

I would like to welcome everyone to the medical marijuana awareness webinar. This is on PTS, PTSS, and PTSD. This is near and dear to many people's hearts. It is something that at this point in time we are dealing with. We know a lot more about it today than we did years ago. Medical cannabis has contributed substantially to the quality of people's lives. That is why we are going to do this. We have had a few of these in the past. This particular webinar. We are doing this because of the demand. I do want to mention a couple of things.

First of all, this webinar is close captioned. If you're interested in closed captioning, if you do not see them on your screen, if you look at the bottom of your screen, to the right-hand side you will see a little CC graphic. All you really need to do is click on that and you will be able to see the subtitles. We are not always able to have close captions on this particular webinar. We will make the transcript available on the follow-up website. This is a serious subject. I would like to have everyone take it seriously, so that we have good questions and we have a lot of interaction. We are here for you and here to answer your questions. Please feel free to do that. The best way to do that, is on the bottom of your screen, next to the closed caption is a question called Q&A. Feel free to type your questions in there. We will be monitoring the closed caption portion of this -- sorry, we will be monitoring the Q&A. If we do not get to the questions during the presentation, we will get to it after. We will try to get to it when it is appropriate. We want to address your questions and have them answered. Today I have a couple of gentlemen that are joining me. One of them that is a real trooper, Joshua, he is with veterans for cannabis. He is in Georgia driving down here. Because of the weather, you are in the car. Is that right? Tell us a little bit about it yourself.

>> Joshua: thank you for tuning in today. Marc, thank you for putting this on, and being part of this. To the audience, I really appreciate you bearing with me. The plan was to get there a little bit early, but that did not happen. We are just going to wing it, and make it happen on the fly. Marc and I have done these over the last few months - it is really near and dear to my heart. I am a combat veteran myself. A couple of tours overseas. I have fought for the last 10 years almost to

bring medical cannabis to the forefront in the veteran community. And also, to really bring to the top that veterans are not the only ones that suffer from PTS. Whether it is sexual trauma, car accidents, familial issues that come up. We are not the only ones that suffer from posttraumatic stress. We really want to bring that to the table tonight. We want everyone to know that it is for everyone, not just for the veterans. Marc, thank you for the platform. We really appreciate it.

>> Marc Matoza: I want you to be safe. Be safe and pay attention to the road. We want you on this side of the grass. Thank you for your contribution. I know you have been involved in a number of projects. Zack Swann is the other cohost. I will let you introduce yourself. Thank you very much. Tell us about yourself.

>> Zack Swann: I am honored to be here. It is great to see when people are taking time out of their schedules to learn more about cannabis. Particularly the subject, with how it relates to veterans and PTSS. My name is Zack Swann and I am the director of sales and marketing for all med Florida. We operate the group of dispensaries in the state. I was also the sales director in Arizona before transferring over here. My responsibilities for the company are primarily community outreach. And education. Most of my focus is actually directed toward physician education. I work closely with people like Marc to provide the latest and greatest information on cannabis as a treatment regimen. I am personally very passionate about it. My brother has ALS, which is like Lou Gehrig's disease. It is very tough and debilitating. The only improvement he has been able to see in life is from medical marijuana. I strongly believe in it, and I am glad to be here. I happy to answer any questions.

>> Marc Matoza: Thank you, I am glad you are here. We will be talking about a number of different things. It is important to understand that I want to make sure it is based on information. Please ask questions during the presentation. Use the Q&A button. We have some slides we're going to go over just to set a baseline. It makes it easier for us to be able to talk about different topics that we have. Again, hopefully you can see the

presentation I have shared with everyone. We have discussed some of the house keeping issues. Most importantly I should mention that anytime you get involved in medical cannabis, or anything that has to do with your health please consult a physician. There are a lot of physicians that will work with cannabis. Some of them will not. I think the best thing to understand is that if you have a physician who will not work with cannabis, find one who does. There are a lot of treatments coming on, and doctors are becoming more comfortable. Some are not. This is sensitive material. We are all coming together to be able to address this particular issue. If you are comfortable while you are driving, Joshua, can you tell me the difference between PTS and PTSS?

>> Joshua: That is a really great question. I will strive to slow down a little bit so they can pick up the closed captioning. Is my video showing? And we have the presentation showing. The real video between PTS, PTSD, and PTSS is the connotation that comes around it. When we say cannabis in the cannabis industry, the marijuana word is essentially a bad word, it is a derogatory term. When people call it posttraumatic stress disorder, it is a negative term because it is not a disorder. It is a stressor brought on by a particular situation that was very stressful. Post-traumatic stress syndrome, that is what we like to talk about, not posttraumatic stress disorder. That is really the only difference between them. Other than the therapies that go along with it. One is clinically diagnosed, one is not. PTSS is clinically diagnosed. That is the only difference behind it. It is something that has been around for a long time. PTSS is not new for us, it has been around for a long time. There is evidence that in the 16th century they were using a term called battle fatigue. And they were using it to battle migraines. And the cannabis flowers to help the soldiers. It was using used during the Civil War to reduce the opioids that were used to treat severe pain. In World War I and World War II we had battle fatigue and/or shellshock. It was not until 1980 that the term PTSD became what is called codified. That means it was a diagnosable disorder. It doesn't matter what it is called, it is all the same thing. Obviously, the Vietnam War brought that out. It is important that if you are suffering from PTS, from a military situation, this is nothing new. I can tell you that my father,

my father was a World War II vet. He fought for four years in the South Pacific. Only him and another gentleman lived through the war. We just learned to live with it, and he learned to live with it. There was not a lot we could do about it. The point is that it can be treated. Joshua, you also mentioned that it can happen if you had an auto accident. If you have been beaten, if you are in a bad relationship. There are number of things that bring the stressors about. Can you describe a little bit about what you see for people who have PTS?

>> Joshua: absolutely. I will tell you right now, the biggest issue that we are facing with Covid is the fact that they tell us not to pull back and not to isolate from our normal our day-to-day operations. Some of the symptoms are self-isolation, inability to communicate, inability to have a desire. Those are the key components you could notice people that have post-traumatic stress. A complete mood change. Depression can go along with it. So can anxiety. That is not something that is new. You can keep yourself abreast of what is going on in the situation. If you think someone is suffering from post-traumatic stress, Marc you mentioned earlier, with your father, your grandfather, it was called shellshocked back in the day. Now we know what the term is. The key is to recognize it, and get treatment. The biggest thing that you can get from this entire meeting tonight is talk, open up, and communicate. That is what it this is all about. You can communicate and get better from posttraumatic stress, from opening up and talking.

>> Marc Matoza: You mentioned those symptoms, and I noticed that there are other symptoms. You mentioned stress and anxiety. But people also have trouble sleeping.

>> Joshua: Absolutely.

>> Marc Matoza: And migraines.

>> Joshua: And I have nightmares. I wake up from a night terror in the middle of the night. I am thinking that I am in the middle of the desert again in the war. I have seen some of my friends, both men and women be in the middle of an office, or a completely secure setting. They go completely in the memory, their arms raised up. There are no stressors around them. It

can happen anywhere, under any situation.

>> Marc Matoza: Addressing it with other people and getting help. That is important. When we talk about help medical cannabis, symptoms like anxiety, like stress, like sleep. You mentioned night terrors. Those are all known to be things that cannabis can help with. There are thousands of people. Veterans and nonveterans who have suffered from this. There is a lot of anecdotal testing here in the U.S. Outside of the U.S., I work with the French and the Israelis, and the Spanish, and a few other groups. They have done a lot of studies on this, especially the Israelis. It has been proven to be quite effective.

>> Joshua: I wanted to bring up, the Israelis -- I fought with different forces from around the world. Israelis, Canadians, all kinds of people, people from Kuwait. Israelis have CBD in their MedPAC. There is a direct reduction in TBI. Traumatic brain injury, and often times you have PTS after a TBI. The bomb goes off, and you have a TBI, and if you administer CBD immediately you have a 30 percent reduction. They can get back to the fight quicker so they can face the enemy. Israel leads the world in cannabis research.

>> Marc Matoza: If you get on a bus in Israel, you have people with machine guns, because there is an essence of being in a war zone. A lot of those folks are using CBD as well to calm themselves. It is very interesting. They seem to be doing a great job of managing it. It has become a lot more prevalent in Canada as well. It is important. I want to talk about medical cannabis. I want to talk about the endocannabinoid system. I don't know how many people know who that is. Every single person has a nervous system, you also have a endocannabinoid system. It is very interesting in that throughout our bodies we have CB1 and CB2 receptors. What is interesting about CB1 and CB2 receptors, is that they are throughout our bodies. Cannabis works on these receptors. Let me just mention with the endocannabinoid system, it affects your pain, your memory, your appetite, inflammation. It modifies your mood. That is very important. When it was discovered, especially in the 90s, it was interesting to see the impact that it had on people. CB1 receptors, which are the blue ones you see here, these are

mainly found in the brain and the nervous system. CB2 receptors are found mostly in your peripheral organs as well as your immune system. What is interesting is that this is how your body functions. When you have a problem, your nervous system finds that you have a problem. What it does is your brain will say, if the problem is pain or inflammation, mood -- whatever it is -- the brain triggers that, and it triggers endocannabinoids, which are sent through your blood system to that part of your body to help address that situation. In many cases you may not have enough cannabinoids in your body. I am a senior citizen, anyone who falls in my category we do not necessarily produce endocannabinoid's like the young people. I put my body where my mouth was about two and half years ago. I had a knee replacement done. I worked with an orthopedic doctor here in Orlando, Florida. I was able to use cannabis as a post-surgical treatment. I did not use Percocet. I was in the hospital on Monday when I was operated on, on Monday and Tuesday I used Percocet, and Wednesday I used cannabis. When I got out of the hospital I was in a lot of pain. I used some drops, took two hits off of the vape pen, and within two minutes my pain level was down to a one. That is an example of being able to augment, because my body could not produce enough endocannabinoids to augment that. That is where you hear about tinctures, extracts, things like that. Your body controls those. There also are synthetic that you hear about. Marinol can work, under a doctor's care. It does not have any CBD. It is THC only. So, it does not give you the entourage effect. It is used by doctors, and it is part of the makeup as well. All that going to the endocannabinoid system, it helps regulate pain, pleasure, mood, pain. Your brain says it needs endocannabinoid. If you augment it with plant derived endocannabinoids, it goes into the fatty acids in your body. That is important to understand because there is a perception from people that it goes into the CB1 and CB2 receptors. It does not go there directly. It goes into the fatty acids. Your brain, neurons, neuro system, it will identify pain or the problem. What it does is that breaks those fatty acids into the long chain fatty acids, and it produces the endocannabinoid', and it sends it to the bloodstream to the part of the body that needs to be addressed. That is important for two reasons. Number one. No one has ever died from the use of cannabis at all. The reason for that is that it is your own body producing the medicine. It is not a

foreign substance coming into your body. It has not killed anybody. It is helping your body heal itself. That is important. The other part of it that is interesting is your neuron knows there is a problem, if you are treated for pain. If you are treated for pain in your knee, if you also have pain in your elbow it will also address the elbow pain. I have a situation where my mother was taking it for breast cancer. She is in remission. When she started taking it, about six weeks after she took it, she went to the doctor for glaucoma, the glaucoma was gone. The doctor asked what she was doing and she said, I was taking medical cannabis. The body knows where your problem is and this will do everything it can to address that. That is important to understand. This is natural. It is your body treating itself. That is the good news. Bad news is that everybody is different. Dosing is different for everyone. It is not like taking two pills, two aspirin and call me in the morning. You have to be able to get the dosing right and that is one of the tricks for medical cannabis. If you get it right, it is a huge relief. The question is, is cannabis effective? Aside from the anecdotal studies of literally thousands of not only veterans, but other PTS sufferers, there have been a number of additional studies out there. I'm not going to go through each of these. I will give you a list of articles. As a follow-up you'll get an email, and you'll be able to go to our website, and you'll be able to read and look at them. There are a couple that are important to point out. 72 percent of the patients got rid a lot of the nightmares, and flashbacks, and it helps people sleep. That is important.

>> Joshua: Let's expand on that. That ability to relax and sleep is a huge component to recovery. People often times will have PTS, they will have anxiety, not sleep through the night. That then exacerbates the issue tenfold. Having rest, and having your circadian rhythm in the rhythm it should be in is absolutely paramount to getting your body back to homeostasis. That is the equilibrium we all want to make sure we are running on every day. Marc, what you are talking about, and the studies, and the ability to go to sleep and stay asleep, that is a huge component of what medical cannabis brings to the table and the ability to manage PTS.

>> Marc Matoza: One of the studies that was done in California,

and at Yale, and NYU, shows that PTS can also be attributed to a deficiency of endocannabinoids. In other words, you don't have enough. So, it is important to augment that. There are studies that are out there. One of the things important to understand, is that if you are taking PTS treatments -- I know the VA is good at throwing pills at you. You have to work with a doctor that will help you reduce the opioids and will be okay with you taking cannabis. Your body will get back to a state of homeostasis. It is important to address that with your doctor. It is important to have a doctor that will work with you on this. Some doctors do support it, some doctors don't.

>> Joshua: One of the things that we need to touch on if you are a veteran paying attention, is that the VA does not give recommendations for medical cannabis. Those veterans on the webinar tonight will have to find a local physician and pay out-of-pocket unfortunately. That is a good point I wanted to make sure we brought up. I think it is important. Find a doctor that is sympathetic to medical cannabis. If you do not have one, it will make your life miserable. Let's put it that way. Let's dig into what cannabis is. Zach, you have been quiet. Tell us a little bit about it. I know you are familiar with THC and CBD. How are they different and how do they affect everything?

>> Zack Swann: Feel free to jump in any time, Marc and Josh. As far as the plant goes, the medical cannabis plant, the two primary cannabinoids that we are focused on and are regulated in the state today are CBD and cannabidiol, and THC or tetrahydrocannabidiol. THC can also be found in hemp. THC is unique to the cannabis plant. CBD is considered non-psychoactive. It can sometimes be a bit misleading. It is non-psychoactive in the sense that it does not cause the traditional idea of psychosis. The feeling of "being high". It does have an effect on the brain in a lot of positive ways. Including producing anxiety. THC is the traditional side of cannabis that can cause that psychosis. It is more geared toward pain reduction, as an anti-nausea medication, and it can also stimulate appetites. It can be great for muscle spasms. And neuropathy, and things of that nature.

>> Marc Matoza: Here's the famous CBD wheel. Either the things

that come from CBD or hemp. Those products have medical properties to them. From what I understand, the marijuana-based CBD products have about 180 medical properties. Is that correct?

>> Yes, that is correct. From a chemical standpoint, CBD comes from the cannabis plant, but CBD and hemp are not all that different. What I stress for patients and consumers, is to do research on your own when it comes to CBD. When a bill was passed in 2018, it opened the floodgates as it relates to CBD. There were a lot of people taking advantage of that space. People who were manufacturing, selling, or distribute products that were not what they claimed to be. Until the FDA regulated this, it is totally unregulated. I am encouraging people if they do not buy it, do the research on what they are buying.

>> Marc Matoza: As of January 1, every bottle of CBD has to have a label on the side if you take your smart phone, and put it up to the label it will show the testing done on the product.

>> Zack Swann: I really do believe over the next 5 or 10 years, you're going to see Florida lead the way in a lot of areas when it comes to hemp. Not only in the growing of it, in the state, but the production of CBD. It is exciting to see what people are doing.

>> Marc Matoza: I think it is important to point out that THC also has medical properties. If you mix THC and CBD together, cannabis as a plant has over 450 medical properties associated with it. In certain cases, in my case I was using it for pain. You have Delta eight, and Delta nine. Those are great for pain. You have some CBGA, that helps with pain. It is almost like one and one is three. I can tell you that the products I was taking for pain, as a postsurgical treatment was more effective than Percocet. I was partnered with five other people as a test. Four of them were taking pharmaceutical drugs. I was taking medical cannabis. My pain would stay below one, I would wake up in the morning at a 7 or 8, but with medical cannabis I would usually keep get it to a one or below. Of the five people, two of them switched to medical cannabis within 45 days. And they got tired of the side effects of the pharmaceutical drugs. One person dropped out. We see the entourage effect coming into

play. When THC and CBD were together, it is a powerful combination. You have seen that quite a bit, right Zack?

>> Zack Swann: At least with every product category that we offer, we offer that product in a one-to-one ratio. Equal balance of THC and CBD really highlights the entourage effect. For most conditions, and most patients, I highly recommend that they consider or begin a regimen using a one-to-one ratio.

>> Marc Matoza: It is not enough THC that it will get you high. You can operate. It will medically help you. That is the key is to find the balance.

>> Joshua: Let me go ahead and second that. I think anyone that is new to the cannabis industry would either start with a CBD:THC, that is 1:1. That is a perfect starting point for almost every single patient. You can get into it slowly. Start low, go slow. Figure out your therapeutic level as you move forward. A great point.

>> Marc Matoza: 1:1 is very important. Within three minutes my pain is down to a one. That is why I continue to use it. There is hemp and marijuana. You want to compare and contrast the two?

>> Zack Swann: It is the same family of plants but different species that you can see from Marc's picture. They are grown very differently. And treated very differently. The hemp plant does not flower. With medical cannabis, and the medical marijuana plant and the cannabis indica, we focus on female plants. They are the ones that flower. We do not grow males. In the flower there is a part referred to as the cola. That is where the medicine lives. There are medical components that contribute to the entourage of data. The trichomes that Marc is highlighting is where the -- live. The other thing that exists in the trichomes that is not highlighted here, but will become more and more important as more research is done, are flavonoids. That is another part of the part plant that is very important. There is exciting research coming out about that as well.

>> Marc Matoza: We are learning a lot. I got into this industry

about six years ago. It has changed a lot from the standpoint that we have learned a lot more. We will talk about that a little bit. One of the things someone told me, is that in order to be able to produce a bottle of hemp oil, of hemp CBD oil, it takes eight plants. But in the case of marijuana it takes about one half of a plant. The cost of a good hemp product, the perception is that the cost will be cheaper. Many people get sticker shock when they look at hemp. It is sometimes more expensive for a quality product than marijuana. It is an illusion that you need to take a look at. Let's talk about when I got involved the industry everyone told me about sativa and Indica.

>> I love this conversation.

>> Marc Matoza: A long time ago in a far, far away world, it was one of those. Do you want to talk about that?

>> Zack Swann: yes, I love talking about this. Sativa versus Indica, when cannabis was starting to be grown here in North America, there were the some clear genetic differences between the plants. They looked different and grew differently and had different effects. Fast-forward to 2020, and a lot of differences have changed. They have been crossbred multiple times. Every plant that is out there today is a hybrid. You really do not see that clear distinct genetic differences between Sativa and Indica anymore. That does not mean that the plants are not different. What really differentiates the plants today is not the Sativa versus the Indica, when it comes down to the terpenes. Those are essential oils and exist in every plant in the world. What is fascinating to me about cannabis is that there is a massive concentration of terpenes. But the variety, too. We have identified 13 terpenes that have never been identified before. They are very difficult to identify without some very specific equipment. What we are trying to see today is that when patients say that the Indica strain makes people feel tired, or physically affected, versus Sativa. Indica had a lot of concentrations -- you will see the language as the general population catches up. I encourage patients to ask the med tenders, ask the people you are buying from, ask about the terpenes. Once you have identified those, it will be easier for you to find a variety of streams that may be beneficial. I

always caution patients, when they become very attached to certain strains. Granddaddy purple, that is the only strain that is going to make me feel better, or work for me. That is really not the case. There are probably a lot that really have similar terpene profiles that will do the same thing. The reason I tell patients to not get too attached to particular strains, is that it is a plant at the end of the day. We cannot say it will be the same every time. It is nature. We can't. As much as we would like to control it as human beings, there is only so much we can control.

>> Marc Matoza: I will talk as a patient, I was in an automobile accident and I ended up with two herniated discs in my back and 7 in my neck. When a doctor comes in and says you are now my personal best, I have never seen this, that is a place you want to be. There was not a lot you can do. I tried the pharmacological drugs. I had been in the industry studying the cannabis but I had not been a user. When I went to the dispenser the first time, they recommended some products. I tried them like you mentioned. I started with a 1:1. I went low and slow and found that will work for me. By the third time I went back I got bold enough to say how do you know what I should get out of the products you have in the dispensary? I grew up in San Francisco and we had these Chinese doctors with thousands of bottles. It can be intimidating when you see all those bottles. They said, it is very simple, based on the condition you have, based on the recommendation of your doctor we have strains and terpenes to address the situation. That is how we recommend. And then the light went on, this is medicine. This is exactly what medicine is all about. They are being able to take the strains, and the terpenes, and address my situation. By being able to experiment with it, meaning when it did not work, up the dosing. Either in quantity, amount, or a different product, I was able to find my sweet spot. Once you can do that you get your life back. In my case it took about six weeks from the initial accident to get my sweet spot. I was operating pain-free after I started with medical cannabis. The work that the dispensaries are doing great. Listen to the doctor, the dispensary, your body. Let's talk about terpenes. That is an important part. Those are important, there are different profiles. Zack do want to talk about that?

>> Zack Swann: Absolutely. As I said before, terpenes are essential oils. Lavender, lavender is an essential oil. It is the most common chemical in the plant world. It is so fascinating to see how many different types of terpenes, and in large quantities, exist in the cannabis plant. We feel that there are major contributing factors that we see from the plant. When we talk about the entourage effect, we are not just talking about CBD and THC, we are also talking about terpenes. And how they contribute to specific effects. Some of them on the screen are most common. Some of the things I like about terpenes and focusing on that, the research of cannabis is not exactly where we want to be, and we do not have a ton of gold standard, double-blind placebo studies. Indicating specific medical benefits, there are thousands of peer-reviewed journals on terpenes and medical benefits. It is an anti-inflammatory. Inflammation seems to be one of the most common causes for pain. It does seem to be one of the common causes of pain.

>> Marc Matoza: The terpenes are very important. I got a degree, and I became a practitioner, from a cannabis Academy. Going through the studies, we saw the effect that terpenes can have. Let's talk about Limonene.

>> Zack Swann: That is one of the most common terpenes you will find particularly in cannabis. And what we would traditionally call Sativa. If a company is calling it a Sativa, ourselves included it will have a high level of Limonene. We often see it being successful for conditions like anxiety and depression. We looked at Sativa strains, and we partnered up with another company, and with that, we have found an 87 percent reduction in depression from a traditional pharmacology standpoint -- any physician that saw that amount of efficacy, would be jumping up and down. If you look at a benzodiazepine or an SSRI, 40 percent would be great. So, to see something double would be great.

>> Marc Matoza: something with PTS that we should be careful of is planning. Can you explain that?

>> Zack Swann: particularly with PTS, there are aspects of cannabis that are incredibly beneficial. People always seem to be cautious: this is going to something that you need to be

careful with. Also a-pinene seem to produce increased anxiety when you have a high concentration of a-pinene. That is why I encourage patients to ask those questions. Try to find out what kinds of terpenes are in there. If you talk about Sativa versus Indica, it can mean a lot of different things.

>> Joshua: That is the key to medicating. When we look at a-pinene, and we look at Linalool. Look at your situation. If you are about to go to bed, don't utilize a lot of Limonene. You want to use something that is relaxing and sedating. Really determine what is best for your body. Some people are allergic to things. You will notice that if you use some vaporizers you will sneeze immediately. There is probably a terpene in there that you're a little bit allergic to. We mentioned earlier about understanding what your product is made of, that is key. If you do not know what is in it, you cannot replicate it if it is a good experience with therapeutic benefit.

>> Marc Matoza: in my case, I wanted to have a regime, a daily program and replicate it and now it works every day. I need to be able to get up every morning and drop my pain level to be able below a one. I have five websites now and six social media sites. I can't be high. I cannot do that if I am in pain. I need to be lucid. It will affect my performance as a human being. We have to look at how to get that right. In the case of a-pinene, it can work against you. Let's talk about Linalool. That is very important. Zack, you want to take that?

>> Zack Swann: Limonene is a very common terpene to be found in cannabis. Again, traditionally associated with Indica strains. This is definitely geared toward pain management. It can be helpful for depression as well. Linalool is very effective for patients struggling with insomnia. If you have a hard time sleeping at night, or falling asleep or staying asleep, which are two different things. I could talk about that a little bit later, but I highly recommend investing in one that has a high concentration of Linalool in it.

>> Marc Matoza: my wife and I got into aromatherapys a few years ago. Lavender really helped us. Let's talk about myrcene and how it can be found in many of them. It's kind of a catchall, and you can find myrcene in really high concentrations in

mangoes. I have never really seen anything in terms of definitive research lines. Anecdotally, I see that consuming mangoes in conjunction with the cannabis regimen does seem to have an amplification of the benefits of cannabis. It could be a placebo effect. But I have heard that very commonly. Myrcene is also something that relaxes you.

>> It is almost like the chicken and an egg. Did you fall asleep because you are tired or relaxed ?

>> Marc Matoza: I had a medical doctor who talked about this. After the operation, normally what would happen with the pain is that you don't get a lot of sleep. I was starting to sleep better about six months after the surgery than I was before the surgery. What happened was that my body had been in pain over 25 years because of my knee. The pain was not there anymore. When you wake up from an operation, and the pain had literally been there for a long time, and it was gone. It was really shocking. Your body just kind of relaxes, and goes I do not have to put up with that. That is how you get a sedating or relaxing effect. Your body doesn't have to work that hard to manage the pain. That is where myrcene comes into play. Let's talk about how you can take it. When I got into the business six years ago, I could not perceive that I will be sitting on the front porch smoking a fatty. We have come a long way with it. There is a lot of different ways to take medical cannabis. A lot of it is personalized. What people like and what they don't like. Here are some of the products that are here. Zack you want to walk us through this?

>> Zack Swann: Absolutely. Depending on how you are going to consume your cannabis, and as you can see on the screen, there are a lot of different ways to consume it. That is going to have a difference in terms of onset time and duration of affect. That is a personal decision for every patient. Do you need relief quickly, or on for an ongoing basis? What is working for someone who suffers from migraine is not going to be the right regimen for someone who has a herniated disc who needs continuous pain management support. I encourage patients to understand your end goal, and what it is. Is it something you will need to use on a daily basis, whether it is PTS, or chronic pain that you will continue to need to work on managing. Or are

you in a situation like Marc was post surgically? Will you be in a lot of pain for a period of time, and you will you need something that will work quickly to relieve the pain? As you can see here, there are sublingual drops and tinctures is something that every MMTC carries. Vape pens are the same way. Pretty much every product you inhale would have an immediate onset time. You are inhaling the cannabinoids, so you will feel the effects almost instantaneously. On the complete opposite side of that is the -- cannabis. Whether it is a topical, edible, or a capsule, or a tincture product that will take longer to take affect but it will last longer. People who suffer from PTS typically do well with an adjustable cannabis product because they need something that will last an extended period of time.

>> I was going to chime in there. A couple of questions that came in, and I think it is a good time to answer those. In your chart, is the effectiveness timeframe, does that start when you first take the product, or does that start after it starts to take effect? It takes a long time before it takes effect. It is your metabolism. Each person is different. When I take edibles, edibles take forever for them to jump on me. But when they jump on me, they jump on me for five or six or 7 hours so it is a longer effect than for most people. But a vaporizer pen, almost immediately. It is really about your metabolism. And how you metabolize the cannabinoids, and how you take the product in. The chart here specifically is from the time you take the dose, that is what it is specifically looking at.

>> Zack Swann: Sublingual drops, is an example of 15 or 40 minutes later to 40 minutes later. Do not ingest cannabis on an empty stomach. It is a very fat soluble compound. It likes fat. If you do not have anything in your stomach, that cannabis will hang out there unfortunately until you eat something. They need something to grab onto and then it will release quickly. The edible that you thought will kick in in an hour, it will kick in four or five hours later because there was finally something in your gut for it to bind on it. Typically take an edible after consuming a meal. If it can be on the fatty side the meal, like peanut butter or meat or cheeses, that will help the onset time be faster.

>> Marc Matoza: In the morning, when I get up I take some --.

It will take 20 or 25 minutes to work. I immediately hit a vape pen. With my pain level, I want to get it down to a reasonable level. One of the things that is remarkable, when I hit the vape pen I can feel the pain go away within one or two minutes. The first time that happened to me, I remember saying to my wife this is kind of weird. Every day that I do it, in fact this morning when I did it, I was amazed by how fast it works. Within three minutes my pain level is down to one. If you have a high pain level, this is something that would be good to take advantage of. Some people use vape pens, some people use capsules.

>> Joshua: We are talking about pain right now. I'm guessing on this because the VA will not give us direct numbers on this, but I would say that between 75 and 90 percent of PTS patients have chronic pain. Yes, Marc and I and Zack are talking about chronic pain. If you have chronic pain with your PTS, and your PTS is exacerbated because you're constantly feeling the pain, because you had something blowup, and you lost an arm, or you had a traumatic brain injury, you can remove the pain with cannabis, then it helps remove the PTS symptoms. That is something a lot of people do not think about.

>> Marc Matoza: that is a good point. I will complement you guys on topicals. You have a great topical line. I used it after my operation. Tell us about topicals and about topicals in general.

>> Zack Swann: you have two different categories in topicals. You have two -- you have transdermals, and topicals. Topicals you apply topically to the skin. Those are great for localized relief. As I mentioned before cannabis is a fat soluble compound. You have a lot of fat in your epidermis, in your skin. Even if you are skinny. That is the nature of your epidermis. If you put a topical on your skin, it will bind to the fat cells in your skin. It is great for inflammation and pain reduction. We carry a facial topical, hydration lotion. It can be great for acne, psoriasis, inflammation. CBD is an amazing anti-inflammatory. Josh was talking about 30 percent reduction of TBI. Why that is not in every med kit for every armed force is just nuts. If you work for the federal government or you are a firefighter, topicals are a product you

can safely use about having to worry about a drug test. Because of the fat-soluble aspect it will not go into the bloodstream. It will stop at the skin. Transdermals on the other hand, it is going to get past the fat, and it will go directly into the bloodstream. It will have a systemic effect. Topical provides local effects, whereas the transdermal product which is similar to inhaling will be a systemic effect. It will circulate throughout your body. If you're trying to deal with something like PTS, you need a product that is systemic. You need a product that will break through the blood brain barrier and go through your entire body.

>> Marc Matoza: I am a huge transdermal fan. I tried to manage one for pain, and I tried to go between the patch, and the CBD patch. It really helps me, because within 72 hours of working, means that I do not have pain and it is easier for me to take my medications in the day. In the evenings and in the mornings, it helps me be able to get things done. Now with the quarantine situation, you have more time to work on this, before when I was in webinars and visiting customers and patients five days a week I did not have time to medicate. I found that one of the things that helped me a lot was the transdermals, and be able to stay on track with my dosing schedules.

>> Before we move on, Bryant raised a good question and I think it is good to bring up. He is a PTSD cannabis patient. He cannot be at a stable consistent level with his meds because of his work. This is something we all deal with. He cannot be medicated all day, and feels like the anxiety gets high. He has to medicate on his way home. That way he does not explode on his family. He asked what can I use that is not psychotropic when I feel the flutter beginning in my head? I think it is a really great point, and a great question. It sounds like he needs to take more advantage of more of the CBD side. That is what he said. I cannot agree more. The key is finding out what works for you, and maybe the transdermals would be a good option for you. It is all about your personal preference. Marc loves them and I hate them. I think you are right, if you had a transdermal throughout the day it might help you alleviate some of the anxiety throughout the day and might help you alleviate the combustion feeling at the end of the day.

>> Zack Swann: Bryant, what you're trying to accomplish is that you want the positive benefits of the cannabis without the negative side effects, right? It is causing too much psychosis during the day. How can I get the maximum amount of the medicinal benefit without the negative side effects? Josh is right, uptake the CBD during the day, consider that 1:1 ratio if that is not proving effective. What I have seen a lot, is that you will build a tolerance to the side effect of the THC. A dose that you find right now that might cause too much psychosis, that might be the perfect dose for you in two or three months. Any new drug that your body is getting adjusted to, it can take time.

>> Marc Matoza: Emilio asked a good question. When you buy a 1:1 product, is there any product that is Indica and CBD? Zack?

>> Zack Swann: When we say a 1:1 product, I did not do a great job of explaining that. That means is that it is a 1:1 ratio of CBD and THC. Every product described as a 1:1 product will have equal parts of THC and CBD. An example is our transdermal patch. That is 10 milligrams of THC and 10 milligrams of CBD associated with it. If you are talking about Indica, you have to talk about a product that is ratio specific and strain specific. That can be tricky. We do have a 1:1 vape pen. I believe that it is a --. That's also 1:1 ratio. Try not to focus too much on the Sativa or the Indica. But identify the terpenes that you are looking for in terms of effect. If you are looking for a Indica, try to find one that has Linalool and Myrcene.

>> Marc Matoza: When I work with some patients, I always tell people to pay attention to what your medical cannabis doctor tells you, and what your pharmacy tells you, and what your dispensary is telling you. The most important person to listen to is your body. Your body will tell you what your doctor cannot guess. The person behind the counter can only make a recommendation. Your body will tell you what will work and what will not work. This is something where you have to experiment. Maybe you will have a negative affect and get high. Or maybe you will try something that does not work. Make the adjustment. Do not stick with it. What one of the things that people do which is a huge mistake is if after two weeks it is not working,

they stop. That is what you should not do. Talk to your dispensary, and try things, and listen to your body. Your body will tell you what works. Once you get it dialed in, you get your life back. That is important. It might take a week or two. Have patience. This is kind of like taking vitamin pills you will be taking them for the rest of your life. I cannot get rid of a herniated disc. They are not going to go away. I either have to learn to live with them, or check out. I prefer to live with them.

>> Zack Swann: One last comment on that. This is like any other medication that you have been recommended or prescribed. It is on every individual patient to take personal responsibility over what is going to work or not work. It could take time to find out what that is. The endocannabinoid system. Everyone's system is unique to them. What works for Josh, for someone who had a very similar PTS situation, but it could be another thing for another patient. It is because we are all truly unique. It does take some patience. It takes ownership as an individual to be committed to improving your life. If you are going to be discouraged after the first couple of weeks, don't be. Talk to people at dispensaries, we're going to do everything we can to help you find the path that is best for you.

>> Marc Matoza: After about two months of my operation, we had dinner. We had one of the medical marijuana doctors there as well. The doctor looked at me and said this is so different than the pharmaceutical drugs that we prescribe. It is different, but it works. Interestingly enough his wife is on it. It helped his wife and his marriage. It is different than taking a pill for one particular situation. The endocannabinoid system, the body will tell you what's there. It is a matter of slowing down and listening to yourself. It is when people turn to things like music and meditation. You're getting to the nature part of your body, and it does work. It is something that is there. These are some of the reference materials that we will be sending to you after the presentation. You will get an email, and there will be a webpage. I'm not going to go through each of these, but there is a lot of interesting material that is there. Both anecdotally and chemically. Zack, tell us a little bit about Muv. You do some special things for your products.

>> Zack Swann: Absolutely, we have a big product portfolio. There are 14 dispensary companies. We are all completely vertical, it is required by law. We process, distribute, and sell everything. We all have unique different offerings. We are not going to go through every product offering today. I'm going to talk to the ones that relate to PTS. A quick background on Muv. We are very R&D focused. Our founder came from the pharmaceutical world. Unfortunately, his daughter did suffer from grand mal seizures. He had to see her go through that. As the years went on, he came across Sanjay Gupta's story on Charlotte's Web that has touched many people in the industry. [INDISCERNIBLE]. He came out of retirement to start this.

>> Marc Matoza: You are in a lot of locations.

>> Zack Swann: Yes, that did not used to be the case. We have been slower to open up stores in comparison to some of our competitors. We wanted to be sure we could maintain supply and we have. I am proud to say we opened 12 in the first 7 months of the year. We will open up to more in West Palm beach and in Port St. Lucie, and that will bring us to 25. We will open up 7 more before the year is over. We will have 40 locations by Q2 of next year. We will have more or less the entire state covered. You can see that there's a cluster of them in the Southwest. We are based out of Palm Beach Florida. That is where our cultivation is. Our company was founded in Sarasota. This is our backyard, and we try to have a strong presence. A lot of the expansion over the six or eight months is going to be up north in the Panhandle, the Northeast, and in the southeast, and will be expanding rapidly.

>> Marc Matoza: You said something important, you said that you wanted to make sure that if you open up a store you want to have the supplies. I cannot tell you how many times I found a product I like, and I go to a dispensary and they are out of it. That is important.

>> Zack Swann: We are not unique to that. We have done a good job of maintaining our supply. Particularly when it comes to specific product categories where we know we are the only one that offers it -- metered dose inhalers are example.

We are the only ones in the country that offers a metered dose inhaler. Emilio asked about that. It is immediate onset time. Cannabinoids actually go directly into upper bronchial cavity. We use the same propeller that albuterol uses. The onset time is immediate. The other thing is that it is also metered. One thing I always caution patients who are trying out vape pens for the first time is if you are starting to very notice varying effects, you are inhaling more or less medication.

>> Marc Matoza: You are inhaling it differently. I have been told to count to -- when you inhale. Some people have said no, but I tried to be consistent for that exact reason. That way I will know how it affects my body.

>> I will also answer Brian's question. [INDISCERNIBLE]. It really just depends on each patient. If the 16 to one is not effective for you, I would consider taking a look at a different ratio, but if that is working for you, stay there. There's nothing wrong with that.

>> Joshua: I think the 1:1 might be a good option for him because it does not have a super psychotic effect. It will allow him to do his job and still function, if you will. That 1:1 might be a good option for him, versus the 16 to 1 THC - CBD option for him. That could be a good option for him during the day.

>> Zack Swann: That 16 to 1 is not doing the trick.

>> Marc Matoza: it will help you with the information, but not help much with the clutter. Zack, you have some best of class products.

>> Zack Swann: We like to think so. We offer a wide variety. We have injectables, transdermal products, and smoke-free inhalation, and concentrates and flower are also an option. These are also some specific products that I have had feedback on from patients. RSO is an amazing product. A Canadian gentleman was the first to promote full extract cannabis oil. That is what RSO is, is it is a first full extract cannabis oil. It is not the terpenes, but it has the lipids in the other

things like I was talking about. It has amazing effects for the entourage effect. There are a lot of people who use RSO oil, as it relates to cancer. Particularly, as my time in Florida, I saw a lot of PTS patients using RSO. I did not understand the reason behind it but I met with a doctor who is an active military and physician. He gave me an amazing explanation. The reason RSO is effective for PTS patients is as a nighttime sleep aid. When you have night terrors, a lot of time that happens when your brain enters REM. And then your brain can have traumatic experiences. It allows your body to sleep, but it blocks your body's ability to enter into REM. Without entering into REM, you're not being forced to relive those traumatic experiences and having nightmares and panic attacks. I just met with a sleep specialist physician. He was a sleep doctor. His patients started using cannabis and he was so blown away by the results, and he started recommending us as well. It is fascinating to see the correlation between cannabis, sleep, REM, and PTS. Josh you want to talk about that?

>> Joshua: I have a couple of questions for you first. What is the amount of time it lasts, if the onset was immediate? And he wants to know what is the oral strength, and how long it lasts.

>> Zack Swann: it is only going to last three or four hours, as inhalation products are not going to have an extended time of release. For some patients that is okay. That is what they are looking for. The oral spray is another great micro dosing option. We have not talked about macro dosing and micro dosing. Refers to taking cannabis in a low THC, or high CBD ratio. It is only 1.1 milligrams THC per spray. The rule of thumb is that if you can stand three milligrams, most patients will not experience psychosis. I really like it. It is only 150 milligrams. It can fit in your pocket or purse. You want to start out with a small dose, it is also very affordable option. It is only \$25. If you are nervous about making an investment in a vape pen, concentrates are another major category that I see patients with PTS having success. Not all patients are equal. I do not want to lump all patients together. A lot of PTS patients require a lot of milligrams of THC. I do not know if that is with the product pain associated with the PTS, or because they need the high milligrams as a nighttime sleep aid. RSO is very potent and has a lot of milligrams of THC. We have

shatter, the crumble, gold packaging is -- all of these are very high concentrations of milligrams of THC and terpene. Patients are going to get a macro dose, a very large dose of THC all at once. It can be very cost-effective. The average milligrams of THC that a patient would get from a pen, it will be between 3 to 5, or 2 to 4 milligrams per inhalation. If you think about a concentrate, you will typically get about 25 milligrams from one inhalation. If you are a patient, with PTS, or any other condition, and you find that you are hitting the pen over and over and over again. That will not be concentrate cost-effective.

>> Marc Matoza: When you first start in cannabis, you do not typically start with the concentrates. You are the one who really introduced me to it. In my particular case, because of the pain, I needed to pay more attention to THC. I have a high tolerance of THC. So, I'm able to do things. But to be able to do things, especially in the evenings, when I am able to get some sleep, makes a big difference. Being able to sleep through the night makes my life better. The concentrates, quite a bit on that. Also, you have some encapsulated tinctures as well?

>> Zack Swann: This is actually really exciting. As I referred to before. Cannabinoids are fat-soluble compounds. It is not great when it comes to bioavailability. That is the absorption of the active ingredient into your body. CBD in particular has a very low bioavailability when it is ingested. They say probably you only get about 10 percent into your body for what you ingest. That was one of the first problems that we set out to solve as a company. What came out of that is that I used to always have to say patent pending, but we actually just got nine patents back from the U.S. trade office. We are really excited about that. Now we have nine patents on this technology in various forms. What we were able to do was come up with a way to encapsulate the fat-soluble cannabinoids and make them water soluble. It offers numerous benefits. Increases bioavailability. It has better absorption into the bloodstream because it does not have to go to the stomach. It also makes them water-soluble. Tinctures are traditionally oil-based, and the cannabinoids themselves are fat-soluble. If you put a traditional tincture into a glass of water it will separate. Like oil and vinegar. It will be a nice mess on top. With our

encapsulated technology, they are exceptionally water-soluble. If you drop a full dropper of our tincture into the water, it will mix in completely.

>> Some people mix it into coffee.

>> It will disperse into the liquid. The other big advantage of encapsulation technology is the onset time. Traditionally when you ingest cannabis, it is going to have to be fully digested by your stomach. Some people say that it could take 30 minutes, or maybe even up to two hours. With an encapsulated product, we typically see onset times between 15 minutes and 30 minutes. I take RSO every single day. It is the best product I have found as a nighttime sleep aid. I was traditionally taking the RSO syringe. Even on a full stomach, the onset time was 90 minutes to two hours. It was tough for me because I had to plan to take it ahead of time if I wanted to go to sleep at a good time. We now offer the RSO in the capsule that is fully encapsulated. Those I feel within 30 minutes every single time like clockwork. It is consistent and effective.

>> Joshua: When you talk about ingesting things like that, Elaine says how do you ingest crumble and shatter? Emilio says that he recently read an article about how cannabis can help prevent viruses, is that true?

>> Zack Swann: Good questions. Do not ingest crumble or shatter. I would not recommend it. It is primarily meant to be inhaled. Those are called THCA, those are the non-psychoactive version of THC Delta nine which is the compound you want to get into your body. That is what exists in the floor plan until it is combusted. It converts from THCA to THC. Shatter and crumble are the same way, using a concentrate pen will convert it from THCA to THC.

>> Marc Matoza: This is one of your favorite pens here. This is one of the pens for shatter and crumble that you would use right here. The way that it works, is that the top comes off, and you put it right in here. This one is called the dipper. This is one of the better ones I've seen on the market. This is my go-to, here. This particular one. It was very similarly to a vape pen. You can control the level of the heat. It works very

easily. I can unscrew the top, I drop it in some alcohol, and it cleans it up. I'm not sure the manufacturer suggests that, but I have had it for a couple of years and it works great.

>> What the manufacturer suggests is isopropyl alcohol. If you have not touched shatter or crumble, it is very sticky. It is like honey. Emilio asked if this helps prevent viruses. If you are referring specifically to Covid, there have been some studies that indicate that cannabis has antiviral properties. It has antibacterial properties. How this specifically relates to Covid - we do not have a vaccine yet. If there are people out there claiming that cannabis can help prevent Covid or reduce it, to me that is unethical and bad science. You do not know enough. I would not want people back producing CBD and taking her facemasks off and thinking CBD would protect them. It definitely has some antiviral properties, but specific to the coronavirus type, we do not know. Unfortunately, we will not know for probably another 10 years.

>> Marc Matoza: There are a lot of studies going on. We are all frustrated by the coronavirus. There is no magic to the fact that we as a country have mishandled it. Being locked inside and quarantine causes a lot of anxiety and stress. People use our products to manage those situations. There is no silver bullet, and there is no magic wand. There is no fairy dust. Right now, we do not know what will be the anecdote. I do know one thing, and I feel strongly about this. When you go back and look at countries like Canada, or you look at countries like Italy, or countries like New Zealand, they basically beat the coronavirus. They are opening up their schools and economy. They do not have an antidote. They had people who paid attention to wearing masks, social distancing, containing. They follow the guidelines. When they follow the guidelines, it works. You can see the countries opening up and doing well. Canada is a good example. New Zealand is a good example. They're not as big as the United States. But when we have states that do not follow the rules, and I'm speaking to Florida. Self-discipline is going to be the key to this. I am like everyone else, I am frustrated. I'm an ex-golfer, and being an athlete, self-discipline is something you have to learn. It is on something I think is important but this is what you got your patents on. *

>> This is a great visual that helps explain how the encapsulated technology works. On the right, you see the non-water-soluble, or fat-soluble cannabinoids. As you can see, they will make it past the skin surface that is very fat-soluble. On the left, with the end caps technology, it is completely encapsulated it will go right past the skin into the bloodstream. The first of these a transdermal product, suppresses them and this is how fast it works. With our evolve, transdermal gel, you can start feeling the effects in as little as three or five minutes depending on the patient. It will feel very similar to using a pen. I remember the first time I used the product for a migraine and I was shocked when it was stopped in its tracks.

>> Marc Matoza: You have a good set of products. Strain prints?

>> I am as frustrated as every other person -- so at the same time, we are using anecdotal data for patients touting the benefits of cannabis. But as someone responsible for providing information, it was personal. Frustrating for me was what do I give my Crohn's patients, PTS patients etc. My response was that every patient is different, start them slow and see what happens. We give everyone a starting point, and instead of giving everyone a 1:1. Strain print is kind of our attempt to bridge the gap. It is a data science company based out of Canada. They do amazing work. It has a mobile app that I encourage all patients to download. It allows you to create a profile. It will capture your conditions, age, sex. You can go in there and log your medications. It is really important, because it is not like taking Advil. It is really important that you track, particularly as a new patient, what is working, so that you can dial in your regimen. The other benefits of strain print, is two things. First there is a community aspect. If you have a patient who has PTS, you can see what other patients who have PTS are using successfully. Every patient is different so don't take that as gospel. But that can give you a better starting point, and you can see what negative or positive side effects they were seeing from a specific product. The other benefit, is that we have access to the data. Our R&D team is constantly looking at what comes in from strain print so we can fit the products better for patients based on the feedback

on the app. I believe we are up to just under 2000 patients, and we are at 8500 patients sessions recorded. We are aggregating a huge data set. For what is working, what is not working. I'm excited about it.

>> It is free right?

>> Yes, it is free. You can download it from the Google play store or Apple Store. Use the Muv activation code, and that is how we get access to the data. And we could better develop products that work for you.

>> And your patient care team. That is important.

>> Education is something that we are passionate about. As Marc said, it is overwhelming. Me, as a millennial, the first time I went to a dispensary, I was overwhelmed. My eyes did not know where to look. I was overloaded. We recognize that it can be intimidating. And a daunting experience. At the store level, we will provide information, and walk you through and answer questions. We have an amazing patient care team available. We have two dedicated phone reps and chat reps. Our average wait time is 25 seconds. There is always someone to talk to you about any questions you have.

>> Being able to talk to a professional is important. People ask me why I work with --? Yes, they have 25 dispensaries throughout the state. They also have an online call center. You can get your card, and bring your doctor on to the call center. Using the call center, you can get the dispensary, the call, Doctor and yourself. That is important, getting the dosing right is the magic. Of course, you have a frequent flyer program.

>> We do offer rewards program. We recognize that cannabis is all out-of-pocket expenses. It is not covered by insurance. The positive spin output on that is that there is no sales tax. The state does not collect tax on cannabis. You do not have to pay tax. We encourage every patient to download a rewards program -- we do run discounts and promotions on an ongoing basis. We want to make sure that the product is affordable and attainable for patients. We offer 20 percent off for all

veterans. We offer 25 percent pediatric discount. The 10 percent senior discount starts at 55. We do offer senior spotlights from time to time with an extra 10 percent off for seniors. We do everything we can to make the medication affordable.

>> And you have a program where you can sign up for text messages? I look forward to getting this. Listen, you must mention some of the senior specials. These will be included in the notes. You mentioned the senior spotlights. I am a senior so I am getting your program.

>> We have another one coming up this Sunday. Don't tell too many people. The senior spotlights coming up this Sunday. Every senior 55 and over will get a 20 percent discount.

>> Express orders and pickups.

>> Once you have dialed in your regimen, we encourage patients to take advantage of an express order. Place your order online, and you do not have to wait in line, we have a designated express window. You do not have to stay indoors any longer than you need to. We will get you in and out as quickly as you can. You can order everything online. Over 50 percent of our orders come through online. I think the patients are adapting to the new time we are living in. You can order over the phone; you do not have to order online. We also offer phone orders as well.

>> We have covered a lot of subjects. I'm going to conclude this webinar. I think we have answered every question out there. Josh, thank you. We talk about this as something that can help you. Pay attention to your body. Pay attention to self-discipline. Your basic care, watch your diet. Some of the fats that are there are important, but taking care of your body is important, especially during this time. Zach, Joshua, any parting thoughts?

>> I think that is it, thank you so much. It was a pleasure. And thank you for everyone who tuned in just to learn a little bit more. If nothing else, talk to your people, talk to the VA, talk to your physician, talk to your friends. If you're having an issue, please talk.

>> Ask questions, speak up. We are here for you. There is a huge veteran's organization out there that has gone through what you have. Everyone is here to support you,

and everyone at Muv dispensary is here to do the same.

>> You have seen a lot of patients at Muv dispensaries.

>> We have seen probably 100,000 individuals; I am pulling a number out of the air. We have seen a lot of people.

>> Don't try to go at it alone. This is a lifestyle medical condition. Be humble. Ask for help. I was an athlete, and I played competitive sports. Sometimes you have to be able to listen to your coaches, and that was the key to success in making or not making it. Zack, Joshua, I want to thank you for your contributions. To all those who tuned into the webinar, thank you very much. We appreciate it. You will get the YouTube video, the reference material, and you will be hearing from Zack as well. Thank you, and everyone have a great evening.

>> Thank you. Thank you all so much.