

# Marijuana and Side Effects: A Frank Discussion

All drugs have unintended effects. In the world of pharmacology, they may be classified as serious adverse effects (SAE), adverse effects (AE), or side effects (SE). Thus, when pro-marijuana enthusiasts insist that marijuana has no negative effects to self or others, they are neglecting or minimizing the basic dynamics of pharmacology. According to medical researchers, an unwanted or unintended effect of a substance – short or long term, is considered a side effect if it occurs in one percent or more of people taking that specific drug. Side effects may be severe, mild, or just annoying.

The problem is that research, itself, is often incomplete or inconclusive when it comes to drugs. There have been a number of mistakes that research has made over the years in pharmacologia, pharmacokinetics, and psychopharmacology (the branch of pharmacology dealing with the psychological effects of drugs.)

Research has been critically wrong in several instances. For years many said “elixir” or “tonic” (alcohol based potions) had remarkable healing powers, but eventually these salesmen became known as “snake oil salesmen.” For years researchers thought cocaine to be a “miracle drug” that could lift one out of clinical depression, until it was found that cocaine heightened the very depression it was used to treat - even to suicidal levels. Researchers through the 60s and 70s, said that no one could die from a heroin overdose. When police and emergency rooms pointed to all the heroin deaths, researchers insisted that it was not the heroin causing the deaths, but some ambiguous dynamic they named “Syndrome X.”

In past years researchers said that one could not become addicted to benzodiazepines – earlier even to barbiturates or the sedative-hypnotics – they were wrong. They said that pregnant women could drink alcohol (they did not understand Fetal Alcohol Spectrum Disorder.) One major study concluded that alcoholics could drink safely again, and before that study was disproved it did considerable damage to many thousands of recovering alcoholics who attempted again to return to social drinking.

The dynamics of all drug use are idiosyncratic. Both the effects – and side effects depend upon the substance itself, the dose and frequency of use, set and setting of use, upon combinations of use with other substances, and upon the genetic make-up and predisposition of the individual including age, weight, sex, emotional stability, mental health and maturational level, physical health, and perhaps even ethnicity and race.

In “Marijuana – Medical Implications” (John R. Hubbard, M.D., Ph.D., Sharonee E. Franco, M.D., and Emmanuel S. Onaivi, Ph.D., Vanderbilt University School of Medicine, Nashville, Tennessee, American Family Physician, December 1999), the authors listed over 65 effects of marijuana including adverse physical effects and adverse neuropsychiatric effects.

Marijuana is not an exception to this rule. It has 421 chemicals – 61 of them unique to marijuana. It affects the brain. It has immediate effects - some of which are negative. And it has long term effects – both adverse effects and other side effects - both subtle and some more pronounced, depending upon these and other variables.

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## Marijuana - A Self-Report by Youth

In the report, “Adolescent Self-Reported Behaviors and Their Association with Marijuana Use”, several important findings were noted regarding marijuana related problems – *as reported by youth themselves*.

*Social Problems:* Those who used marijuana in the past year were more likely than nonusers to not get along with other youth, and weekly users were nearly twice as likely as nonusers to report this.

*Thought Problems:* Past year marijuana users age 12-to-17 were more likely than nonusers to report thought problems like “I can not get my mind off certain thoughts”, or “I repeat certain actions over and over.” In addition, frequent users were more likely to see or hear things that other people think are not there.

*Attention Problems:* Those who used marijuana in the past year were more likely than nonusers to report they have trouble concentrating, are confused or in a fog, daydream a lot, or act without stopping to think.

*Delinquent Behavior:* The greatest differences between users and nonusers were found in measures of delinquent behavior. Frequent users were 6 times as likely to run away from home, nearly 6 times as likely to say they had cut classes or skipped school, 3-5 times as likely to steal, report they do not feel guilty after doing something they shouldn’t, hang around with kids who get into trouble, and lie and cheat.

All problem areas increased in frequency as the marijuana use increased.

(“Adolescent Self-Reported Behaviors and Their Association with Marijuana Use”, Janet C. Greenblatt, June 03, 2008, Source: Office of Applied Studies, SAMHSA, National Household Survey on Drug Abuse.)