

is a medical device and, therefore, the FDA has jurisdiction under our FDA statutes over tobacco. Well, surely, then, if a cigarette is a medical device, the FDA has jurisdiction over marijuana when put in a cigarette and smoked. But the FDA has done nothing to determine the safety and efficacy of marijuana for medical uses.

It is already the law that doctors can prescribe marijuana to sick patients, and that is not what we are talking about here. But what we do wish to do is get the FDA to focus as much as they are focused on tobacco on what happens when we put marijuana in those cigarettes.

Mr. Speaker, the last thing that the resolution does is it asks the FDA, the Commissioner of foods and drugs, to submit to the Congress a report on the specific efforts underway to enforce existing law. That is the entirety of what this resolution does, and a vote against this resolution is a vote against either 1 or all 3 of those things, a position which is untenable if one takes as seriously smoking marijuana as one takes smoking a tobacco cigarette.

Mr. FRANK of Massachusetts. Mr. Speaker, I yield myself 1 minute to say there is one part of this resolution that specifically affirms the FDA's current rules for determining not just the safety of a drug, but efficacy.

So if one votes for this and if one has told people in their district that they think the FDA has been too restrictive on certain kinds of drugs, if one thinks they have been too much interfering with people's rights to make their own choices without regard to safety, understand that this resolution contradicts it. Because one of the specific things in this resolution is an explicit endorsement of the rules of the FDA, not just regarding safety, but efficacy.

Now, I know Members have written in and said, oh, yeah, the FDA has been too harsh on this drug and too harsh on that drug. I know Members have told people that they think the FDA has been too restrictive. Understand that this resolution is not just about marijuana; this is an explicit endorsement of current FDA procedures for dealing not only with safety, but efficacy, telling people that the FDA will tell them whether or not they can take a certain substance, even if it is not going to do them any harm.

Mr. Speaker, I yield 3½ minutes to the gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. Mr. Speaker, I rise in opposition to this questionable election year resolution. I do so as one who chose personally to never experiment with marijuana, either inhaling or not inhaling, and who shares the professed concerns of the supporters of this resolution that we do nothing to glamorize the recreational use of marijuana.

I think that the gentleman from California has just made 2 points that deserve further consideration. One is he suggests that we read the resolu-

tion. I have. Not all of the electioneering in the early "whereas" clauses, but what this resolution actually does. All that it does is to ask the Attorney General for some data which a phone call or one 32-cent stamp would probably produce.

The other thing it does is to place Congress on record in telling the States that they ought not to pass any more initiatives on this subject. I suggest that is going to be about as meaningful as them getting up and making this list of speeches this afternoon as far as the views of people in the individual States.

The gentleman from California also makes an important comparison between marijuana and tobacco. This House has chosen to do absolutely nothing about a much more addictive drug, that being nicotine, that threatens the lives of thousands of our young people each day. This House has chosen, though there have been many statements to the contrary, including by the Speaker, that we have chosen to avoid an opportunity to deal with the very serious public health problem that addicts 3,000 more young people every day to nicotine; it has chosen to avoid that. The only way it has addressed that issue was the unsuccessful attempt last year to pass a \$50 billion tax break for the tobacco companies.

But on the specific issue of marijuana use for medicinal purposes, it seems to me that the basic difference that we have on this issue is whether to entrust that decision to the scientific community, to the medical community, or repeatedly to turn to Dr. NEWT. I think that if someone has a serious cancer, a serious case of glaucoma, one of the other uses for which medicinal use of marijuana has been recommended, I would like them to determine whether they might be saved some serious pain and suffering that no other kind of medication attempts to relieve, not based on my opinion, not based on Dr. NEWT's opinion, but based on their doctor and their scientific community as to whether this is an appropriate way to reduce the pain and the suffering that that person has.

I note that the New England Journal of Medicine, one of the most respected publications in the medical community in this country, and a number of oncologists in this country seem to believe that this substance has some benefits, and for this Congress to mangle politics into medicine is a mistake. But perhaps it was put best by a Florida woman who successfully uses marijuana to treat glaucoma in her eye who said, "You cannot outlaw compassion, self preservation, or survival." That is what is proposed as we inject here on the eve of the election Dr. NEWT in a medical decision.

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (Mr. CALVERT). The Chair would point out that Members should not refer to other Members by their first names.

Mr. MCCOLLUM. Mr. Speaker, I yield 2 minutes to the gentleman from New

York (Mr. GILMAN), chairman of the Committee on International Relations.

(Mr. GILMAN asked and was given permission to revise and extend his remarks.)

Mr. GILMAN. Mr. Speaker, I rise today in strong support of House joint resolution 117, the sense of Congress on marijuana, and I commend the sponsor of the resolution, the gentleman from Florida (Mr. MCCOLLUM) for bringing this measure to the floor at this time.

In recent years, promoting so-called medicinal uses for marijuana has taken hold in several States. In 1996, the voters in both California and Arizona passed referendums in defiance of the Federal law permitting the use of marijuana as a medical device primarily for pain relief.

This resolution, a result of several committee hearings and intensive research, expresses the sense of the Congress that marijuana contains no plausible medicinal benefits and that it is, in fact, harmful to the smoker.

Specifically, the resolution restates congressional commitment to keep marijuana on the roster of Schedule 1 of the Controlled Substances Act and requests 2 reports, one from the Attorney General, on the amount of marijuana seized and destroyed, as well as the number of marijuana prosecutions from 1992 through 1997; and secondly, from the Commissioner of the Food and Drug Administration on the efforts to enforce current laws prohibiting the sale and use of Schedule 1 drugs.

Mr. Speaker, the number of adolescents who have used marijuana has doubled since 1993. It has been well established that marijuana is a gateway drug, the use of which often leads to more serious drug consumption such as heroin and cocaine use. These trends need to be reversed.

Moreover, I believe that it is important for Congress to take a firm stand on the issue of medicinal use of marijuana. This is a poor cover for the larger issue of drug legalization. Accordingly, I urge my colleagues to strongly support this worthwhile resolution.

The SPEAKER pro tempore. The Chair would point out that the gentleman from Florida (Mr. MCCOLLUM) has 3½ minutes remaining; the gentleman from Massachusetts (Mr. FRANK) has 7 minutes remaining.

Mr. FRANK of Massachusetts. Mr. Speaker, I yield 3 minutes to the gentleman from Texas (Mr. PAUL), a real doctor.

(Mr. PAUL asked and was given permission to revise and extend his remarks.)

Mr. PAUL. Mr. Speaker, I am a physician, I am a parent and I am a grandparent, and I am convinced that drugs are a very, very serious problem in this country, not only the illegal ones, but the legal ones as well. Just last year, 106,000 people died from the legal use of drugs. We are drug dependent, on the illegal drugs and on the legal tranquilizers. That is a major problem.

But I have also concluded that the war on drugs is a failed war and that we should be doing something else. I might point out that the argument for the use of marijuana in medicine is not for pain. To say that it has not relieved pain is not what this is about. Marijuana has been used by cancer patients who have been receiving chemotherapy who have intractable nausea. It is the only thing they have found that has allowed them to eat, and so many cancer patients die from malnutrition. The same is true about an AIDS patient. So this is a debate on compassion, as well as legality.

But the way we are going about this is wrong. I am rather surprised in our side of the aisle that champions limited government and States' rights, that they use the FDA's ability to regulate nicotine as an excuse and the legal loophole for the Federal Government to be involved in marijuana. I might remind them that 80 years ago when this country decided that we should not have alcohol, they did not come to the Congress and ask for a law. They asked for a constitutional amendment realizing the Congress had no authority to regulate alcohol. Today we have forgotten about that. Many of my colleagues might not know or remember that the first attack on the medicinal use of marijuana occurred under the hero of the left, F.D.R., in 1937. Prior to 1937, marijuana was used medicinally, and it was used with only local control.

The Federal controls on illicit drugs has not worked and it is not working when it comes to marijuana. Once again, we have States saying, just allow the physician the option to give some of these people some marijuana. Possibly it will help. I think the jury is still out about how useful it is. But for us to close it down and say one cannot, and deny some comfort to a dying patient, I do not think this is very compassionate one way or the other.

The war on drugs has been going on now for several decades. We have spent over \$200 billion. There is no evidence to show that there is less drug usage in this country.

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I have a program designed, which I cannot present here, that will change our policy and attack the drugs in a much different way.

Mr. MCCOLLUM. Mr. Speaker, I yield 2 minutes to the gentleman from Indiana (Mr. SOUDER).

Mr. SOUDER. Mr. Speaker, it is hard to believe, at a time when this entire Nation is abuzz about what kind of moral leadership is coming out of Washington, that we even have to consider this resolution.

In my hometown in Fort Wayne and throughout northeast Indiana and throughout this country, kids are dying in the streets, they are dying in automobile wrecks, they are getting shot down as innocent bystanders in drug wars, most of which started in

some kind of combination of cigarettes, alcohol, and marijuana.

We have seen a lowering in attitudes about the positive usage of cigarettes. We need to make more gains on alcohol. But we have seen a reversal in the trends on marijuana, partly because the leaders of our country have not spoken out as strongly.

The last thing we need in this House are Members of Congress using the word simultaneously with medicinal use of marijuana when what they actually mean is a component inside marijuana, THC, and giving the implication that somehow this is a medicine, at a time when young people are becoming more lax in their attitudes and in their usage.

Directly to make this point, in California, it is not for cancer patients. It also can be used for such things as memory recall, writer's cramp, corn callouses. It was a back doorway in California and Arizona and other places where misleading commercials were run, funded predominantly by a man named George Soros and two of his allies who have poured \$15 million over 5 years into this to oppose the war on drugs.

Among his statements in Time Magazine was, "I do want to weaken drug laws. I think they are unnecessarily severe. The injustice of the thing is outrageous."

The director of Soros' Lindesmith Center said, it is nice to think that in another 5 to 10 years the right to possess or consume drugs may be as powerfully and widely understood as other rights of Americans.

We are at a moral crossroads in this country. The question is, where do we in Congress stand? Are we going to work to protect our kids in this country, or are we going to weaken these laws that we have tried to uphold?

I am very concerned about this trend, and I hope the Members of Congress understand the moral responsibilities of this office.

Mr. FRANK of Massachusetts. Mr. Speaker, I yield myself my remaining time.

Mr. Speaker, while I was glad to hear my friend express such indignation at the large amounts of money George Soros is spending in a referendum, that is the first support we have heard from that side for campaign finance reform, at least in principle.

Of course we have people on that side who think spending unlimited amounts of money is a good thing when they agree with the cause. It only becomes bad when they disagree with the cause.

That is where we are with States' rights. The gentleman from New York who spoke on the left said he was for States' rights, and that is true. I can say now that I know this Republican majority very well. They are for the right of any State to do anything they agree with. But let a State diverge, and that State is going to be spanked.

The gentleman from California (Mr. Cox) who spoke is a little embarrassed,

perhaps, because there is a resolution that talks about how dumb his own State is. He said, well, there is nothing in this resolution which criticizes the State.

That is only partially a good description. It is the case, and I will give the majority this, they did recognize that the resolution that they put through committee was a little too explicit in spanking the State.

The Committee on the Judiciary passed a resolution calling the States all kinds of names in effect, and telling the States not to do this, and wagging their finger at the States. They get a little embarrassed about it, but I am going to put it in the RECORD anyway, Mr. Speaker, because I think people ought to know what they were really trying to get at.

So then they cleaned it up some. But they did leave in this telling phrase, "Congress opposes efforts to circumvent this process." They are talking about California's referendum. What effort is that? To circumvent the process. So this resolution does say to the States, "Naughty, naughty. How dare you differ with us?"

The fact is it also goes on to say, and I think this is important for Members to understand, this is not just about marijuana, Congress continues to support the existing Federal legal process for determining the safety and efficacy of drugs, all drugs.

I know there have been Members on both sides who have been questioning whether the FDA ought to have the kind of control it has where efficacy is involved. We all believe the FDA should say that is not safe.

Indeed, this Congress passed a bill, I think it was sponsored by the gentleman from Utah and, I know, our former colleague, the gentleman from New Mexico, recently which relaxed FDA control. There were others who wanted to relax FDA control further.

If my colleagues have told constituents that they want to relax some FDA rules on determining efficacy, and if they vote for this resolution, they better write them an apology, because they have just undercut that statement.

The final thing I want to say, in addition to saying that it seems to be that States ought to be able to make some decisions in this matter, and this resolution is clearly an effort to stop the States from deviating from whatever the national orthodoxy is, the gentleman from Texas (Mr. PAUL) who spoke made a very important point. People get up and they talk about how terrible the drug problem is and then talk about the importance of continuing our current policy approach.

There is a great inconsistency here. When we talk about poverty, public housing, welfare, we have a tendency to have people look at the amount of money spent, then look at the fact that the problem has, if anything, gotten worse, and say therefore we must stop. That method of analysis has turned on its head for drugs.