Top Ten Reasons Not to Legalize “Medical” Marijuana

1. Smoked Marijuana Does Not Meet the Standards of Modern Medicine
Marijuana is not approved by the Food and Drug Administration (FDA) so its use is unregulated. The FDA, Substance Abuse and Mental Health Services Administration, and National Institute on Drug Abuse have found no sound scientific studies supporting medical use of crude marijuana. The FDA’s guidelines for a drug’s approval require that certain factors be established: dose quantity; frequency and duration of administration; and interaction with other medicines. None of these has been determined for marijuana. Never has smoking been an accepted method of administering any medicine.

2. Marijuana Use Would Increase
According to a study (Melanie Wall, et al.) comparing data from the National Survey on Drug Use and Health from 200-2008, states that have legalized marijuana under the guise of medicine have higher marijuana use rates by youth aged 12-17 compared to other states. Marijuana is the most widely abused illicit drug in the nation among youth and adults. According to the 2012 Monitoring the Future Survey, 45.2% of high school seniors have tried marijuana and 22.9% have used marijuana in the last 30 days. 6.5% of high school seniors smoke marijuana daily.

3. Treatment and Addiction Rates Would Rise
Regular marijuana use can be addictive and lead to deteriorating behavior, particularly in young people. According to the 2011 National Survey on Drug Use and Health (NSDUH), marijuana users account for the highest rate of past year dependence or abuse among all illicit drug use. Of the 6.5 million persons aged 12 or older classified with illicit drug dependence or abuse in 2011, marijuana accounted for 4.2 million (63.8%).

4. Education Would be Adversely Affected
Regular use of marijuana compromises the ability to learn and to remember information by impairing the ability to focus, sustain, and shift attention. Long-term use reduces the ability to organize and integrate complex information. A recent study published in the British Journal of Medicine reports that adolescents who started using marijuana before the age of 18 when their brains were still developing and continued to use into adulthood, experienced as much as an 8-point decline in IQ scores.

5. Injuries and Deaths From Impaired Driving Would Increase
Marijuana use affects coordination, decision-making and perception, which directly impacts impaired driving. It is the most prevalent illegal drug detected in impaired drivers, fatally injured drivers and motor vehicle crash victims. A recent meta-analysis of nine epidemiological studies concluded that drivers who test positive for marijuana are more than twice as likely as other drivers to be involved in a crash. Five years after establishing a “medical” marijuana program, California saw a near 100% increase in fatal crashes where at-fault drivers tested positive for marijuana. According to the Colorado Department of Transportation, drivers testing positive for marijuana doubled between 2006-2010, following an influx of pot shops and significant increases in registered “medical” marijuana users.
6. Mass Marketing of Marijuana Would Launch and Expand
Restrictions on tobacco advertising would not apply to marijuana. Ads promoting marijuana products, such as cookies and candy bars, will be in magazines and newspapers as well as on radio and television. Colorado media recently reported a marijuana dispensary’s phone ads were soliciting kids.

7. Accidents, Liability and Insurance Rates for Employers Would Increase
Marijuana use adversely impacts employee performance and safety, major issues for businesses and industry. Safety, absenteeism, turnover rates, tardiness, productivity, work quality, and liability lawsuits are concerns for employers. A study found employees who tested positive for marijuana have 55% more industrial accidents and 85% more injuries compared to non-users. Employees who abuse drugs are five times more likely than non-users to injure themselves or others and cause 40% of all industrial fatalities. A study showed those testing positive for marijuana had absentee rates 75 times higher than non-users. Businesses are less likely to stay or move into a state where drug related risks are high.

8. Pot Shops Would Proliferate Just as with Pill Mills
Data from states that have passed similar laws show that less than 10% of medi-pot users are cancer, HIV/AIDS, or glaucoma patients. Over 90% cite “chronic pain,” an indefinable term that is being used to cover medical conditions such as headaches and minor arthritis. The consequences of failing to narrowly define pain that is allowed to be treated with powerful and addictive medications are well known. The proliferation of “pill mills” pushing the abuse of legal pain medications is the consequence of criminal doctors and med-seeking patients who have taken advantage of loose regulations. We cannot afford to enhance the disaster of pill mills by adding pot shops to the mix. Like pill mills, pot shops are in business to make money and will sell to anyone who produces a recommendation which can be obtained by paying a fee and claiming any medical condition, even a headache. Dispensaries claim to operate as nonprofits, but they have been tied to organized crime gangs and are often multi-million dollar profit centers.

Common byproducts related to dispensaries include: drug dealing, sales to minors, loitering, heavy vehicle and foot traffic in retail areas, increased noise, robberies of customers just outside the facilities, and the loss of other commercial businesses who don’t want to be located in the vicinity of marijuana dispensaries.

9. Environmental Damage Would Occur
Outdoor marijuana grows pose a significant threat to our natural resources and wildlife. Marijuana farms on public lands in the northwestern parts of the United States have been linked to deaths of area wildlife including bobcats, mountain lions, minks and fishers, a rare breed of forest mesocarnivores. The animals are being poisoned by chemical pesticides used in marijuana grows. Researchers have concluded that game species consumed by humans (deer and boar) can be exposed to the same toxicants and although no studies have been done to date, it is feasible that humans could be exposed. Fires also pose a significant threat to the environment and wildlife. In 2006-2011 a confirmed 93,535 acres were lost in California due to grow site initiated fires. The cost, just to suppress the fires, was more than $35 million.

10. Black Market Sales and Diversion Would Increase
Since “medical” marijuana will be readily available for adults who can qualify to use under a multitude of alleged medical conditions, it’s likely that black market sales will heavily target their remaining market – our youth. Similar to the Florida experience with prescription drugs, states that have legalized marijuana under the guise of medicine have seen it diverted for recreational abuse. A study of one Colorado treatment center reported that, although they were not registered medi-pot users, 48% of adolescents in treatment obtained marijuana from someone with a “medical” marijuana license. The Rocky Mountain High Intensity Drug Trafficking Area has documented that Colorado’s “medical” marijuana is being diverted inside Colorado and to 23 states across the country.