



Frequently Asked Questions: Cannabis

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OBJECTIVE: To provide a balanced perspective to the public cannabis discourse.

1. **If someone smoked cannabis when they were younger and turned out fine, how could it be harmful today?** Today's cannabis is *not* the 'Woodstock Weed' baby boomers may remember. In the 1960-1970's, the level of THC averaged only around 1% (SAM, 2013). However, the potency of THC levels today average 20%, with concentrates/extracts, (used commonly in vape pens, edibles, or dabbing), as potent as 90% (Marijuana Fact Check, 2018). These dangerously high levels have significantly increased emergency room visits and vehicular incidents (NIDA, 2018).
2. **How does cannabis affect academic and professional performance?** For those that started using in adolescence, users "lost [a total] average of 8 IQ points between ages 13 and 38" (NIDA, 2018). According to NIDA, frequent heavy users (compared to nonusers) reported lower life satisfaction, poorer mental and physical health, and more relationship issues. They also reported less academic and career success; including higher rates of school dropouts, job absences, accidents, and injuries. Any drug use can lead to addiction, marijuana included.
3. **Are cannabis edibles safe since they are not smoked/inhaled?** Unregulated and high levels of THC in edibles increase the chance of harmful and unexpected side-effects. Accidental exposure to cannabis has significantly increased alongside the edible drug trend. Many edibles may look as innocent as a dessert or candy, which can be mistakenly consumed by the unexpected houseguest, child, or even pet (Noel, 2015). Also, edibles take longer to digest, which delays the onset of effects. As a result, people may consume more of the product, assuming they will feel the effects faster (NIDA, 2018). However, this can lead to dangerous consequences; such as unintentional overdose or other extreme side-effects.
4. **Will legalizing cannabis address social injustice and decrease juvenile arrests?**
 - a. **Dispensaries target minority areas:** In places where cannabis has been legalized, or in planning stages to legalize, affluent communities have been implementing ordinances to ban sales or manufacturing of the drug. As a result, cannabis dispensaries have disproportionately targeted less affluent minority areas.
 - b. **People of color continue to be arrested at higher rates:** Juvenile arrests increased in Blacks (+58%) and Hispanics (+29%), yet subsequently decreased in Whites (-8%) (CODPS, 2016).
5. **Will legalizing cannabis reduce crime rates?** Legal cannabis dispensaries have been linked to **increased** property crime, violence, and burglaries (Ohio State University, 2017). Though some dispensaries are thought to be protected by armed guards and cameras, it's the surrounding areas that suffer the most. Experts warn that residents and customers alike are at higher risk of becoming victim of a crime.
6. **Is cannabis addictive?** Like any drug, there is risk of developing tolerance and dependence. Roughly 30% of users may develop some form of problem use, which can progress into serious consequences. Those that started using before age 18 have been found to be 4 to 7 times more likely to develop problem use behaviors (NIDA, 2016). Some might experience **symptoms of cannabis withdrawal**; including headache, shakiness, sweating, stomach pains, nausea, restlessness, irritability, sleep difficulties and decreased appetite (DEA, n.d.).

7. **Is it possible to overdose from cannabis?** Cannabis may not produce direct fatal overdoses but unwanted side-effects are increasingly recorded by Emergency Departments and Poison Control (CODPS, 2016). Research has found that legalization has significantly increased emergency room visits, with specific increases of unintentional exposure in children (Wang, Le Lait, & Deakyne, 2016). Most notably, the annual number of cannabis-related hospitalizations in Colorado increased 72% after the legalization of recreational use (RMHIDTA, 2017).
8. **Has anyone died from cannabis?** Cannabis is the most common illegal drug involved in auto fatalities (NIDA, 2016). In 2009, Colorado’s cannabis-related traffic deaths involving drivers testing positive for THC represented 9% of all traffic deaths. By 2016, that number has *more than doubled* to 21% (RMHIDTA, 2017).
9. **If cannabis is natural, isn’t it safer than tobacco?** Cannabis and tobacco are very similar in terms of toxins, irritants, and carcinogens (cancer-causing chemicals) (American Lung Association, 2015). The amount of tar in a joint (cannabis cigarette) is significantly more than that found in a tobacco cigarette. Research has found that 1 joint (cannabis cigarette) is just as harmful to the lungs as smoking 5 tobacco cigarettes (ABC News, 2018). Cannabis use is associated with chronic bronchitis; decreased lung function; chronic obstructive lung disease; and lung cancer (Tashkin, 2013).
10. **If cannabis is natural, isn’t it safe to use while pregnant?** There is high-risk associated with cannabis exposure during pregnancy, largely due to the rapid physical development that occurs in-utero. Any substance use can have life-long effects on offspring. Harms attributed to cannabis exposure include increased miscarriage, 2.3 times greater risk of stillbirth, as well as lower birth weight and premature births. Infants are more likely to display altered responses to stimuli, increased trembling, and a high-pitched cry. These behaviors are comparable to mild infant narcotic withdrawal (Fried, 1989). In addition, cannabis exposed children are at greater risk of developing hyperactivity disorders and show gaps in problem solving and memory (NIDA, 2018).
11. **Is cannabis a ‘gateway’ drug?** Yes, decades of peer-reviewed research has well-substantiated the correlation between cannabis use leading to further experimentation. Research has reflected that cannabis, alcohol, or nicotine use is likely to precede other licit or illicit substances. While not everyone that tried cannabis became addicted to heroin, most heroin users started experimenting with cannabis. *Why does this happen?* Not only do these drugs affect important brain functions (such as the reward center) that enhance an addictive response to other substances, but findings also show the importance of social factors and environmental risks associated with use that can lead to trying “harder” drugs (NIDA, 2018).
12. **Alcohol is legal, what’s the difference between having a drink and smoking a joint?**
 - a. Because of the strict regulations by which alcohol is produced, the effects of consumption can be measured and generally predicted based on variables such as BMI and gender. As a result, a person can use this information to adjust consumption in order to reduce effects. In this case, it is possible to drink (*usually very little*) without getting ‘drunk’. However, the lack of cannabis regulation allows for diverse strains and varying THC potency, making it unpredictable to measure how quickly or intensely a ‘high’ may be experienced. A person smoking a joint (cannabis cigarette) would be less likely to predict onset, intensity, and length of effects.
 - b. More dangerous is the combination of alcohol and marijuana in the body, which is highly correlated to extreme side-effects, and vehicular incidents including deaths (Scharff, 2014).

Abstract

IMPORTANCE: Cannabis (marijuana) is a mind-altering psychoactive drug derived from the Cannabis plant, containing over 400 chemicals including THC (delta-9-tetrahydrocannabinol), which is considered the main psychoactive-inducing compound. Cannabis is currently a federally illegal (Schedule I) drug, and is recreationally illegal in most States. Over the past decade, cannabis has become increasingly accessible for medical purposes, although the U.S. FDA has not approved this drug for medical benefit. Cannabis is considered the most widely abused illicit drug in the United States, and ranked as the second highest use in the world. However, impacts on public health and law enforcement have raised concerns related to newly adopted or considered cannabis policies on State and Local levels.

Keywords: *cannabis, marijuana, pot, THC, legalization, New Jersey*

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