

“Dr. Tod” And His Legacy

By Fred Gardner

Tod Mikuriya, MD — the doctor who documented the astonishing range of conditions for which marijuana provides relief— died May 20, 2007 at his home in the Berkeley Hills. He was 73. The cause was cancer, diagnosed originally in his lungs. (Tod had been a cigarette smoker for more than two decades. He quit in the 1970s.)

“Tod was the mentor of every doctor working in the field,” says Philip A. Denney, MD.

Among his many accomplishments was the launching of this journal. The first issue (Summer 2003) reflected the many levels on which he was involved in the medical marijuana movement: as a **physician** treating patients, a **historian** recovering the pre-prohibition literature, a **researcher** documenting the astonishing range of conditions that people were treating with cannabis, an **organizer** (founder of the Society of Cannabis Clinicians), an engaged **citizen** intent on implementing the law (Prop 215, which he had helped draft), and an **educator** sharing his singular knowledge with patients, colleagues, and the community at large.

For these efforts Tod was targeted by law enforcement in California. Thus the front-page headline of that first *O'Shaughnessy's*: “Mikuriya Asks Medical Board to Drop Charges and Clarify Practice Standards re Cannabis.”

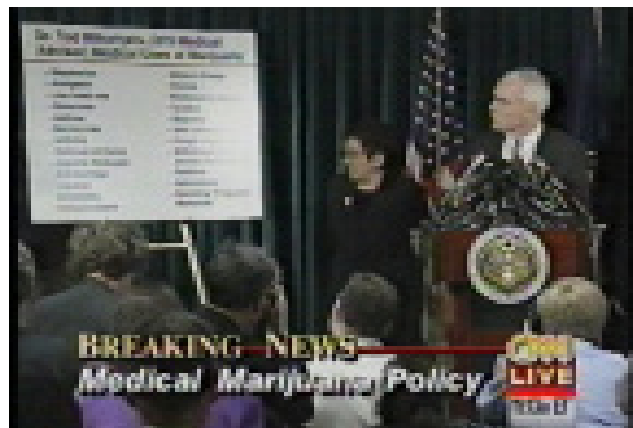
The board was threatening to revoke his license for allegedly mishandling 46 cases. None of the cases stemmed from a complaint by a patient or alleged harm to a patient. The complaints, as Tod put it, “came from cops and sheriffs and deputy DAs who couldn't accept that a certain individual had the right to use marijuana for medical reasons.”

Tod was dismayed that the Attorney General's office was pressing the accusation against him even though a supposed liberal (Democrat Bill Lockyer) had replaced a right-winger (Republican Dan Lungren).

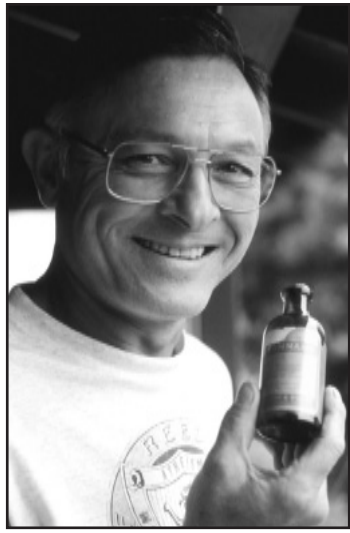
The harm-reduction approach

That first *O'Shaughnessy's* featured Mikuriya's landmark study, “Cannabis as a Substitute for Alcohol,” which ought to be required reading for every treatment specialist in the country. Tod described his patients as “case studies in harm reduction.” He tried over the years to interest the California Society of Addiction Medicine in cannabis as an alternative to alcohol and hard drugs.

A Dis From the U.S. Government



DRUG CZAR BARRY MCCAFFREY and Health & Human Services Secretary Donna Shalala mocked Mikuriya at a press conference on December 30, 1996. McCaffrey considered Mikuriya's list of conditions for which marijuana provides relief fraudulent and absurd. “This isn't medicine,” declared McCaffrey, “it's a Cheech and Chong show.” Shalala, the highest-ranking health officer in the U.S. government, said that marijuana should not be available as medicine because it is —she struggled momentarily for the precise term— “wrong.” To McCaffrey's left (not in photo) were Attorney General Janet Reno and Alan Leshner, director of the National Institute on Drug Abuse.



“GRANDFATHER IT IN” was Mikuriya's line on restoring cannabis to the formulary. In this photo he's holding a cannabis extract marketed by Eli Lilly prior to the prohibition imposed in 1937.

PHOTO BY MICHAEL ALDRICH

Sometimes they ignored him, sometimes they shined him on. Eventually he didn't renew his membership.

“Neither human physiology nor the effects of cannabis have changed.”

Back to the Future!

The end piece of that first issue was an obscure document Tod had unearthed, an 1873 report of British tax officials in India on the alleged deleterious effects of cannabis. The report, he explained in his introductory note, “addresses the relationship of cannabis and mental disorder in terms that are relevant in California in 2003. Neither human physiology nor the effects of cannabis have changed.”

Tod's interest in history was practical, not academic. He thought we had a lot to learn from past practices in many fields, not just medicine. America's preference for the modern, which Tod called “temporal chauvinism” (he had a knack for the thought-provoking phrase) is an outlook conducive to sales of new products —plastic instead of glass, aluminum or particleboard instead of wood, formica instead of ceramic tile, Prozac instead of cannabis, et cetera.

We talked almost every day for 11 years and after he died the conversation kept on in my head. “Got to call Tod, make sure he sees this,” I thought when the *San Francisco Chronicle* ran a piece about firefighters preferring old wooden ladders to the new fiberglass ones. Among other advantages, the wooden ladders fail by burning, which gives the firefighters time to climb down. The fiberglass ladders melt and collapse.

Tod often used the slogans “Grandfather it in!” and “Back to the future!” in discussing the legalization of cannabis for medical use. To those who didn't get the reference, he would explain that cannabis had been widely used in this country between the Civil War and the Great Depression, mainly in the form of tinctures. Producers of cannabis products included Eli Lilly,

Merck, Parke Davis and other major pharmaceutical companies.

This history —and the very fact that cannabis has medicinal properties— had been suppressed so thoroughly that very few Americans who smoked it in social settings between 1965 and 1990 were aware of it. Nor were physicians.

It was Tod Mikuriya who uncovered and collected the papers that clinicians had published in medical journals prior to the 1937 Prohibition. In 1973 he brought them out in an anthology called “*Marijuana Medical Papers*,” published



PRIDE OF EDITORSHIP: “*Marijuana Medical Papers*” —an anthology of journal articles collected by Mikuriya— was published at his own expense in 1973. The book had just arrived from the printer when this photo was taken. (Photographer unknown.)

at his own expense. The reader he had in mind was “a physician who realized he had learned nothing about cannabis in medical school.”

Statement of Purpose

Our first editorial was a statement of purpose. For better or worse, it still applies: “Our primary goals are... to bring out findings that are accurate, duplicable, and useful to the community at large. But in order to do this we have to pursue parallel goals such as removing the impediments to clinical research created by Prohibition, and educating colleagues, co-workers and patients as we educate ourselves about the medical uses of cannabis...”

“Legalization under Section 11362.5 of the state's Health & Safety Code created a fearful dilemma for California doctors, because cannabis remains illegal under federal law. Most doctors, having had no training on the subject in medical school, having no guidance with respect to dose, modes of delivery, range of effects, counter-indications, etc., have been understandably reluctant to sanction their patients' use of cannabis.

“A December 1996 threat from federal officials to deny prescription-writing privileges to California doctors who recommend marijuana has achieved some of its inhibiting purpose, although the federal courts ruled that it violated the First Amendment...”

This was a reference to the civil suit brought in 1997 as *Conant v. McCaffrey*, which resulted in a permanent injunction preventing the federal government —on Constitutional grounds— from punishing doctors who discuss marijuana with their patients. (The First Amendment guarantees freedom of speech.)

Drug Czar Barry McCaffrey had singled out Mikuriya when he threatened California doctors at a Dec. 30, 1996 press conference. The lawyers who sued in response asked Marcus Conant, MD —a UC San Francisco dermatologist

who had treated numerous AIDS patients— to be the lead plaintiff.

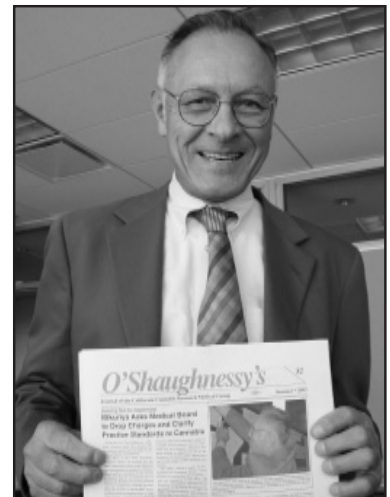
Choosing Conant, a doctor with establishment credentials who was dealing with the HIV epidemic, made tactical sense; but Tod was disappointed that he wasn't invited to be one of the many co-plaintiffs. It was only one of the disses he would endure with quiet dignity as a new crop of leaders took over from his close ally Dennis Peron, the prime mover behind Proposition 215.

The Endocannabinoid System

The political movement that culminated in California's medical marijuana law was accompanied by movement on the scientific front —a series of breakthroughs identifying the receptor system in the body that responds to compounds in marijuana.

To Tod, the political and scientific advances validated each other. He was a member of the International Cannabinoid Research Society and made presentations at several ICRS meetings. Updating California doctors and their patients on the state of the science was and is a key goal of *O'Shaughnessy's*.

Our first issue covered the 2002 ICRS meeting at Asilomar (where Tod had presented a poster on “Cannabis as an Easement.”) Evidence was accumulating that one of the body's own cannabinoids works as a “retrograde messenger,” causing other neurotransmitters to



O'SHAUGHNESSY'S was created in part so that doctors monitoring cannabis use by California patients would have a forum for sharing findings and observations —not just with colleagues but with patients, too. “Doctors have more to learn from patients about cannabis than vice versa,” Mikuriya observed. PHOTO BY MICHAEL ALDRICH

slow down when firing too intensely. “The endocannabinoids appear to be released by post-synaptic neurons and travel backwards across the synapse to inhibit neurotransmitter release from the presynaptic neurons,” is how researcher Gregory Gerdeman summarized it.

Tod appreciated the likeness between how cannabinoids work on the neuronal level —toning down signals in response to the need downstream— and their overall modulating effect on the mind and body. “We could have called the paper “*The Retrograde Signal*,” he said.



WOODEN LADDERS at the SF Fire Department repair shop. “Temporal chauvinism” was Tod's phrase for the assumption that new products are invariably superior.