FAMILY COUNCIL

POLICY BRIEF

Medical Marijuana

Marijuana is a Schedule I Controlled Substance

Marijuana is on the list of Schedule I controlled substances. Congress created this list in the 1970s to regulate the use and abuse of drugs in America. Schedule I substances are substances that carry a high risk of abuse, have little or no known medical value, and are illegal to possess, use or distribute.

Schedule I substances are regulated by the federal Drug Enforcement Administration, not the Food and Drug Administration. They cannot be used in clinical testing, except under very strict guidelines and supervision from the DEA. Congress and the DEA are the only government entities that can change the laws governing the use of marijuana.

Problems with Marijuana as a Medicine

The fact that marijuana is a Schedule I controlled substance means that the FDA cannot oversee the use of marijuana as a medicine. As a result, there are no FDA guidelines governing the distribution, dosing, and use of marijuana the way there are for other pharmaceuticals. This has caused the FDA to express concerns over "medical marijuana". Three of those concerns are:

- Lack of research: As a Schedule I substance, marijuana has not been thoroughly researched to
 determine its exact health benefits and side-effects. In other words, using medical marijuana right
 now would be like using a medicine that has not been thoroughly tested and approved by the medical
 community.
- Consistency: Because marijuana is a plant, its quality and potency can vary from crop-to-crop. This means that 1 gram of marijuana purchased from one grower may not contain the same level of active ingredients as 1 gram purchased from another grower. This varies the drug's effectiveness in treating illness and the degree to which users experience side-effects.
- Smoking: Smoking marijuana poses health risks similar to smoking tobacco. There is little documentation on the risks of lung cancer associated with smoking marijuana, but marijuana's classification as a Schedule I substance makes it difficult for such studies to be conducted. Even though there are other ways to administer marijuana, smoking is likely to remain a popular method among medical marijuana users.

The FDA has also expressed concerns about the shelf life of marijuana.

Legal Problems with Medical Marijuana

State law cannot trump federal law. States that legalize marijuana for medicinal use cannot change the fact that marijuana is an illegal substance under federal law. Only Congress or the DEA can change that.

As a result, a person could comply perfectly with a state law legalizing medical marijuana, but still go to prison under the federal laws that govern it.

A More Appropriate Solution

If the medical community is serious about determining the health benefits of marijuana, they should lobby Congress and the DEA to reschedule marijuana so that clinical tests may be conducted. This is the current opinion of the American Medical Association.

Cannabinoids are the active chemicals found in marijuana. If testing reveals that those cannabinoids can be used to treat illness, the medical community might develop a method to extract the cannabinoids and deliver them in safe, effective doses under the supervision of the FDA.

Theoretically, the marijuana plant could be treated the same way as the opium plant: As a Schedule II substance that carries a high risk of abuse, but has some medical uses. That decision, ultimately, lies with the medical community and Congress.

Quick Facts

- 1. **Lung Cancer:** Research shows marijuana smoke carries 50%-70% more tar and carcinogens than tobacco smoke.¹
- 2. **Mental Incapacitation:** Marijuana's affects on memory and cognitive functions can last for days after the initial effects have worn off². As a result, a person who uses marijuana on a regular basis may chronically operate at a less than ideal mental level³.
- 3. **Depression:** A 2007 study indicated that it is difficult to properly prescribe marijuana and cannabinoids when treating depression, and that improper doses can increase depression rather than decrease it⁴.
- 4. **Mental Illness:** A 2005 federal report revealed that children who use marijuana before age 12 were twice as likely to develop serious mental illness as those who did not try the drug until they were 18⁵.
- 5. **Short-Term Health Effects:** Short-term health effects of marijuana use have been shown to include increased heart rate, breathing rate, and blood pressure; slowed reaction time; distorted sense of time; short-term memory loss; paranoia; anxiety; and depression⁶.
- 6. **Withdrawal:** Users who become dependent on marijuana may experience a number of negative side effects if they choose to quit using it, including depression, anxiety, aggression, and decreased appetite⁷.
- 7. **Abuse of Prescription Drugs:** Research indicates growing trends in the use and abuse of prescription drugs over illicit drugs⁸. Given marijuana's popularity as a recreational drug, there is reason to assume it could be much more commonly abused than other prescription drugs if it becomes legally available.
- 8. **Synthetic Cannabinoids:** Currently, synthetic forms of THC—the primary cannabinoid found in marijuana—are available by prescription⁹. Those who support the legalization of marijuana for medical use argue THC is not the only beneficial cannabinoid found in marijuana. That argument might be verified or refuted through medical research if marijuana were rescheduled by Congress or the DEA.

http://drugabuse.gov/infofacts/marijuana.html

² Pope HG, Gruber AJ, Hudson JI, Huestis MA, Yurgelun-Todd D. Neuropsychological performance in long-term cannabis users. Arch Gen Psychiatry 58(10):909–915, 2001.

http://drugabuse.gov/infofacts/marijuana.html

http://www.webmd.com/depression/news/20071025/pot-and-depression-mixed-findings

http://www.webmd.com/mental-health/news/20050503/federal-report-marijuana-causes-mental-illness

http://www.webmd.com/mental-health/marijuana-use-and-its-effects

http://www.webmd.com/mental-health/marijuana-use-and-its-effects

⁸ http://www.casacolumbia.org/templates/PressReleases.aspx?articleid=487&zoneid=65

http://www.fda.gov/ohrms/dockets/dockets/05n0479/05N-0479-emc0004-04.pdf

Think about This: Reflections on Marijuana

It is no secret that many opponents of Medical Marijuana view this as a way to legalize marijuana for recreational use. Have you ever stopped to think about how that could impact your family and where you live? Think about this...

Proponents of Medical Marijuana have admitted that their efforts are failing in regards to using marijuana solely for medicine. In fact some are blatantly honest that the reason they want to see medical marijuana passed is so that it can be legalized recreationally:

Dispensaries Operate as Dope Store Fronts

Reverend Scott T. Imler, the co-author of Proposition 215 which legalized medical marijuana in California stated "We created Prop. 215 so patients would not have to deal with black market profiteers. But today it is all about the money. Most of the dispensaries operating in California are a little more than dope dealers with store fronts." pg 11

Cardholders Never Receive Marijuana from Designated Growers

According to Lt. Michael Dingeman, Director of the Oregon State Police Drug Enforcement Section The "growers are simply using the cardholders for cover, and selling their crops on the black market. In fact, some county sheriffs estimate that as much as one half of the illegal street marijuana they're seeing is being grown under the protection of the state's medical marijuana program." pg 13

Glaucoma and Getting High

Ed Rosenthal, senior editor of High Times, a pro-drug magazine, once revealed the legalization strategy behind the "medical" marijuana movement. While addressing an effort to seek public sympathy for glaucoma patients, he said, "I have to tell you that I also use marijuana medically. I have a latent glaucoma which has never been diagnosed. The reason why it's never been diagnosed is because I've been treating it." He continued, "I have to be honest, there is another reason why I do use marijuana . . . and that is because I like to get high. Marijuana is fun." pg's 6-7

Stalking Horse for Drug Legalization

In 2000, The New York Times interviewed Ethan Nadelmann, Director of the Lindesmith Center. Responding to criticism that the medical marijuana issue is a stalking horse for drug legalization, Mr. Nadelmann stated: "Will it help lead toward marijuana legalization? . . . I hope so." pg 7

Would the passage of Medical Marijuana effect organized crime in a negative or positive way? It is tempting to think that if we make marijuana legal, whether medical or recreational, it would cut down on crime. There is evidence that proves otherwise:

Tax Evasion and Money Laundering

"There is a clear indication that many dispensaries are intentionally evading their taxes, distributing illegal products and may be laundering illegally acquired money," Jerome E.Horton, California State Board of Equalization Vice Chairperson. pg 12

Marijuana Drug Trade is Not Mellow

Sergeant Erik Fisher of the Drug Enforcement Section of the Oregon State Police says that the perception of the marijuana drug trade is mellower than other drug operations is wrong. He notes that almost all the distributors and growers carry firearms. "The other striking trend has been the increase in home invasion robberies of medical marijuana folks, and how absolutely violent they can be. We have more home invasions going on with medical marijuana people than any other drug dealer I can think of." pg 13

Criminal Elements Persist

Rolling Stone magazine reported on abuses associated with Proposition 215. "... business is good for ...compassionate caregivers, freedom fighters, botanists in love with the art of growing, Long Beach homeys, Valley Boys, Oakland thugs, and even one savvy gal who wants her girlfriends to sell medical marijuana while wearing pasties. But as in any drug business, a criminal element persists—storage lockers of product, safes of cash, hustlers trying to rob those lockers and safes, guns to protect one from the hustlers, and the constant risk of arrest." pg's 17-18

Marijuana Contributes to Aggressive Behavior

Marijuana is known to contribute to delinquent and aggressive behavior. A June 2007 report released by the White House Office of National Drug Control Policy (ONDCP) reveals that teenagers who use drugs are more likely to engage in violent and delinquent behavior. Moreover, early use of marijuana, the most commonly used drug among teens, is a warning sign for later criminal behavior. Specifically, research shows that the instances of physically attacking people, stealing property, and destroying property increase in direct proportion to the frequency with which teens smoke marijuana. pg 34

Speaking of youth, there is no way to keep illegal substances completely out of the hands of today's youth. However, by allowing medical marijuana, and possibly legalization of recreational use, teens would have much easier access to the drug which could have damaging effects physically and socially:

Teenagers Choose Pot Over Family and Friends

According to Dr. Thurstone Medical Direct of an Adolescent Substance Abuse Treatment Program "About 95 percent of the hundreds of young people referred to my clinic each year have problems with marijuana. I see teenagers who choose pot over family, school, friends and health every day. When they're high, these young people make poor choices that lead to unplanned pregnancies, sexually transmitted diseases, school dropouts and car accidents that harm people. When teenagers are withdrawing from marijuana, they can be aggressive and get into fights or instigate conflicts that lead to more trouble." pg 14

Coping vs. Covering Up Stress

Mikie Messman, Chemical Awareness/Responsive Education Coordinator for the school district testified that the students told her that marijuana relieves their stress. Instead of learning how to cope with stress, they are covering it up. "These kids are using it as medication so they don't have to deal with adolescence," Messman said. pg 18

Increase Use of Marijuana by Students

In Great Falls, Montana, school counselors are seeing an increase in the use of marijuana by students. According to Earlene Ostberg, a school Chemical Awareness/Responsive Education Counselor, most of the students that are failing are smoking pot. "When I ask 'why,' a lot of kids are real defensive. They say "Mrs. Ostberg, it's medicinal. I could get a green (medical marijuana) card." pg 17

Conclusion

Despite popular belief, marijuana is dangerous. It has the potential to affect every area of a person's life, and leads to a society that is constantly looking over its shoulder to make sure their quality of life isn't being ruined. Marijuana damages the lives of youth and adults every day. Marijuana use can tear apart families and pose a threat to thriving cities. You can prevent this from happening, all you need to do...is Think.