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# An Open Letter to the National Football League

Together with the undersigned former and current players across the National Football League, we believe the time has come to reconsider your policy on cannabis. Our organization, <u>Doctors for Cannabis Regulation</u> (DFCR), does not promote the personal use of this often-misunderstood substance. Rather, we believe cannabis should be treated outside the criminal justice system as a public health issue. As physicians, we cannot condone sending someone to jail for using cannabis. Our profession aims to heal, not punish.

Decades of data establish beyond a doubt that banning cannabis does little to curb its use. Over the years, your arenas have only solidified this finding. Despite its prohibition, NFL players can easily access cannabis, with some players estimating that 60% of their teammates are regular consumers. No punitive sanctions, however severe, have been able to stop that. So instead of fining and suspending NFL players season after season, consider the success we've had in reducing teen alcohol and tobacco use rates, which have fallen significantly over the last generation. Honest education and sensible regulation go a long way toward promoting healthy behaviors.

The NFL's <u>Policy and Program on Substances of Abuse</u> (Policy) prohibits the "illegal use of drugs," including cannabis in a list that implicitly equates it with cocaine, opioids, MDMA and PCP. Within the medical community, cannabis is consistently regarded as <u>less toxic</u>, <u>less addictive</u>, <u>and less harmful</u> than many legal drugs like alcohol, tobacco or prescription opioid medications, let alone those illegal drugs mentioned in the Policy. Rather than concerning itself with the mere *use* of cannabis, we believe the Policy could more effectively focus on *misuse* of the drug. Your staff's time and resources could be well spent on preventive education and legitimate substance abuse interventions – the policies already in place for alcohol.

By removing cannabis as a substance of abuse, you would also join the <u>76% of doctors</u> who favor its use for medicinal purposes. As it stands now, the Policy prevents players from participating in the medical marijuana programs that are currently legal in states where 22 NFL franchises play their home games. While the discrete use of medical marijuana would seem to be allowed under the 'Therapeutic Use Exemption' (TUE), we understand such exemptions have never been granted as a matter of practice. In short, the NFL seems to have zero tolerance for cannabis, including in those eight states and Washington D.C. where it is now legal for personal consumption by about 25% of the adult US population.

In September, you pledged \$100 million dollars in a commitment "to look at anything and everything to protect our players and make the game safer." In a separate memo this summer, announcing your search for a new Chief Medical Officer, you also note "no higher priority than the health and safety of our players." Amongst other reasons, cannabis deserves the serious attention of your medical staff as a viable pain management alternative and potential neuroprotectant.

Your players are four times more likely than the general population to become addicted to painkillers. A recent study in the *Journal of Drug and Alcohol Dependence* found 52% of retired NFL players had used prescription pain medications during their active years. Of those, 71% reported misusing these drugs, with approximately one in seven players reporting ongoing dependence. According to another recent study in *JAMA Internal Medicine*, states with legal medical marijuana programs have a 25% lower incidence of fatal overdose on prescription opioid drugs, which

suggests that cannabis is a much safer alternative for patients with chronic pain. At a time when 28,000 Americans per year are dying from opioid overdoses (including one of your own, Tyler Sash), the NFL could play a leading role in addressing this national epidemic. Your investment could certainly add to the growing body of evidence that indicates medical cannabis is a viable replacement for more addictive and potentially fatal medications.

Pain is just one condition where cannabis shows tremendous promise. A <u>recent clinical trial</u> in Israel found that cannabis produced significant benefits in 10 of 11 patients with Crohn's disease, with 45% going into complete remission. Studies like this make the recent suspension of Buffalo Bills' <u>Seantrel Henderson</u> particularly concerning. Henderson was diagnosed with the chronic inflammatory intestinal disease just last year and has since undergone two operations. Punishing a player for using cannabis as part of a genuine medical regimen seems contrary to the NFL's renewed commitment to health and safety.

Finally, there has been preliminary though encouraging research into the neuroprotective effects of cannabinoids following traumatic brain injury, which likewise merits review. Anybody with a passion for football can hardly ignore the impact of a degenerative disease like chronic traumatic encephalopathy (CTE), which is known to have affected a staggering 96% of former NFL players. It's why our Athletics Ambassador, former Baltimore Raven Eugene Monroe, recently donated \$80,000 of his own money to University of Pennsylvania and Johns Hopkins researchers to study cannabis use among NFL players. We were delighted by the initial interest from your team, including Jeff Miller and Russell Lonser, and hope the new Chief Medical Officer offers equal attention.

It is worth noting that the National Hockey League does not even test all its players for cannabis. A Major League Baseball player would have to fail multiple tests before being sanctioned, almost exclusively with fines. Incidentally, both leagues are predominantly comprised of white players. Only the NFL and the National Basketball Association (the two leagues with the higher concentration of African American players, at 68% and 74% respectively) routinely discipline their players with suspension. This season alone, 19 NFL players have been suspended for violations of the Policy. Almost all are African American. A single failed marijuana test accounts for many, if not most, of the suspensions. The disproportionate impact of the war on drugs is beyond dispute at the national level, with blacks proving over four times more likely than whites to be arrested for cannabis possession. In the wake of this stark realization, many of the country's cannabis laws are finally undergoing long-overdue changes. The NFL can no longer afford to dismiss these historic developments by perpetuating a policy that is so blatantly discriminatory and out-of-step with the latest in health and medicine.

We applaud your putting players' health and safety above all else and look forward to continuing the conversation with your medical staff. In the meantime, we thank you for your time and attention to this most important issue.

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