

# MARIJUANA

## Medical and Recreational

### FACT SHEET

Produced by the American Academy of Medical Ethics

## THE BASICS

### What is marijuana?

Marijuana is a plant. Known as Cannabis, it is an annual herbaceous flowering plant indigenous to Eastern Asia. It has been bred for industry use (hemp) and medicinal purposes (both hemp and marijuana).<sup>1</sup>

### What is the difference between medical and recreational marijuana?

The term “medical marijuana” refers to using the whole, unprocessed marijuana plant or its basic extracts to treat symptoms of illness and other conditions. The U.S. Food and Drug Administration (FDA) has not recognized or approved the marijuana plant as medicine. However, scientific study of the chemicals in marijuana, called cannabinoids, has led to three FDA-approved medications (Nabilone, Dronabinol and Cannabidiol). Continued research may lead to more medications.

The term “recreational marijuana” refers to any form of marijuana used for recreational, non-medical reasons for the sole purpose of getting high. More than 15 states and the District of Columbia have fully legalized recreational marijuana, despite the fact that it is a Schedule I (illegal) drug by federal standards.

### What chemicals are in marijuana?

Tetrahydrocannabinol (THC) is the chemical responsible for most of marijuana’s psychological effects. It is the most psychoactive cannabinoid and the one primarily responsible for the euphoria or high.<sup>1</sup>

Whether smoked, inhaled or vaped, THC is rapidly absorbed through the aveoli of the lungs and into the bloodstream, typically reaching peak blood concentrations within three to 10 minutes.<sup>1</sup>

Once in the brain, THC attaches to cannabinoid receptors associated with thinking, decision-making, memory, pleasure, coordination, appetite and time perception. Higher doses of THC result in longer and greater mental effects than lower doses of THC.<sup>1</sup> The prolonged effect, particularly on motor skills (after perceived high has ended and user feels back to normal) likely contributes to marijuana being the second-most common psychoactive substance found in fatal car accidents. In contrast to THC, CBD (or cannabidiol) is not psychoactive/not hallucinogenic and has a mild anti-anxiety effect.

### What are the harms of recreational marijuana usage?

Legalized recreational marijuana has adverse effects on our health, particularly for those under the age of 25, as well as dangerous effects in the states and communities where recreational marijuana has been legalized, capitalized and commercialized for selfish gain. Here are some of those adverse effects:<sup>1</sup>

- Increased motor vehicle accidents
- Increased traffic fatalities
- Chronic bronchitis
- Schizophrenia
- Psychosis
- Depression
- Heart attacks
- Low-birth rate babies
- Hindered brain development in teens
- Suicides
- Depression

A report in the *Journal of the American Medical Association* estimates there have been 75 excess traffic fatalities per year in Colorado since marijuana was legalized in 2014.<sup>2</sup>

Opioid use has doubled among teens and adults using marijuana (this group is more likely to use cocaine and heroin). Moderate use of marijuana is rare and is dangerous because people assume they can limit their use, but usually this is not so. Anyone using marijuana daily is addicted. One out of six people who use marijuana are addicted. Also, in states where medical marijuana is legal, it has proven to be a stepping stone to approving recreational marijuana. The number of marijuana users in a state decreases where marijuana is classified as illegal.<sup>1</sup>

# OPINIONS & FACTS

## Popular Public Opinions and Myths<sup>1</sup>

- Public opinion says marijuana is a natural, safe and harmless herb/"beneficial."
- There is a serious knowledge gap between popular belief and scientific reality.
- Celebrity endorsements push the public's desire to legalize recreational marijuana.

## Facts on Medical Marijuana<sup>1</sup>

Although three FDA-approved marijuana derived medications (Nabilone, Dronabinol and Cannabidiol) are available, there is insufficient data and evidence on the potential drug interactions between cannabis compounds and prescription and non-prescription medications. Researchers, scientific organizations and representatives of the federal government claim there is not enough evidence to support the use of marijuana as a beneficial drug. They have called for more research. Current research only provides a limited snapshot for cannabis' effectiveness to treat chronic pain in adults, nausea and vomiting in chemotherapy patients, social anxiety disorders and other issues. Some of the short-term and long-term effects of marijuana use are still being uncovered. There are better alternatives for every symptom or disease. Medical conditions are best treated with FDA-approved medications.<sup>1</sup> Given this:

- Caution should be used when even limited evidence suggests a possibility of harm.
- It should not be discussed with or prescribed to patients without clear evidence-based guidelines supporting its use.
- Medications are tested for safety and efficacy. They are closely regulated from production to distribution and accurately dosed down to the milligram. Medical marijuana is none of these things.
- Smoking any product is never healthy and should not be considered "medicine."
- Most medical conditions are best treated with FDA-approved medications devoid of addictive qualities and significant complications.

## Additional Resources

1. Visit [ethicalhealthcare.org](http://ethicalhealthcare.org) for the latest news and statistics about marijuana, plus links to additional reports, publications and more.
2. For an in-depth look at the myths surrounding marijuana, check out *Marijuana: An Honest Look at the World's Most Misunderstood Weed* by James Avery, MD.
3. Learn more by reading "The Legalization of Marijuana in Colorado" from the MADD Report: The Impact available at [www.madd.org](http://www.madd.org).

## Today's Marijuana: Higher Than Your 1960s High

Today's new marijuana (revenue driven) is being created with higher THC levels by boutique farmers/growers and becoming more dangerous. This creates a more intense, rapid high. This is not the marijuana of the 1960s. Today's THC levels are 10 to 20 times higher than the 1960s.<sup>1</sup> Stock in boutique farmers/growers has increased by more than 60 percent, pushing the drive to make marijuana legal and accessible. Support for legalizing marijuana continues to rise in the U.S.

## RECOMMENDATIONS

Because of the health hazards and social ramifications of recreational marijuana use, we do not support its legalization.<sup>1</sup> Physicians should only recommend FDA-approved medications when the indications are clear, dosing is well-established, risk benefit ratios have been investigated and can be applied to individual patients, delivery systems are safe and careful monitoring is agreed upon. State legalization of "medical marijuana" has not been accompanied by the scientific approval process with regulations that have made FDA-approved medications safe and effective. There are risks of significant short-term and long-term complications associated with marijuana use. Most medical conditions are best treated with FDA-approved medications that are devoid of addictive qualities and significant complications. Be wary of claims made about marijuana "benefits." Smoking any product is never healthy and should not be considered "medicine." For a full list of recommendations, please visit [ethicalhealthcare.org](http://ethicalhealthcare.org).

<sup>1</sup> Avery, J. A. (2020). *Marijuana: An Honest Look at the World's Most Misunderstood Weed*.

2 Santaella-Tenorio, J., Wheeler-Martin, K., DiMaggio, C. J., Castillo-Carniglia, A., Keyes, K. M., Hasin, D., & Cerdá, M. (2020). Association of Recreational Cannabis Laws in Colorado and Washington State With Changes in Traffic Fatalities, 2005–2017. *JAMA Internal Medicine*, 180(8), 1061. doi:10.1001/jamainternmed.2020.1757



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