

# Doctors Warn

## **“CANNABIS CAN CAUSE OR WORSEN MENTAL ILLNESS IN ADULTS AND TEENS”**

*It is our position, based on the review of the scientific evidence and data from states which have legalized, that the net effect of commercial cannabis sales on Americans' health will be negative. We further note that this additional negative impact would come at a very vulnerable time for the nation, given the already strained resources for health care and substance abuse treatment services. The major costs that will likely be incurred as a consequence of increased cannabis use and increased cannabis use related problems will likely consume a significant portion of any revenue gained by taxation and then some.*

**EVIDENCE:** The risks associated with cannabis use are significantly downplayed by advocates of commercial cannabis, with attempts being made to portray the science as being less conclusive and less settled than it actually is.

**Emergency Department Visits:** A recent study of a large urban hospital in Colorado found that cannabis-related emergency department visits more than tripled from 2012 to 2016 with approximately 25% of these visits being primarily due to psychiatric causes (Monte et al., 2019).

**Psychosis:** Perhaps the strongest evidence for severe mental health problems triggered by cannabis is related to psychosis. Multiple studies link regular cannabis use to an estimated doubling of the risk of a psychotic illness as well a more intractable, worsened course among people with existing psychotic illness. Violent behavior as a result of cannabis-induced paranoia and other psychotic symptoms is also an increasing concern. A 2019 study from Lancet Psychiatry found that their data indicated that “if high-potency cannabis were no longer available, 12.2% of cases of first-episode psychosis could be prevented” across the sites they studied (Di Forti et al., 2019); in some places with heavy cannabis use, up to 50% of cases could have been prevented.

**Brain Development:** There is strong evidence that cannabis use is linked to negative alterations in both brain structure and function. A major study called the Adolescent Brain Cognitive Development study is now underway that is poised to answer these questions more definitively, and the results will be available in several years.

**Suicide:** An emerging concern is the increased association between cannabis and suicide. A 2019 paper reviewing multiple studies found that adolescent cannabis was associated with increased depression in young adulthood and a tripling of the risk of a suicide attempt (Gobbi et al., JAMA Psychiatry 2019).

**Cognitive Problems and IQ:** There is abundant evidence from animal and human studies that cannabis use is associated with reduced functioning in many specific areas of cognition and, with heavier use, intelligence. Cannabis use is not recommended in pregnancy and is associated with low birth weight (Crume et al., 2018) and future cognitive and emotional problems in children (Goldschmidt et al., 2014) Despite these known risks, a recent investigation into regulated cannabis dispensaries in Colorado found that employees, when asked, recommended cannabis for pregnancy associated morning sickness 69% of the time and usually did not recommend speaking to the woman's physician first (Dickson et al., 2018).

**Opioid Crisis:** There is little evidence that cannabis will be helpful in solving the opioid crisis. The bulk of scientific data in both humans and animals indicate the opposite, namely that cannabis use increases the risk of other types of drug use. An important study conducted with rats showed that cannabis exposure prior to pregnancy was associated with increased heroin seeking behavior in the offspring (Szutorisz et al., 2014). In addition, deaths from drug overdose have not decreased with commercialization as promised by the cannabis industry. In the United States, death from overdose increased by 12.5 % from 72,000 (2019) to 81,000 (2020) continuing an upward trend seen since cannabis was first commercialized (Shover et al., 2019).

**Traffic Fatalities:** A recent study published in JAMA Internal Medicine showed an increase in traffic fatalities in the first four states to legalize recreational marijuana compared to states without legal marijuana.

While we recognize that there are many sides to this important debate, we feel that it is extremely important the policy leaders and investors base their opinion and decisions understanding the true health and monetary costs for the American public that accompany commercial sales of cannabis.

Tobacco was misrepresented and promoted to the public as relatively harmless before nicotine addiction became ubiquitous in the United States. The opioid industry marketed its drugs as non-addictive and safe to the American people and to lawmakers in the early 1990s and later. We should not make this mistake again in the United States with the commercialization of another harmful drug, already designer modified with increasing THC concentrations to promote addiction. As perception of harm decreases and access increases to commercialized product, cannabis use and the incidence of use disorder also is rising. The industry targets underprivileged neighborhoods and according to the ACLU “Racial disparities in arrests persist even in states that legalized... marijuana.” In the time of a global COVID pandemic, good public health policy advises against cannabis commercialization, which will increase addiction, health care costs, physical harms and mental illness. This addiction-for-profit industry will cultivate more cannabis dependent consumers, at a steep cost to individual and public health.

We appreciate the opportunity to communicate this information to the public and to policy makers and are open to further dialogue on the topic.



IASIC International Academy on the Science  
and Impact of Cannabis

Purpose statement:

The purpose of IASIC is to counter the pervasive misperception of the safety of marijuana, and to be an international organization providing reliable scientific information for leaders who are in positions to drive policy recommendations. This non-partisan and non-political group is strictly developed, organized, and guided by doctors.

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