Much ado about marijuana

I was intrigued and appalled by *CMAJ*'s recent editorial on marijuana.[1] A disclaimer in the journal states that "all editorial matter in *CMAJ* represents the opinions of the authors and not necessarily those of the Canadian Medical Association" but no authors were identified for the editorial.

There is no scientific evidence to support the statement that recreational marijuana smoking has minimal negative health effects. Rather, the permissive attitude toward recreational drug use in our society is closely connected with the complex factors that lead to addiction.

It is irresponsible to say that the risk of addiction related to marijuana use is "very weak (and perhaps nonexistent)."[1] Perhaps the authors need a lesson in pharmacology and physiology. Marijuana is an addictive hallucinogen.

There may be merit in the proposal that drug possession, which is symptomatic of addiction, be decriminalized. However, decriminalization and medicalization are not the same thing, let alone decriminalization and legalization. Unfortunately, a *CMAJ* editorial like this one only adds smoke to the debate rather than clearing it. The call on the justice minister to decriminalize the possession of small amounts of marijuana for personal use sounds like a personal plea rather than a policy suggestion.

Raju Hajela
Addictionist
Kingston, Ont.

Reference

1. Marijuana: federal smoke clears, a little [editorial]. *CMAJ* 2001;164(10):1397.

CMAJ has suggested that possession of marijuana should be decriminalized.[1] How incredibly short-sighted. Marijuana use increased by 142% among Dutch children and youths aged 7 to 17 years after Holland instituted a liberal policy.[2] During the time that marijuana use was legal for adults in Alaska but still illegal for young people, the use of marijuana by adolescents was more than twice that seen in the rest of the United States.[3] When several US states decriminalized marijuana in the late 1970s the use of marijuana and other drugs grew at a staggering rate[4] and marijuana-related visits to emergency departments increased.[5]

Harm reduction policies are really harm production policies. Policies should be created that will gain harm prevention and gain harm elimination.

Eric A. Voth
Chairman
The Institute on Global Drug Policy
St. Petersburg, Fla.

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Thirty years after the publication of the LeDain Commission report,[1] editorial opinion at *CMAJ* has arrived at the same opinion: "the real harm [of marijuana] is the legal and social fallout."[2] In 1995 *The Lancet* editorialized that "the smoking of cannabis, even long term, is not harmful to health."[3] Two years later the *New England Journal of Medicine* called for the reclassification of cannabis under American law[4] and George Annas wrote in the same journal that "marijuana is unique among illegal drugs in its political symbolism, its safety, and its wide use."[5]

It is worth remembering that cannabis was prohibited in Canada only because Emily Murphy managed to create a moral panic around the association of cannabis with Blacks and Mexicans. Cannabis prohibition — as in the Opium Act of 1908 — was from the outset a strategy for the political suppression of selected racial groups.[6]

In the 30 years since the LeDain Commission report was released, thousands of young Canadians have been incarcerated. One of the unintended consequences of incarceration is growing into a full-blown public health catastrophe. In the mid 1990s the Correctional Service of Canada instituted urinalysis testing to enforce a zero-tolerance drug policy. The inmates did the logical thing, from their viewpoint; they migrated to the use of drugs that cleared the body in less time than cannabis. The drugs of choice came to be heroin and cocaine. As a result of needle sharing, our federal prisons have become incubation centres for HIV and hepatitis C.[7] Canada's drug control strategy, a decaffeinated version of the American "war on drugs," produces more pathology than it prevents.[8]

Most inmates eventually get out of prison, and thus the potential for a public health disaster can no longer be denied. Recent events at the Kingston Penitentiary suggest that the Correctional Service of Canada may be looking for a face-saving alternative to its unworkable zero-tolerance drug strategy. Here is an opportunity for the bold stride the *CMAJ* editorial says is needed: *CMAJ* ought to call for the vigorous expansion of harm reduction programs across Canada and in particular within our prisons.

Unfortunately, however, the drug war needs marijuana's prohibited status because without it the "drug problem" collapses from a social crisis involving several million Canadians and requiring more police and more prisons, to a situation involving a handful of hardcore addicts whose sickness can be reduced and confined, as the experience of Holland, Switzerland and Germany demonstrates.[9]

Cannabis in its numerous forms is an efficacious treatment for a number

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