal behavior," Peters said. "It seems things are a little out of kilter when we wouldn't allow a woman who is perhaps dying of a disease as serious as AIDS to benefit from this medicine."

Quality of mercy

Brown said he thought the decision not to prosecute Sweeney might have been influenced by the board's resolution. "What the county was saying is that when people are dying or suffering, let's not go attack them for possession of a substance that could help them enormously," he said.

Sweeney said her benefits from smoking pot had been considerable.

"I had a death sentence from this wasting syndrome," she said. "Last May, they told me I had six months to live. I weighed 98 pounds."

After smoking an eighth of an ounce of marijuana every two or three days, "I gained 34 pounds in five months," she said.

Although her plants are gone, Sweeney plans to pursue her cause. She hopes to see a measure endorsing therapeutic use of marijuana passed in her own community.

"I'm not letting this go," she said.

SAN FRANCISCO EXAMINER ★ Thursday, September 23, 1993

The Press Democrat Santa Rosa, California, Wednesday, October 13, 1993

EMPIRE NEWS

Medicinal pot use gets county boost

By TOM CHORNEAU
Staff Writer

Supporters of the medicinal use of marijuana got part of what they wanted from the Sonoma County Board of Supervisors on Tuesday when the board agreed to ask federal officials to allow doctors to prescribe the drug.

Activists wanted the board to approve a much more comprehensive ordinance that would have allowed county officials to assist in creating a safe and affordable supply of the drug for medical purposes. But spokeswoman Carol Miller said she was satisfied with the board's gesture.

"This is a good first step. We had hoped for more, but every week there is another community adding its voice to the cause," said Miller of the Sonoma Civil Rights Action Project, which is pushing for changes in the marijuana laws.

The Sonoma County resolution closely resembles similar language adopted by the California Legislature, the cities of San Francisco and Santa Cruz and the county of Marin.

The resolution cites medical evidence that suggests marijuana can be beneficial to patients of some diseases. The statement calls on the federal government to change current law so the drug can be prescribed by licensed physicians.

"I don't like the idea that people in need would be denied this drug," Supervisor Ernie Carpenter said. "Even if we are not ready yet to go further on this, I want to keep the momentum going."

Some studies have shown that marijuana can relieve pain, muscle spasms, nausea, loss of appetite and other symptoms brought on by AIDS, asthma, cancer treatment and glaucoma.

The lone dissent on the resolution was Supervisor Nick Esposti.

"I've come a long way over the years, but I'm just not ready for this yet," said Esposti. "I would like to see it added on at a state level. I think they should look at it."

Supervisor Tim Smith and Mike Cale also voted in favor of the resolution. Supervisor Jim Harberson was on vacation.

Sheriff Mark Ihde said after the hearing he fully supported of the board's position.

"I've got no problem with what the board is trying to do," he said. "If state and federal laws are changed to allow a doctor to prescribe marijuana to a patient that is not unlike thousands of other prescription drugs used everyday."

Ihde said he would be concerned if the ordinance called for law enforcement to "turn its back" on people growing marijuana and claiming the plant is needed for medicinal purposes.

"It's either a controlled substance or its not," he said. "The marijuana laws are on the books and as long as they are we will enforce them."