

PROHIBITING OFFSHORE ENERGY DEVELOPMENT

(Mr. THOMPSON of Pennsylvania asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. THOMPSON of Pennsylvania. Mr. Speaker, in 2008, the President and the House of Representatives lifted the 24-year-old moratorium on offshore oil and gas production on most of our Atlantic and Pacific coasts. Back in March, President Obama pushed for offshore oil drilling in the eastern Gulf of Mexico and the Atlantic coast through 2017. Then in April, the BP oil spill happened. That disaster is certainly a cautionary tale.

Yet, in the first week in December, Secretary of the Interior Ken Salazar, without an act of Congress or a Presidential executive order, single-handedly prohibited offshore energy development from 2012 to 2017—a 5-year plan for offshore leasing. In reality, this change means no new production can even begin until 2022, if then.

That is not the way to reduce our rising dependence on foreign oil or to solve our unemployment problem or our lack of economic growth. We must learn our lessons from the Gulf of Mexico oil spill and proceed with care—but we must proceed.

President Obama, through Secretary Salazar and strangulation by regulation, has set back our country's path to energy security by at least 12 years, which is certain to produce higher energy prices and to increase our dependence on foreign imports—hardly sound energy policy.

WE MUST PASS THE SENIORS PROTECTION ACT OF 2010

(Ms. JACKSON LEE of Texas asked and was given permission to address the House for 1 minute.)

Ms. JACKSON LEE of Texas. Mr. Speaker, it is great news that we gave an opportunity to young people today by passing the DREAM Act, but shame on us that we did not pass the Seniors Protection Act of 2010.

Democrats rallied to make a commitment to the Nation's seniors for a \$250 refund as they listened to the horrible pronouncement that they would not get a cost-of-living increase. We owe them. We owe them because of the hard work that they have contributed over the decades to build this Nation. They have provided us with years and years of work, of investment and production and of part of the manufacturing history of this country.

How can we leave this session and not provide our seniors with relief?

So I call upon my colleagues to rally together for what is right for those seniors, who have carried the flag, who have fought in our wars, who have nurtured the sick, who have raised our children, and who have invested in America. It is time to pass the Seniors Protection Act of 2010. We should not leave this Congress and not finish this year without passing this relief for the

seniors of America—patriots, deserving—all of them.

MEDICINAL MARIJUANA IS A MISNOMER

(Mr. KAGEN asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. KAGEN. Mr. Speaker, I rise this morning, before everyone begins their conversations about tax cuts, about jobs, about immigration, to raise a serious health concern. You know, when I was brought up in northeast Wisconsin, my father taught me that if it's good for business, it's going to happen; I would just like it to be legal. And the subject I am going to mention here is the idea, the false idea of medicinal marijuana.

There is nothing safe about smoking. There is nothing safe about smoking an illicit product called marijuana. Marijuana is universally contaminated with a mold spore *Aspergillus*, *Mucor*, *Penicillium*, and other items that will harm human health.

This House, this body has do what's best for people. We need a healthy economy and we need healthy people at work. So don't make the mistake of thinking at any point in time that there is something safe about smoking medicinal marijuana, which is a misnomer.

So I look forward later today to passing House Resolution 1540 that addresses the illicit production of marijuana on Federal lands.

MARIJUANA SMOKING AND FUNGAL SENSITIZATION

(Steven L. Kagen, M.D., Viswanath P. Kurup, Ph.D., Peter G. Sohnle, M.D., and Jordan N. Fink, M.D. Milwaukee, Wis.)

The possible role of marijuana (MJ) in inducing sensitization to *Aspergillus* organisms was studied in 28 MJ smokers by evaluating their clinical status and immune responses to microorganisms isolated from MJ. The spectrum of illnesses included one patient with systemic aspergillosis and seven patients with a history of bronchospasm after the smoking of MJ. Twenty-one smokers were asymptomatic. Fungi were identified in 13 of 14 MJ samples and included *Aspergillus fumigatus*, *A. flavus*, *A. niger*, *Mucor*, *Penicillium*, and thermophilic actinomycetes. Precipitins to *Aspergillus* antigens were found in 13 of 23 smokers and in one of 10 controls, while significant blastogenesis to *Aspergillus* was demonstrated in only three of 23 MJ smokers. When samples were smoked into an Andersen air sampler, *A. fumigatus* passed easily through contaminated MJ cigarettes. Thus the use of MJ assumes the risks of both fungal exposure and infection, as well as the possible induction of a variety of immunologic lung disorders. (*J Allergy Clin Immunol* 71:389, 1983.)

The recreational and medicinal use of MJ has reached epidemic proportions. The National Institute on Drug Abuse has documented that nearly one in 10 American high school seniors use MJ on a daily basis.¹ Furthermore, a survey of adult and pediatric oncology centers reveals that a substantial population of patients receiving cancer chemotherapy are now encouraged to use MJ as an antiemetic.²

The medicinal use of MJ, however, is not without risks. MJ may contain toxic sub-

stances such as Agent Orange, phencyclidine, or paraquat, and outbreaks of salmonellosis and hepatitis B have been traced to MJ.³⁻⁵ Similarly, *Aspergillus* has been cultured from MJ and has been considered the likely source of infection in patients who have developed invasive pulmonary and allergic bronchopulmonary aspergillosis.⁶⁻⁸ Due to the widespread use of MJ by normal and immunodeficient individuals, we thought it important to evaluate its possible role as a source of exposure and sensitization to *Aspergillus* organisms. Preliminary results of our investigations revealed that MJ contains pathogenic, inhalable *Aspergillus* organisms that may sensitize the user.^{9,10} This article presents additional *in vitro* studies and further documents the spectrum of fungal organisms present in MJ.

MATERIALS AND METHODS

SUBJECTS

A total of 28 subjects were randomly selected to be evaluated for immunologic reactivity toward *A. fumigatus*, to which they may have been exposed while smoking MJ. Medical histories, physical examinations, cultures of their MJ, and serologic studies were performed. Ten age-matched individuals who denied ever having smoked MJ served as controls.

CULTURES

Samples of MJ were plated directly onto SGA, SGA with antibiotics, TSA, and TSA with novobiocin. SGA plates were incubated at room temperature and at 37° C, while TSA plates were incubated at 55° C. Plates were observed daily for growth of organisms. Any growth appearing was subcultured, purified, and identified according to standard methods.^{11,12}

IMMUNOLOGIC STUDIES

Precipitins. Serum precipitins against *A. fumigatus*, *A. flavus*, and *A. niger*, the predominant cultured organisms, were evaluated by agar gel diffusion as previously described.^{13,14} Serum precipitin assays were also performed with routine culture filtrate antigens from *Thermoactinomyces candidus* and *T. vulgaris*, *Mucor*, and *Penicillium* species to better assess the significance of circulating precipitins to *Aspergillus* antigens in MJ smokers.

Abbreviations used

MJ: Marijuana
SGA: Sabouraud's glucose agar
TSA: Trypticase soy agar
CPM: Counts per minute
Con-A: Concanavalin A
PMN: Polymorphonuclear
THC: Delta-9-tetrahydrocannabinol

Lymphocyte transformation. Lymphocytes were obtained from peripheral blood by Hypaque-Ficoll centrifugation and suspended at 0.25 x 10⁶ cells/ml in 0.4 ml of RPMI tissue culture medium (Gibco, Inc., Grand Island, N.Y.), using 15% pooled human plasma, with penicillin, streptomycin, and glutamine added. The cells were cultured with or without stimulants in a humidified atmosphere containing 5% CO₂, for 5 days, at which time 1 μCi of ³H-thymidine was added. Twenty-four hours later the cells were harvested onto glass fiber filters. The incorporation of ³H-thymidine was counted by scintillation counting and data were expressed as either total CPM or stimulation ratios (CPM experimental/CPM control). A positive result is defined as CPM >3000 and stimulation ratios >4.0, as previously described.¹⁵ Antigens and mitogens employed included Con-A (Miles Laboratories, Inc., Elkhart, Indiana), *A. fumigatus*, *A. niger*, and *A. flavus*. The optimal final concentrations of mitogens were determined in preliminary experiments with either human or guinea pig lymphocytes (*A.*