

*The Cannabis Papers:
A citizen's guide to cannabinoids (2011)
By Publius*

#20

Patently wrong (*since 2003*)

Knowledge is power.

Francis Bacon

I know more about cannabinoids than anyone in the DEA. I know more about cannabis than many professional scientists. These are topics I've been inspired to research for years.

I work as an independent writer and researcher. While I am sometimes hired by others to research and write about the subjects that interest them, cannabis is a subject that interests me.

What I know from that research is that thousands of scientists around the world understand the value of cannabinoids. Cannabis users understand that same value, however for decades we've been baffled about how to make the US government understand what we understand.

Since cannabis is defined as a Schedule I drug by the Controlled Substances Act, it appears that our federal government believes cannabis has "no medical value" – the primary standard for a substance to be placed on Schedule I. Simultaneously, it is also a federal crime to possess any amount of cannabis.

How, I've puzzled, can I get the right facts before the federal government? As it turns out, the feds already know. Our government, and therefore ***We the People***, already understand the value of cannabinoids because ***We own a patent on them.***

Whoa! – Stop right there – that can't be right, can it? After the billions of dollars spent to stop cannabis, after the millions arrested merely for possessing cannabis, the federal government took the trouble to patent cannabis?

Don't take my word for it – go look it up. The patent number is 6,630,507. This is not the paranoid fantasy of an independent researcher. It's there in black and white, part of the federal record, for the whole world to see. To quote:

"The cannabinoids are found to have particular application as neuroprotectants, for example in limiting neurological damage following ischemic insults, such as stroke and trauma, or in the treatment of neurodegenerative diseases, such as Alzheimer's disease, Parkinson's disease and HIV dementia."

So, one federal agency recognizes cannabinoids as the miracle that they are (the US Patent Office), while another federal agency will do anything to prevent people from researching them in their natural whole form (the DEA).

On the surface, this is illogical. If cannabinoids are good enough to patent, surely they are good enough to allow medical research. But you may be thinking of conventional logic that dictates decisions based on the best outcome for the most people. There is another kind of logic – the logic of authoritarian control and repression. If nothing else, the federal government’s contradictory position on cannabinoids shows that one thing is understood by those in authority: this is a mighty powerful plant.

Again, this is clear in the patent:

US Patent #6,630,507

Cannabinoids have been found to have antioxidant properties, unrelated to NMDA receptor antagonism. This new found property makes cannabinoids useful in the treatment and prophylaxis of wide variety of oxidation associated diseases, such as ischemic, age-related, inflammatory and autoimmune diseases. *The cannabinoids are found to have particular application as neuroprotectants, for example in limiting neurological damage following ischemic insults, such as stroke and trauma, or in the treatment of neurodegenerative diseases, such as Alzheimer’s disease, Parkinson’s disease and HIV dementia.* Nonpsychoactive cannabinoids, such as cannabidoil [sic], are particularly advantageous to use because they avoid toxicity that is encountered with psychoactive cannabinoids at high doses useful in the method of the present invention. A particular disclosed class of cannabinoids useful as neuroprotective antioxidants is formula (I) wherein the R group is independently selected from the group consisting of H, CH.sub.3, and COCH.sub.3.

This is *Our* patent, one owned by *We the People* since 2003. Today there is an **additional eight years** of scientific research showing cannabinoid benefits that weren’t even imagined back when the patent was granted. The People own the patent: the DEA does not own the People.

As the scientists continue to confirm, particularly in light of a contradictory and hostile government, we would all be wise to continue our independent research projects – not only in libraries and the Internet, but out in the field as well. The scientists will back us up, even if our government won’t.

Authoritarian forces within the government will try to maintain their stranglehold on cannabinoids, but those authoritarian forces will fail eventually. Cannabinoids are just too powerful – and *We* own the patent.

Look it up!

Publius
(2011)

Search terms

US Patent 6,630,507; US Patent 2,304,669; cannabinoids and oxidation associated diseases; Alzheimer's, Parkinson's, and HIV dementia; Schedule I CSA; *Health Professionals for Responsible Drug Scheduling*.

Research and selected readings

2011: K Kamprath, et al, *Short-term adaptation of conditioned fear responses through endocannabinoid signaling in the central amygdala*, American College of Neuropsychopharmacology, February 2011:36(3):652-63.

2011: V Pisani, et al, *Homeostatic changes of the endocannabinoid system in Parkinson's disease*, Movement Disorders, February 2011:26(2):216-22.

2010: M Rajesh, et al, *Cannabidiol attenuates cardiac dysfunction, oxidative stress, fibrosis, and inflammatory and cell death signaling pathways in diabetic cardiomyopathy*, American College of Cardiology, December 2010:56(25):2115-25.

2010: J Marcu, et al, *Cannabidiol enhances the inhibitory effects of delta9-tetrahydrocannabinol on human glioblastoma cell proliferation and survival*, Molecular Cancer Therapeutics, January 2010:9(1):180-9.

2009: M Galal, et al, *Naturally occurring and related synthetic cannabinoids and their potential therapeutic applications*, Recent Patents on CNS Drug Discovery, June 2009:4(2):112-36.

2008: R Pertwee, *The diverse CB1 and CB2 receptor pharmacology of three plant cannabinoids: delta9-tetrahydrocannabinol, cannabidiol, and delta9-tetrahydrocannabivarin*, British Journal of Pharmacology, January 2008:153(2):199-215.

2006: R McKallip, et al, *Cannabidiol-induced apoptosis in human leukemia cells: a novel role for cannabidiol in the regulation of p22phox and Nox4 expression*, Molecular Pharmacology, September 2006:70(3):897-908.

2004: M Diana and A Marty, *Endocannabinoid-mediated short-term synaptic plasticity: depolarization-induced suppression of inhibition (DSI) and depolarization-induced suppression of excitation (DSE)*, British Journal of Pharmacology, May 2004:142(1):9-19.

2002: P Zygmunt, *Delta 9-tetrahydrocannabinol and cannabidiol activate capsaicin-sensitive sensory nerves via a CB1 and CB2 cannabinoid receptor-independent mechanism*, Neuroscience, June 2002:22(11):4720-7.

2001: T Maejima, et al, *Endogenous cannabinoid as a retrograde messenger from depolarized postsynaptic neurons to presynaptic terminals*, Neuroscience Research, July 2001:40(3):205-10.

1996: D Abrams and MPP, *Medical marijuana – once again —blocked*, Critical Path AIDS Project, Fall 1996:(No 31):21.

1994: D Abrams, *Donald Abrams' marijuana study*, Critical Path AIDS Project, Winter 1994-95:(No 30):9-17.

1942: R Adams, US Patent 2,304,669, *Isolation of Cannabidiol*, Urbana IL, 8 December 1942.