



## **The Many Problems and Consequences of Marijuana Use: Marijuana Use is a Serious Threat to Public Health**

In recent decades there have been many challenges to the longstanding bipartisan, restrictive drug policies in the United States, most of which focus on marijuana. In 1996, California became the first US state to legalize marijuana for “medical” uses through a state ballot initiative. Fifteen states and the District of Columbia followed California’s lead, passing “medical marijuana” initiatives. “Medical marijuana” has proven to be the stepping stone to efforts to legalize marijuana for personal use.

Supporters of “medical marijuana” and legalization ignore the serious damages that marijuana use causes each year to Americans of all ages and the fact that both measures will increase rates of marijuana use. The assumption in these pro-marijuana efforts is that prohibition causes serious problems and that marijuana use is benign. The fact is that marijuana use is a serious threat to public health, and in particular, to the health of young people.

### **“Medical Marijuana” and Marijuana Legalization Efforts Send the Wrong Messages to Youth: They Support the View that Marijuana is Not Only Safe, But That It Is a “Medicine”**

- Marijuana is a primary cause of substance abuse and dependence. Of Americans aged 12 and older suffering from substance abuse or substance dependence, 60.5% are suffering because of marijuana use -- more than any other drug and nearly as many as all other illegal drugs combined, including heroin, cocaine, methamphetamine and Ecstasy.<sup>1</sup>
- Early marijuana use is especially dangerous. Adults who first started using marijuana use at age 14 or younger are most likely to have abused or been dependent on illicit drugs in the past year.<sup>2</sup> Adults who first used marijuana at or before age 14 were six times more likely to meet the criteria for abuse or dependence than those who initiated marijuana use at age 18 or older (12.6% vs. 2.1%) and two times more likely than those who initiated marijuana use between the ages of 15 and 17 (12.6% vs. 6.6%).
- Currently, 16 states and the District of Columbia have legalized “medical marijuana.” Based on available figures, advocacy of medical marijuana laws in these states has had dramatic effect on increasing youth use. For states with “medical marijuana,” youth use rates tend to remain above the national averages following passage.<sup>3</sup>
- Youth who use marijuana are more likely to have higher rates of other illegal drug use.<sup>4</sup> This is most evident for heavy users. It is even more pronounced for adolescents than for adults.
- Early initiation of marijuana use reduces educational attainment of youth.<sup>5</sup>

- Students who smoke marijuana regularly are more likely to drop out of high school.<sup>6</sup> Students who smoked marijuana within the past year were more than twice as likely to have cut class as students who did not.<sup>7</sup> Health problems associated with using marijuana can keep students from attending school due to illness.
- Heavy marijuana use may damage developing brains in teens and young adults.<sup>8</sup> Research has also shown that the human brain goes through the most growth during the adolescent years. Marijuana can affect proper development of the brain, which could not only cause learning problems in high school, but also in the future.<sup>9</sup>
- Marijuana use is a major cause of highway crashes, injury and death.<sup>10</sup> A study in Maryland found that half of the seriously injured drivers aged 20 and younger tested positive for recent marijuana use.<sup>11</sup> Nearly one quarter (23.2%) of high school seniors reported that they drove or rode with a driver after he or she used marijuana in the past two weeks.<sup>12</sup>

### **Marijuana Use Negatively Impacts Mental Health**

- Prevalence of depression and anxiety increases with higher rates of cannabis use.<sup>13</sup> This pattern has been shown clearest in young women who use cannabis daily. They had more than a fivefold increase in the odds of depression and anxiety compared to non-users. In addition, young people who use marijuana weekly have double the risk of depression later in life.
- Teens who smoke marijuana at least once a month are three times more likely to have suicidal thoughts than are non-users.<sup>14</sup>
- Using marijuana may increase the chance of psychosis.<sup>15</sup> Even infrequent marijuana use could raise the small but real risk of this mental illness by 40%. In an analysis of 35 studies of marijuana users, the risk for psychosis for heavy marijuana users (daily or weekly) was 50% to 200% higher than for nonusers.
- Heavy marijuana users are more likely to be diagnosed with schizophrenia later in life.<sup>16</sup>

### **Marijuana is Addictive**

- In 2009, 1.1 million youth aged 12 to 17 needed treatment for an illicit drug problem; of this, only 115,000 (10.5%) received treatment at a specialty facility.<sup>17</sup> This is roughly equal to the 1.2 million youth aged 12 to 17 who needed treatment for an alcohol use problem in 2009.
- More teens are in treatment with a primary diagnosis of marijuana dependence than all other illicit drugs combined.<sup>18</sup>
- Frequent marijuana use results in high risk of dependence. Rates of cannabis dependence are estimated at 20% to 30% among those who have used at least five times, and even higher estimates (35%-40%) are reported among those who report near daily use.<sup>19</sup>
- The marijuana sold today is far more powerful than the marijuana used 30 years ago. From 1992 to 2006, there was a 175% jump in the potency of marijuana that was seized.<sup>20</sup>

- Heavy use of marijuana creates physical dependence, including tolerance and withdrawal.<sup>21</sup>
- Signs of marijuana withdrawal include anxiety, depressed mood, decreased appetite, irritability, restlessness, difficulty sleeping, stomach pain, aggression and anger. Withdrawal symptoms due to marijuana use run similar courses to withdrawal symptoms due to other drugs in terms of magnitude and duration.<sup>22</sup>

### **Smoked Marijuana is NOT “Medicine”**

- Smoking marijuana causes changes in the brain that are similar to those caused by long-term use of cocaine and heroin.<sup>23</sup>
- Smoking is not a safe or sensible way to deliver a drug. There is no way to control dose. No medicine used anywhere in the world is prescribed by smoking because smoke is harmful to lungs.
- Marijuana is more harmful to lungs than tobacco.<sup>24</sup> Smoking one joint is as harmful to lungs as having up to 5 cigarettes in succession.<sup>25</sup> Marijuana smoke has ammonia levels that are 20 times higher than tobacco smoke. Marijuana contains hydrogen cyanide, nitric oxide and aromatic amines at 3-5 times higher than tobacco smoke.
- Marijuana smokers face faster deterioration of lungs – 20 years ahead of tobacco smokers.<sup>26</sup>
- The FDA does not approve of smoked marijuana as medicine.<sup>27</sup> Delta-9-tetrahydrocannabinol (THC) is approved by the FDA only in a synthetic, tested form called dronabinol (“Marinol”) which is used to treat nausea in cancer and AIDS patients. It is not smoked crude marijuana. This medicine, approved by the FDA 20 years ago, can be prescribed by any licensed physician.
- Some marijuana is laced with cocaine, PCP and dangerous chemicals including formaldehyde.<sup>28</sup>

**Provided by the Institute for Behavior and Health, Inc.: [www.ibhinc.org](http://www.ibhinc.org).**

**More information on the negative effects of marijuana can be found at the following websites:**

The Anti-Drug.Com: [www.theantidrug.com](http://www.theantidrug.com)

Drug Enforcement Administration: [www.justice.gov/dea](http://www.justice.gov/dea)

National Institute on Drug Abuse: [www.nida.nih.gov](http://www.nida.nih.gov)

The White House Office of National Drug Control Policy: [www.whitehousedrugpolicy.gov](http://www.whitehousedrugpolicy.gov)

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