



# IX. Marijuana/Cannabis

## WHAT IS MARIJUANA?

Marijuana is a mind-altering (psychoactive) drug, produced by the *Cannabis sativa* plant. Marijuana contains over 480 constituents. THC (delta-9-tetrahydrocannabinol) is believed to be the main ingredient that produces the psychoactive effect.

## WHAT IS ITS ORIGIN?

Marijuana is grown in the United States, Canada, Mexico, South America, and Asia. It can be cultivated in both outdoor and in indoor settings.

### What are common street names?

Common street names include:

→ Aunt Mary, BC Bud, Blunts, Boom, Chronic, Dope, Gangster, Ganja, Grass, Hash, Herb, Hydro, Indo, Joint, Kif, Mary Jane, Mota, Pot, Reefer, Sinsemilla, Skunk, Smoke, Weed, and Yerba

### What does it look like?

Marijuana is a dry, shredded green/brown mix of flowers, stems, seeds, and leaves from the *Cannabis sativa* plant. The mixture typically is green, brown, or gray in color and may resemble tobacco.

### How is it abused?

Marijuana is usually smoked as a cigarette (called a joint) or in a pipe or bong. It is also smoked in blunts, which are cigars that have been emptied of tobacco and refilled with marijuana, sometimes in combination with another drug. Marijuana is also mixed with foods or brewed as a tea.

### What is its effect on the mind?

When marijuana is smoked, the THC passes from the lungs and into the bloodstream, which carries the chemical to the organs throughout the body, including the brain. In the brain, the THC connects to specific sites called cannabinoid receptors on nerve cells and influences the activity of those cell

Many of these receptors are found in the parts of the brain that influence:

→ Pleasure, memory, thought, concentration, sensory and time perception, and coordinated movement

The short-term effects of marijuana include:

→ Problems with memory and learning, distorted perception, difficulty in thinking and problem-solving, and loss of coordination

The effect of marijuana on perception and coordination are responsible for serious impairments in learning, associative processes, and psychomotor behavior (driving abilities). Long term, regular use can lead to physical dependence and withdrawal following discontinuation, as well as psychic addiction or dependence.

Clinical studies show that the physiological, psychological, and behavioral effects of marijuana vary among individuals and present a list of common responses to cannabinoids, as described in the scientific literature:

→ Dizziness, nausea, tachycardia, facial flushing, dry mouth and tremor initially

→ Merriment, happiness, and even exhilaration at high doses

→ Disinhibition, relaxation, increased sociability, and talkativeness

→ Enhanced sensory perception, giving rise to increased appreciation of music, art, and touch

- Heightened imagination leading to a subjective sense of increased creativity
- Time distortions
- Illusions, delusions, and hallucinations are rare except at high doses
- Impaired judgment, reduced coordination, and ataxia, which can impede driving ability or lead to an increase in risk-taking behavior
- Emotional lability, incongruity of affect, dysphoria, disorganized thinking, inability to converse logically, agitation, paranoia, confusion, restlessness, anxiety, drowsiness, and panic attacks may occur, especially in inexperienced users or in those who have taken a large dose
- Increased appetite and short-term memory impairment are common

Researchers have also found an association between marijuana use and an increased risk of depression, an increased risk and earlier onset of schizophrenia, and other psychotic disorders, especially for teens that have a genetic predisposition.

### What is its effect on the body?

Short-term physical effects from marijuana use may include:

- Sedation, blood shot eyes, increased heart rate, coughing from lung irritation, increased appetite, and decreased blood pressure

Like tobacco smokers, marijuana smokers experience serious health problems such as bronchitis, emphysema, and bronchial asthma. Extended use may cause suppression of the immune system. Because marijuana contains toxins and carcinogens, marijuana smokers increase their risk of cancer of the head, neck, lungs, and respiratory tract.

Withdrawal from chronic use of high doses of marijuana causes physical signs including headache, shakiness, sweating, and stomach pains and nausea.

Withdrawal symptoms also include behavioral signs such as:

- Restlessness, irritability, sleep difficulties, and decreased appetite



*Leaf of marijuana plant*

### What are its overdose effects?

No death from overdose of marijuana has been reported.

### Which drugs cause similar effects?

Hashish and hashish oil are drugs made from the cannabis plant that are like marijuana, only stronger.

Hashish (hash) consists of the THC-rich resinous material of the cannabis plant, which is collected, dried, and then compressed into a variety of forms, such as balls, cakes, or cookie like sheets. Pieces are then broken off, placed in pipes or mixed with tobacco and placed in pipes or cigarettes, or smoked.

The main sources of hashish are the Middle East, North Africa, Pakistan, and Afghanistan.

Hashish Oil (hash oil, liquid hash, cannabis oil) is produced by extracting the cannabinoids from the plant material with a solvent. The color and odor of the extract will vary, depending on the solvent used. A drop or two of this liquid on a cigarette is equal to a single marijuana joint. Like marijuana, hashish and hashish oil are both Schedule I drugs.

### What is its legal status in the United States?

Marijuana is a Schedule I substance under the Controlled Substances Act, meaning that it has a high potential for abuse, no currently accepted medical use in treatment in the United States, and a lack of accepted safety for use under medical supervision.

Marinol, a synthetic version of THC, the active ingredient found in the marijuana plant, can be prescribed for the control of nausea and vomiting caused by chemotherapeutic agents used in the treatment of cancer and to stimulate appetite in AIDS patients. Marinol is a Schedule III substance under the Controlled Substances Act.