

CANNABIS

The United Kingdom today faces a huge drug crisis. It is currently being stated that cannabis is harmless. This folder presents some of the evidence.

1. Cannabis - the dangers

A report by eminent doctors from the Royal College of Physicians and the Royal College of Psychiatrists has warned the public over the dangers of cannabis which, they say, can cause **lung diseases including cancer and bronchitis** and is linked to **psychotic episodes and schizophrenia**. Professor David London one of the team who spent two years investigating the impact of illegal drugs said, **"I don't think anyone should go away with the idea that cannabis is safe. There is evidence that it isn't"**. (*Daily Mail 30.3.00*)

Mariette Hopman, the Clinical Psychologist, has warned of the harmful effects of cannabis and says that smoking it is **"unbelievably dangerous"**. (*Sunday Mail 30.11.97*)

2. Cannabis and cancer

The levels of cancer promoting factors in cannabis are four times greater than for tobacco. (*Wu T-C, Tashkin DP, Djahed B, and Rose JE. N Engl J Med 1998; 318:347*)

Professor John Henry, head of Accident & Emergency at St. Mary's Hospital, London and for 16 years a consultant at Guy's Hospital Poisons Unit states **"In smoked cannabis, the tars that cause lung cancer are far nastier than the ones in cigarettes**. Not only does the cannabis cigarette have no filter, but it is smoked differently. With ordinary cigarettes the smoke is briefly drawn into the lungs, and then puffed out. With cannabis it is drawn into the lungs and held there giving the tars a greater chance to act". (*Reader's Digest September 1998*)

"I believe that there is causal **link between marijuana smoking and the development of cancer**, not only of the lung, but also the upper airways such as the tongue and the voice box". (*Professor Donald Tashkin, University of California - BBC Panorama 24.4.95*)

3. Cannabis and the heart

Researchers at the Beth Israel Deaconess Medical Centre in Boston have found that **in the first hour after taking cannabis, the heart attack risk is 4.8 times higher than during periods of none use**. Dr. Murray Mittleman, the Centre's Director of Cardiovascular Epidemiology said "To my knowledge this is the first study to document that smoking marijuana can trigger a heart attack. It increases the heart rate by about 40 beats per minute. It also causes blood pressure to increase when the person is lying down and abruptly fall when they stand up, often causing dizziness. These effects may pose significant risk, especially in people with unrecognised coronary disease". The findings strengthen official warnings

that millions are regularly 'marinating' their brains in a 'voluntary but uncontrolled mass experiment'. (*Daily Mail 30.3.00*)

4. Cannabis and the lungs

Dr. Martin Johnson of the Department of Respiratory Medicine at Glasgow Royal Infirmary has said in a report published in the specialist journal 'Thorax' that a draw on a marijuana joint produces an intake two-thirds larger than that of a cigarette and a breath-holding four times longer. When this is continued without filter tips, it leads to a **four-fold greater delivery of tar and a five-fold increase in carboxyhaemoglobin**. He said that three or four joints a day gives as many symptoms as 22 tobacco cigarettes. Four patients who admitted regularly smoking marijuana were found to have part of their lung replaced by a large cyst. This diminished the capacity of the lung to take in oxygen causing emphysema. (*Times 21.3.00*)

The British Medical Association states "Smoking a cannabis cigarette leads to 3-times greater tar inhalation than smoking a tobacco cigarette. The levels of tar retained in the respiratory tract are also three times higher. **Chronic cannabis smoking therefore increases the risk of cardiovascular disease, bronchitis, emphysema and probably carcinomas of the lung**". (*Reader's Digest September 1998*)

"Cannabis smoke contains all of the toxic chemicals present in tobacco smoke (apart from nicotine), **with greater concentration of the carcinogenic benzenanthracenes and benzopyrenes**. It has been estimated (BMA) that smoking a cannabis cigarette (containing only herbal cannabis) results in approximately a five-fold greater increase in carboxyhaemoglobin concentration, a threefold greater increase in the amount of tar inhaled, and a retention in the respiratory tract of one third more tar, than smoking a tobacco cigarette. Cannabis resin, the most commonly used form of cannabis in the United Kingdom, is often smoked mixed with tobacco, thus adding the well-documented risks of exposure to tobacco smoke". (*Daily Telegraph 9.10.00 quoting Report of House of Lords Select Committee on Science & Technology, Chapter 4, paragraph 4.17*)

"Studies show that benzpyrine, a known carcinogen is about **ten times more concentrated** in cannabis smoke compared with tobacco smoke", Dr. Norman Imlah, *Fellow of the Royal College of Psychiatrists and former Clinical Director of the West Midlands Regional Addiction Unit (in his book 'Addiction, Substance, Abuse and Dependency')*

5. Cannabis & schizophrenia

"Few, if any doctors, will deny that the symptoms of schizophrenia are made worse by cannabis". "Possibly

cannabis sometimes converts the schizotypal to schizophrenic". (Dr. Thomas Stuttaford – Times 27.1.00)

"Cannabis may induce anxiety and panic in those unused to it. It reduces concentration, impairs memory and muscular co-ordination in the long and short term. This is the price that has to be paid for the euphoria and the intensification of ordinary sensory experiences. The effects on memory and concentration of persistent cannabis use are very subtle". (Dr. Thomas Stuttaford - Times 19.11.98)

"Cannabis intoxication can precipitate severe psychiatric reactions including paranoia, mania and schizophrenic-like states..." (Professor C.H. Ashton, Department of Psychiatry, University of Newcastle upon Tyne in evidence submitted to the House of Lords Select Committee April 1998) She also said "Cannabis can aggravate or precipitate schizophrenia in vulnerable individuals and may antagonise the therapeutic effects of anti-psychotic drugs in previously well-controlled schizophrenic patients".

6. Cannabis & the unborn

An investigation has discovered that **the risk of developing leukaemia to the offspring of mothers who smoked cannabis just before or during pregnancy is ten times greater than non-users.** (Robison LL, Buckley JD, Daigle AE et al. *Maternal drug use and risk of childhood nonlymphoblastic leukaemia among offspring. An epidemiologic investigation implicating marijuana (a report from the Children's Cancer Study Group 1989)*)

A survey of 4,000 women by Professor Michael Bracken of Yale University showed that if a woman used marijuana as infrequently as three times a month, she **doubled or tripled** her risk of babies being born early, with low birth weight, or with foetal growth retardation. He said **"Doctors believe that the chemical THC is the key factor in explaining why cannabis has this effect on the foetus"**. (BBC 'Panorama' 24.4.95)

7. Cannabis and the brain

Professor Griffith Edwards of the National Addiction Centre said of cannabis effect on nerves "Cannabis is a drug which is fat soluble and works itself into the myelin sheaths – the insulating material around the strands of nerve tissue in the brain. It stays around a long time like insecticides. **There is enough evidence now to make one seriously worried about the possibility of cannabis producing long-term impairment of brain function"**. (BBC 'Panorama' 24.4.95)

Research published in 'Science' supports the theory that **cannabis encourages the use of more addictive drugs.** A report from the University of Cagliari in Italy discovered cannabis causes the brain to release the chemical dopamine. Heroin activates the same process. Researchers concluded that heroin and cannabis work in the same way by activating opiate receptors in the brain. Another study using rats by Scripps Research Institute in La Jolla, California and Complutense University in Madrid shows that the stress of withdrawing from cannabis activates a peptide called corticotropin releasing factor, which is also activated in opiate and cocaine withdrawal. Doctor Gaetano Di Chiara of Cagliari University says that cannabis may lead to the use of more addictive drugs such as heroin, because it may prime the brain to seek substances that act in a similar way. Doctor Di Chiara says **"I would be satisfied if, after all this evidence, people would no longer consider cannabis a 'soft' drug"**. (Times 27.6.97)

One joint of cannabis taken every day for two or three years has been observed to lead to brain cell destruction. (Peter Stoker in *Drug Prevention : 'Just say No'* quoting Dr. Robert Gilkeson)

8. Road accidents

A large number of investigations have shown that **cannabis, even in small doses, impairs driving skills.** (Nahas GG. (1984) *Marihuana in Science and Medicine* (Ed. G.G. Nahas) Raven Press, New York pp 16-36)

Government statistics reveal that in a recent survey of road deaths, **a quarter of motorists killed have taken drugs, mainly cannabis.** Superintendent David Rowe, Police Liaison Officer with the Department of Transport said "drug driving is increasing **and I believe that the number of drug-drivers we detect at present is simply the tip of an iceberg"**. (*Evening Standard* 16.9.97)

In many countries, including the U.K., cannabis is the most common drug, apart from alcohol, to be detected in individuals involved in traffic accidents. A survey from the Department of the Environment, Transport and the Regions (DETR 1998) found that **10% of drivers involved in fatal accidents tested positive for cannabis post mortem.** (80% of these did not have alcohol above the legal limit).

Cannabis was detected in 38% of impaired drivers in the U.S. (National Highway Traffic Safety Administration, 1992) and similar results have been reported in Australia, Canada, and several European countries. (Professor C.H. Ashton, Department of Psychiatry, University of Newcastle upon Tyne in evidence submitted to the House of Lords Select Committee April 1998)

9. Rail accidents

Cannabis has been implicated in major railroad accidents and it is likely that cannabis-related risks can also apply to train drivers, signal operators, air-traffic controllers, operators of complex machinery, and many other skilled activities not enumerated here. (Nahas GG (1993). *Cannabis: Pathophysiology, Epidemiology, Detection* (Eds. G.G. Nahas, C. Latour). CRC Press)

10. Air accidents

Cannabis has been shown to cause serious impairment of aircraft piloting skills in experienced pilots performing flight simulator tasks. The results of one of several studies showed that performance decrements persisted for up to 48 hours after a single cannabis cigarette containing 20mg THC. After 24 hours the pilots were unaware that their performance was affected. (Professor C.H. Ashton, Department of Psychiatry, University of Newcastle upon Tyne in evidence submitted to the House of Lords Select Committee April 1998)

11. Cannabis dependence

Insidious cognitive changes take place when cannabis is smoked which make it impossible for the frequent user to realise that he is dependent. (Copestake David. *Cannabis and mental functions. Publ. By Life for the World Trust, Bucks*)

Cannabis produces chronic dependence syndrome, illustrated in psychometric testing, lowering motivation, reasoning, and ability for abstract thought. (Varma V.K., et al *Cannabis and cognitive functions, a prospective study Drug Alcohol Depend* 1988 21 147)

In 1996 a survey of 220 long-term cannabis users was carried out in Australia by the National Drug and Alcohol Research Centre in Sydney. It found that 92% were dependent on cannabis and 40% were severely dependent. Withdrawal symptoms included depression, insomnia, night sweats and appetite fluctuations.

Wendy Swift, a psychologist leading the survey said **“many people insist you can’t get addicted to pot, our research shows you can”**. She also said, “The longer you use cannabis the greater risk of dependency”. (*Reader’s Digest September 98 - National Drug and Alcohol Research Centre in Sydney*)

12. Cannabis - the gateway

“Cannabis use usually precedes the use of other illegal drugs” says a publication of the Institute for Drug Dependence in London. (*Quoted by Life Education Centres UK 1991*)

“It is very rare now to find a confirmed drug addict whose first illicit drug was not cannabis or who does not use the drug in addition to any other drugs they are using”. (*Dr. Norman Imlah Fellow of the Royal College of Psychiatrists and former Clinical Director of the West Midlands Regional Addiction Unit – from his book ‘Addiction, Substance, Abuse and Dependency’*)

Professor Heather Ashton, a Psycho-pharmacologist at the University of Newcastle who has studied drugs for over 20 years states “There is evidence that as you get tolerant to the ‘high’, you take bigger and bigger doses. **After a while you reach a ceiling, and so you go on to more potent drugs”**. (*Reader’s Digest September 1998*)

Cannabis releases the same neurotransmitters in the brain as the other sedative agents, heroin and alcohol. (*Tanda G., Pontieri F.E., and Di Chiara G., Cannabinoid and Heroin Activation of Mesolimbic Dopamine Transmission by a common mu1 opiod Receptor Mechanism. Science 1997; 276:2048*). **This explains why cannabis is frequently a ‘gateway’ drug to heroin use.**

The findings of a report by J. Crowse (*Brit. J. Psychiat. (1981)*) were “consistent with progression from soft to hard drugs” and stated **“there is, of course, direct evidence of the sequence of drug taking being from soft to hard drugs, with the former abused at a significantly earlier age than the latter”**. (*Bean, P (1971) Social Aspects of Drug Abuse: A study of London drug offenders. Journal of Criminal Law, Criminology and Police Science No: 62 pg 80*)

13. Legalise cannabis?

Dr. Claire Roden, a police doctor for 27 years states **“legalising of cannabis would be an act of unbelievable irresponsibility”**. She says, “There are some sights you never get used to. Most typically of a young man living on a run-down estate, taking the new high-grade cannabis in such prodigious quantities that he is admitted to mental hospital in an acute psychotic state...anxious, shaking and paranoid”.(*Reader’s Digest September 1998*)

After cannabis was legalized in Alaska in 1975 there was a **doubling in the rate of use among teenagers**, so that 15 years later citizens sponsored a referendum which approved legislation making possession of small amounts of marijuana punishable by up to three months in prison and a heavy fine. (*Times 5.1.98*) The rate of cannabis use subsequently fell by one-third and is still falling.

The Munich Institute for Therapy Research has claimed that an **increase in soft-drug use would be inevitable with**

decriminalisation. Legalising soft drugs, they said would allow them to assume a ‘normal’ image and create the likelihood that growth patterns will follow the example of legal drugs such as alcohol and tobacco. The Institute states that decriminalisation would lead to greater personal usage by those who already smoke cannabis, wider availability for those who have never tried the drug and **the lowering of the threshold to hard-drug abuse**. Opinion surveys in Hamburg show that about 14% of heavy consumers of soft drugs showed an interest in using heroin ‘once or twice’. **Only 2% of non-drug users were curious about experimenting with it**. An American study led by Gill Jones, who began her research favouring legalisation, concluded that making illegal drugs more available was unacceptable and tended only to exacerbate the problem. (*Times 5.1.98*)

A University of Michigan study, ‘Monitoring the Future’, found that marijuana use rose among 18 year olds within a year of them perceiving that the risk of being caught had decreased. Greater ease of obtaining marijuana at ever-younger ages contributed to **an increase of 150% among 13 year olds**. (*Times 5.1.98*)

14. Strategy for change

The California Narcotic Officers’ Association which has over 7,000 criminal justice professionals in membership is “dedicated to protecting the public from the devastating effects of substance abuse, whether cocaine, methamphetamine, or marijuana.” They say **“It is our firm belief that any movement that liberalizes or legalises substance abuse laws would set us back to the days of the ‘70s when we experienced this country’s worst drug problem and the subsequent consequences”**. They also state “Pro-legalisation organisations have admitted that **their strategy to legalise marijuana begins with legitimising smoking marijuana as a medicine**”. The Director of the movement for the legalising of marijuana has admitted that the medical use of marijuana is an integral part of the strategy to legalise marijuana. (*1996 publication*)

15. What the judges say

Judge Michael Coombe sent a 23-year-old cannabis user to prison for 8 years for raping a young woman. He said **“There is no doubt in my mind that a great deal of the explanation for his behaviour lies in his indulgence in a prohibited and dangerous drug called cannabis. Until he is clear of his habit of taking this addictive and dangerous drug he will remain a dangerous man”**. The judge also says “There are those who believe that cannabis should be made a lawful substance. I hope people of that mind have the task of dealing with a case like this and reading the heartbreaking statements of the victim and her family”. The victim’s father said the girl was devastated by the attack and said “this has been a horrendous experience for us all. **People say cannabis is a soft drug, but here we have conclusive proof that it isn’t safe to use. I don’t see how anyone can call for it to be legalised now...people must stop kidding themselves about this drug”**. (*Daily Mail 20.11.97*)

Judge Graham Boal QC at the Old Bailey urged pro-cannabis campaigners to examine the case of a paranoid schizophrenic whose use of the drug may have contributed to a fatal attack on a stranger. He said, **“in the current debate on whether cannabis should continue to be a prohibited substance, perhaps more attention should be given in some quarters to cases such as this”**. The accused who was ordered to be held under the Mental Health Act was aged 27 and had stabbed

a person to death in a ferocious attack. Peter Kite QC said he had "persistently abused" cannabis on a daily basis. He said that **"three psychiatrists agreed that Boonprasit's psychotic condition could be directly attributed to his use of cannabis"**. (*Times* 12.11.98)

Judge Keith Matthewman served a nine year jail sentence on a man who raped and assaulted a 16 year old woman, subjecting her to four hours of violence, terror and sexual degradation, while high on a cocktail of cannabis and alcohol. At Nottingham Crown Court **he condemned calls to legalise cannabis as he spoke of the 'devastation' caused by drugs**. He said, "More and more, I deal with cases where the use of cannabis is referred to as 'being behind the crime'. **Perhaps people who say the drug should be legalised should sit where I do and see the devastation it can cause to other people as well as the defendants**". He also said, "too many people talked too freely and unthinkingly about the legalisation of drugs, particularly cannabis". The accused 21-year-old blamed the cannabis and alcohol for his actions. The judge also said, **"In many cases I have been involved in recently, cannabis has overtaken alcohol as a reason by defendants for committing crime"**. (*Daily Mail* 19.4.96)

Judge David Carruthers in New Zealand, **has pointed to the link between cannabis smoking youngsters and adolescent crime**. He said that too many intelligent youngsters starting to use cannabis **deteriorated dramatically** at school in less than a year. (*Sunday Mail* 30.11.97)

16. Cannabis and children

A boy was discovered with a large quantity of cannabis at a school for **4-8 year olds** in Farnham. (*Guardian* 31.10.98) **A boy of 11** had cannabis in his coat pocket when attending his primary school in Wiltshire. (*Times* 12.5.98)

A Glasgow University research project found that 10% of 11 year olds had taken illegal drugs, **usually cannabis**. The Professor of Drug Misuse Research at Glasgow University, Neil McKeganey said, **"These children do really represent an enormous problem"**. Alistair Ramsay, Director of Scotland Against Drugs a government funded agency said "We have to be horrified at the numbers of young children taking drugs,.....". (*Daily Telegraph* 4.9.00)

Up to 48 pupils at the Bluecoats School in Oldham were lured into a drug distribution ring. Pupils hid cannabis and LSD in the linings of their blazers, the tops of their socks and in tape cassettes, trading the illegal substances in the school

toilets. Pupils obtained drugs on tick, having ordered them two days earlier. The Manchester Crown Court was told that older pupils began terrorising youngsters who had given statements. (*Daily Mail* 16.10.97)

The North Yorkshire County Council has carried out a survey of 11 and 12 year old children in schools with suggestive questions such as **'Do you miss your favourite illegal drug if you don't use it for a while?'**. **'Roughly how many times have you been stoned on illegal drugs?'** **'Smoking cannabis makes parties more fun – yes or no?'** Their Co-ordinating tutor for health education, David Uffindall defended it against public criticism as "a sensitive survey". (*Daily Telegraph* 28.1.00)

17. The voice of the young

Jennifer Elliott, daughter of the late film actor Denholm, started smoking cannabis when she was 13 and was addicted to heroin when she was 15. Her addiction devastated her life. She said "Drugs are ridiculously easily available to people of all ages, so to legalise cannabis would encourage millions more to destroy their lives. **I say to anyone thinking of taking drugs it will ruin your life**. It takes away the ability to control your existence. Drugs are all-consuming. **Legalising cannabis is just the start of a lethal road"**. (*Daily Express* October 1994)

18. Stronger cannabis

Preparations of cannabis that are used today in the UK are **ten times more potent** than those taken in the 'flower power' days of the 1960's and 1970's.....The physical and psychological effects of cannabiniods (THC and others) are dose-related: the bigger the dose the greater the effect. (*Professor C.H. Ashton, Department of Psychiatry, University of Newcastle upon Tyne in evidence submitted to the House of Lords Select Committee April 1998*)

19. Cannabis - a warning

Professor Griffith Edwards of the National Addiction Centre said "It's quite possible that over the next ten, twenty, thirty years as the research builds up, it will be clear **that our age is vastly underestimating the dangers of cannabis**. I would want society to have learnt from tobacco and learnt to be guarded, and learnt that when there is worrying evidence, that is the point to safeguard your health, rather than smoke a perhaps, 'safe' drug for twenty years and then find you've got the cancer. I think it's sensible to leave it alone". (*BBC 'Panorama'* 24.4.95)

Cannabis is glamourised and promoted by film and TV celebrities, and the commercial 'pop' culture and night-club scene. It is distributed by highly organised and often violent criminal gangs which make huge profits. They deal in a range of drugs and their turnover in Britain is probably £8.5 billion per year according to the Office for National Statistics. Cannabis users are inevitably linked to this criminal network and support it.

Drug dealers target children and young people. They introduce them to so-called 'soft' drugs as the first step towards getting them addicted to 'hard' drugs. British youngsters are now the biggest drug users in Europe according to ESPAD - the European Schools Survey Project on Alcohol and other Drugs. The United Nations Secretary-General has called for a "determined and international response" to fight organised drug crime. The UN International Drugs Control Programme calculates that the illicit business of drug trafficking accounts for nearly one tenth of all international trade. (Daily Telegraph 27.6.97)

Drugs provide a mechanism for escape and disassociation from society and for self-delusion. At a time when we are facing enormous social problems through substance abuse, it is vital that factual evidence about cannabis should be widely known and should form the basis for public policy.

