



MCIA

Medicinal Cannabis Industry Australia

Medicinal Cannabis Industry Australia (MCIA)
Submission to
Royal Commission into Defence and Veteran Suicide

September 2022

1. About Medicinal Cannabis Industry Australia (MCIA)

Medicinal Cannabis Industry Australia (MCIA) welcomes the opportunity to make this submission to the Royal Commission into Defence and Veteran Suicide.

MCIA is the peak industry organisation for Australia's licensed medicinal cannabis industry. This encompasses all activities of medicinal cannabis industry across research, cultivation and manufacturing and interaction with patients, the medical profession and communities.

MCIA's focus is on building an industry that enhances wellbeing through facilitating access to quality Australian medicinal cannabis products for Australian and global patients.

MCIA provides stewardship for an economically sustainable and socially responsible industry that is trusted and valued by patients, the medical community and governments. The Australian industry and its products are built on sound science and underpinned by industry processes and standards that ensure patients, the medical community and governments have confidence in the sector and its products.

2. Introduction

The Government is conducting this Royal Commission into Defence and Veteran Suicide to understand the systemic issues among defence and veteran deaths by suicide, risk and protective factors, and the availability of and access to support services.

MCIA is the industry peak body for medicinal cannabis companies. As such, it is not appropriate for us to assess the extent to which medicinal cannabis might be effective for treating physical or psychiatric indications experienced by Australian veterans, or to make claims about the potential risks involved in treating these indications with medicinal cannabis. We are confident that other interested parties with more relevant expertise can provide the Commission with such evidence.

However, MCIA members are directly involved with the provision of cannabis medicines to Australian veterans, and we are acutely aware of the challenges faced by both veterans and their treating physicians regarding the accessibility and affordability of these medicines.

3. Issues for consideration by the Royal Commission

DVA medicinal cannabis policy framework

Department of Veterans Affairs (DVA) administers the Repatriation Pharmaceutical Benefits Scheme, which subsidises the cost of medicines for eligible veterans. This includes medicinal cannabis products. Despite the lack of clinical evidence demonstrating that medicinal cannabis products are safe and effective, DVA "considers funding medicinal cannabis on a case-by-case basis in accordance with DVA's medicinal cannabis policy framework."¹

DVA's medicinal cannabis policy framework specifies the information required from the patient's treating physician when applying for funding. This includes a clinical justification for the treatment, evidence that the treatment has been approved by the Department of Health, and a documented mental health assessment determining there is no increased risk from medicinal cannabis on suicide ideation or mental health.

¹ <https://www.dva.gov.au/health-and-treatment/help-cover-healthcare-costs/manage-medicine-and-keep-costs-down/medicinal#eligibility-for-dva-funding-of-medicinal-cannabis>

We believe that DVA's commitment to case-by-case assessments for subsidising these unregistered medicines is both compassionate and appropriately rigorous. However, we are concerned that DVA has chosen to implement policies that financially disadvantage some veterans in a way that we believe is both unreasonable and inconsistent.

Unreasonable restrictions

DVA imposes what we consider to be an unreasonable restriction on veterans being treated with medicinal cannabis for psychiatric indications. DVA's website states it will, "decline funding for medicinal cannabis when the submission is for a mental health condition."² Psychiatric indications are the only conditions which are subject to this blanket restriction. We believe this restriction is unreasonable because its aim is to prevent case-by-case assessments, which is the stated intent of DVA's medicinal cannabis policy framework.

We acknowledge that medicinal cannabis products, as unregistered medicines, do not have the same level of evidence in regard to safety and/or effectiveness, and therefore that their use carries additional risks. However, this is the case for all conditions treated with medicinal cannabis, regardless of their nature. And these risks are appropriately managed by DVA through their assessment process. If DVA believes that the treatment of psychiatric indications with medicinal cannabis carries additional risks, this can – and should – be managed in the same way as any other medical condition, with funding decisions made on a case-by-case basis.

We are not suggesting that DVA should always approve funding for medicinal cannabis treatments. Only that veterans with psychiatric conditions should be treated with the same rigour and compassion as those living with physical conditions. We believe that excluding these veterans a-priori is unreasonable.

Inconsistent restrictions

DVA's policy to exclude veterans presenting with psychiatric indications from subsidised medicinal cannabis products is also applied inconsistently. Despite clearly communicating this policy on its website, and reiterating it to patients, their advocates, and the media, this policy is not always applied.

In a document released in accordance with the FOI Act (reference no. 43323) dated 18 May 2021, DVA disclosed that over the period 1 January 2016 to 12 May 2021, it approved funding for access to medicinal cannabis for the treatment of Post-Traumatic Stress Disorder (PTSD) for at least one veteran.

The actual number of veterans with PTSD who received this funding was redacted from the document, with DVA noting that, "the vast majority of patients approved for funding of medicinal cannabis had a primary indication of pain. Other conditions have been supported on occasion due to exceptional clinical circumstances."

We are encouraged by DVA's decision to consider exceptional clinical circumstances when making these funding decisions. We believe that all veterans should be afforded such consideration in a way that is consistent.

² <https://www.dva.gov.au/health-and-treatment/help-cover-healthcare-costs/manage-medicine-and-keep-costs-down/medicinal#eligibility-for-dva-funding-of-medicinal-cannabis>

Relevant Terms of reference

Paragraph (g)

Issues serving and ex-serving Defence members have when they access support services or put in claims through the Department of Defence, the Department of Veterans' Affairs or other Commonwealth, State or Territory government departments.

Paragraph (h)

Rules and policies about how support services, claims and benefits are managed by the Department of Defence, the Department of Veterans' Affairs and other Commonwealth, State or Territory government departments.

Paragraph (i)

Major risk factors that play a part in suicide by serving and ex-serving Defence members, including social and family life, housing and employment, and the financial situation of the person.

4. Summary

MCIA appreciates the opportunity to provide this submission to the Royal Commission into Defence and Veteran Suicide.

MCIA is the peak industry organisation for Australia's licensed medicinal cannabis industry, with our focus being on ensuring that patients have access to affordable and quality Australian medicinal cannabis products.

MCIA is acutely aware of the challenges faced by both veterans and their treating physicians regarding the accessibility and affordability of these medicines. We encourage the Royal Commission to consider recommending practices that ensure that veterans with psychiatric conditions are treated with the same rigour and compassion as those living with physical conditions, and that all veterans are treated in a manner that is reasonable and consistent.