Medical Marijuana and Its Disagreement

Posted on September 28, 2018

View this essay online:
https://academic-master.com/medical-marijuana-and-its-disagreement/

Introduction and Historical Background

Cannabis, or medical marijuana, is one of the most popular recreational drugs in the world. The discovery of marijuana's medicinal properties can be traced back to China during the reign of Emperor Shen Nung in 2700 B.C. It was considered to be able to treat a number of illnesses such as nausea, "parasitic infections, and hemorrhage." In India, it was used to treat pain and other unwanted symptoms. Since the discovery of marijuana's medicinal properties, scientific studies have sped up drastically to find out more about the effects of marijuana (Busse et al., 2023).

Medical Debate and Legal Restrictions

Some researchers say that marijuana can cure a myriad of conditions, but some believe that the scope of marijuana in medicine is limited. In 1961, it was included as a controlled drug in the United Nations Single Convention on Narcotic Drugs, and it is illegal in most countries. So far, cannabinoids have led the U.S. Food and Drug Administration to approve two medications that contain marijuana, and it is hoped that a continued scientific study will lead to more medications that can be helpful in treating a range of symptoms and diseases. A non-profit American organization called the National Organization for the Reform of Marijuana Laws (NORML) works to move public opinion in favor of legalizing marijuana use for medical as well as recreational purposes. The organization claims that the use of marijuana in medicines should be legal and its responsible use should not be subject to penalty. Twenty-nine states of the United States have made it legal to use marijuana for medical purposes while it is still illegal in the rest of the states. Like the states of America, the science community is also divided over whether to use marijuana for curing diseases or not (Cochrane, 2026).

Cannabis Regulation in the United States

In the United States, cannabis was one of the most prescribed medicines until the government banned it in 1937. With the prohibition, its use as a medicine was restricted as well, but scientists kept researching its medical uses. In the past couple of decades, several states have decided to legalize it to cure certain illnesses. Marijuana has curing properties because it contains active compounds that are quite similar to a group of molecules in our body called endocannabinoids. These molecules keep our nerve cells from premature death and control our immune system. Their other

functions are to manage our mood, appetite, memory, sleep, movement, and sensations. Both the active compounds in marijuana and endocannabinoids are connected with proteins that are known as cannabinoid receptors in the body and the brain. That property of marijuana makes it useful for strengthening the human body and mind. Several forms of these compounds are available in marijuana and can be taken in with different methods (National Center for Complementary and Integrative Health, 2024).

Meaning and Forms of Medical Marijuana

Medical marijuana means using the unprocessed basic extracts of marijuana plants for the treatment of different diseases. The scientific study of marijuana is known as cannabinoids, and the term "Cannabis" is used for drugs produced from marijuana plants. There are two available cannabinoids approved by the U.S. Food and Drug Administration (FDA): nabilone and dronabinol. Both of them are available in the form of pills. These pills are prescribed for vomiting and nausea due to cancer chemotherapy (a treatment for cancer through drugs that stop cancer cells from growing and dividing by destroying them). Medical marijuana is not accessible from pharmacies, but it can be purchased from dispensaries in a variety of preparations, or it can be grown by patients for the treatment of many illnesses. Cannabinoids can be inhaled, smoked, made into tea, or mixed with food. It can be gained by isomerization of cannabidiol, taken in herbal form, extracted naturally from the plant, or manufactured artificially (U.S. Food and Drug Administration, 2023).

Therapeutic Uses and Benefits

Many researchers have supported the use of marijuana for medical purposes. Prescribed medical marijuana includes the oromucosal spray nabiximols (a mouth spray containing cannabis extracts), capsules, dronabinol (an artificial compound containing marijuana), and nabilone capsules (another man-made compound having substances similar to natural marijuana). In a study named "Medical Marijuana: Medical Necessity Versus Political Agenda," the researchers recommend marijuana for curing certain medical problems like chronic pain, nausea, Parkinson's disease, post-traumatic stress disorder, loss of appetite, epilepsy, inflammatory bowel disease, and multiple sclerosis (Clark et al.). Nonetheless, a study named "Cannabinoids for Medical Use: A Systematic Review and Meta-analysis," conducted by a group of American scientists, found little proof for marijuana's capacity to treat health conditions except spasticity (muscle stiffness) and chronic pain. The study used statistical data to show that cannabinoids are not effective in vomiting and nausea due to chemotherapy, weight gain in HIV, Tourette syndrome, and sleep disorders. It also proved that there is very little chance that medical marijuana can alleviate anxiety and help a person with depression. However, the use of medical marijuana has a risk of dizziness, asthenia, confusion, disorientation, balance problems, diarrhea, drowsiness, euphoria, dry mouth, hallucination, fatigue, nausea, vomiting, and somnolence. Moreover, no difference in effects was found with the use of different types of marijuana (Whiting et al.).

Health Risks and Medical Concerns

Some women use marijuana to treat their severe nausea during pregnancy, but there is no research that tells whether it is safe or harmful for the fetus; therefore, doctors usually do not recommend it to pregnant women. Some researchers say that the risk for anencephaly (an acute inborn condition in which a part of the child's skull is not present with the cerebral hemispheres of the brain) increases with exposure to marijuana, but there is no statistical data to prove that claim, and it is observed that a great number of individuals were not afflicted with anencephaly after using marijuana in pregnancy. In addition to that, the fact that there are many causes of anencephaly shows the incompatibility of blaming marijuana for anencephaly. There is a study that can connect the use of marijuana to the risk of miscarriage. However, some connection is found between the use of the drug during pregnancy and hyperactivity disorders in children. Keeping in view the potential of marijuana to harm the developing brain of the infant, the American College of Obstetricians and Gynecologists suggests that doctors advise women not to use marijuana during and a few months after pregnancy when the child is breastfed. However, it is true that there is a huge gap in research on the effects of marijuana on the development of fetuses, given that policies about the use of marijuana are changing and a significant number of women are using the drug to treat their nausea (Torres and Hart).

Opioid Crisis and Public Health

Studies have shown that there will be a considerable decrease in opioid painkiller deaths if medical marijuana dispensaries are legalized; hence, medical marijuana is a potential way to eliminate the opioid epidemic. In 2015, 52,000 people died due to opioid painkiller overdoses in the United States (Multiple Cause of Death, 1999-2016 Request). The crisis was so bad in states like New Hampshire that it became a top concern for voters. As more people talked about it and the awareness grew, an exotic policy idea was proposed to deal with the issue: legalize medical marijuana. The proponents pointed out that medical marijuana can also be used as a painkiller to substitute opioid painkillers, which led to the overdose epidemic. Moreover, they emphasized that it was less addictive than opioids and did not cause fatal overdoses; therefore, replacing marijuana with opioids could prevent overdose deaths. Opioids also have worse side effects than marijuana. In addition to the risk of overdose death, the use of opioids has a risk of addiction. The addiction to opioid painkillers leads to the use of heroin, which is more potent, cheaper, and deadlier than the painkillers. Research has supported the idea, and it attracted the attention of lawmakers at the state and federal levels (Powell et al.).

Regulation and Youth Exposure

The Federal authorities of the United States have targeted dispensaries within a thousand feet of schools, playgrounds, and parks, contending that the legalization of medical marijuana encourages

adolescents to use marijuana. In the mid-2000s, there was a dramatic increase in the percentage of use of marijuana by high school students. Federalists attributed the increased use of marijuana to the growth of the medical marijuana industry after the legalization of medical marijuana. The former U.S. Attorney for Colorado and the Northern California district, John Walsh, sent notices to medical marijuana dispensaries within a thousand feet of schools and public places to close or relocate to another place. Similarly, local law enforcement authorities also argued about the connection between the use of marijuana by youngsters and its legalization. They cited the data provided by the Department of Education, which showed a drastic increase in school suspensions and expulsions due to marijuana abuse from 2008 onward. It is evident that teenagers who abuse marijuana are likely to use other harmful substances like cocaine and heroin, which, in turn, partake in worsening their mental health and contribute to risky sexual behavior. However, a survey on Drug Use and Health revealed that the rate of marijuana abuse among twelve to seventeen-year-olds was higher in the states that legalized medical marijuana before the passage of the law (Wall et al.).

Cannabis Use Disorders and Legalization

It appears that the legalization of medical marijuana through medical marijuana laws (MML) has led to the predominance of illicit marijuana use and cannabis use disorders. For the reason that cannabis is quite a new practice, its effects on aged and ill people are relatively unknown. Aged people and patients with AIDS and cancer can be more susceptible to the harmful effects of marijuana. Medical marijuana is now legal in twenty-eight states, and a large number of people are in favor of recreational use of the drug. Though some people use it without harm, marijuana abuse has potential consequences like vehicle crashes, impaired functioning, psychiatric symptoms, emergency department visits, and addiction. The adult illegal use and consequences related to it have increased gradually over time. It increased more rapidly in states that legalized cannabis than those that did not. From 1991 to 2012, more than two million adults were diagnosed with mental disorders attributed to the use of medical marijuana. The medical marijuana laws increased the potency, availability, and perceived acceptability/safety of marijuana. Many people began to use marijuana to cope with anxiety and depression or reduced economic opportunities. Survey shows that illicit use of cannabis was higher in states that were among the first ones to legalize medical marijuana than those that legalized it later (Hasin et al.).

Arguments Against Legalization

The opponents of legalization are of the view that if recreational marijuana is fully allowed, it would be easily accessible, due to which its abuse will increase. It is believed that if medical marijuana is allowed to be used for profit, it would lead to a heavy market of drug addicts. They see the alcohol and tobacco industries as precedents and fear the consequences of the legalization of cannabis. In Colorado, the top few heaviest marijuana users made up almost 90% of the total demand for the drug. Experts in Drug policy have suggested alternatives to commercial legalization. They proposed

that by putting marijuana production in the care of the state government, the for-profit incentives can be tamed, and the state will have more direct control over the prices and the consumers of the drug. Now that the marijuana industry is already present in numerous states, legalization opponents worry that legalization will certainly attract prevailing for-profit forces of materialism and greed. Due to these concerns, the opponents are in favor of more limited reform than the corroboration of marijuana. However, they believe that the prevailing drug and criminal justice rules are costly and penalizing and contributing to the mass incarceration of American citizens. They say that nonviolent users of the drug should not be imprisoned for using marijuana for medical purposes. They feel that legalization of marijuana is too liberal, and it should not be used for recreational purposes because it can lead to terrible consequences.

Continuing Scientific Debate

Studies on marijuana's effects on health make clear why opponents and proponents of legalizing medical marijuana appear to be talking about different drugs. Every scientific study differs in fundamental findings, like whether heavy marijuana use affects the infant, which shows that some studies have cherry-picked results without adopting proper scientific methods. There is very little high-quality research that examines marijuana's effects on physical and mental health; therefore, very little is known about the consequences of using medical marijuana. This lack of knowledge keeps some doctors from prescribing marijuana to patients.

References

Busse et al. (2023). *Medical cannabis or cannabinoids for chronic pain: A clinical practice guideline*. BMJ. https://www.bmj.com/content/382/bmj-2022-072348

Cochrane. (2026). *Cannabis-based medicines for adults with chronic neuropathic pain*. Cochrane. https://www.cochrane.org/evidence/CD012182_what-are-benefits-and-risks-cannabis-based-medicines-adults-chronic-neuropathic-pain

National Center for Complementary and Integrative Health. (2024). *Cannabis (Marijuana) and Cannabinoids: What You Need To Know*. NCCIH. https://www.nccih.nih.gov/health/cannabis-marijuana-and-cannabinoids-what-you-need-to-know

U.S. Food and Drug Administration. (2023). *FDA and Cannabis: Research and Drug Approval Process*. FDA. https://www.fda.gov/news-events/public-health-focus/fda-and-cannabis-research-and-drug-approval-process