
Cannabis in Your Clinic

A Primary Concern

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UT Southwestern '95

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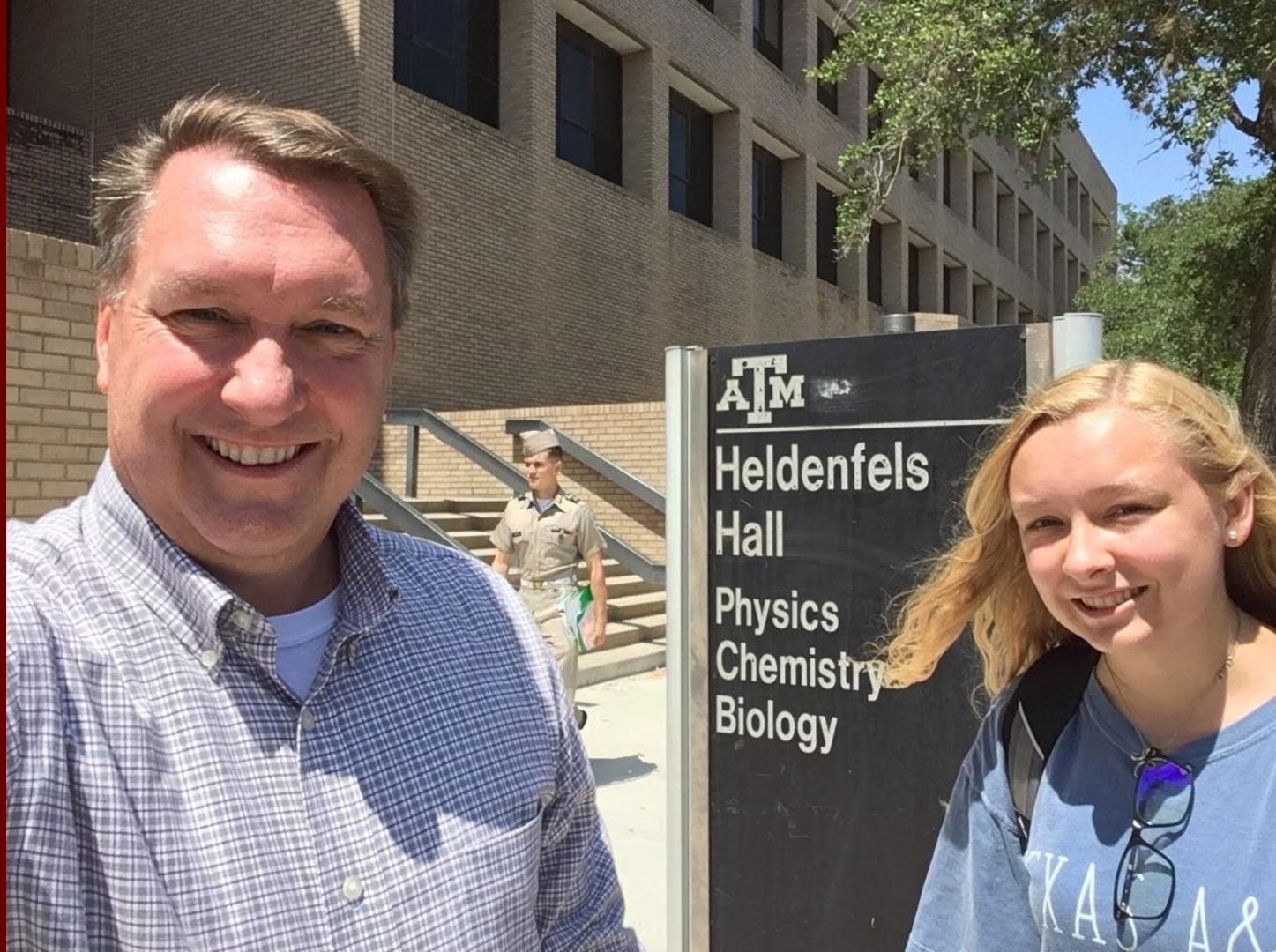
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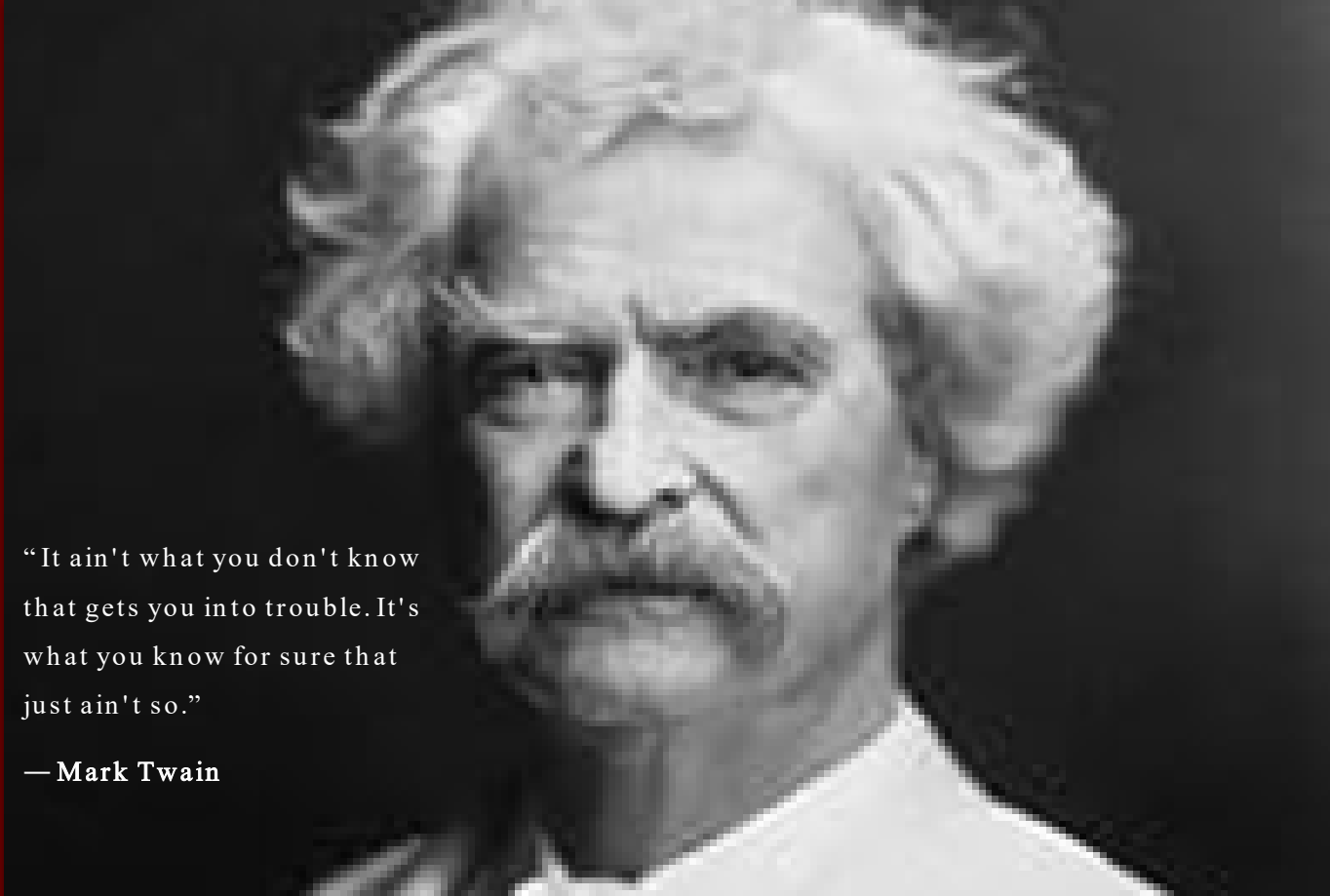
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A black and white portrait of Mark Twain, showing his characteristic wild, white hair and a mustache. He is looking slightly to the left of the camera with a serious expression. The background is dark and out of focus.

“It ain't what you don't know
that gets you into trouble. It's
what you know for sure that
just ain't so.”

— **Mark Twain**

Is Cannabis Medicine?

- 500 Chemical compounds including 100 cannabinoids in the *Cannabis Sativa* plant
- NIH recognizes 26,000 diseases
- National Academy of Medicine 2017 found “Substantial Evidence” of benefit for:
 - Chronic pain
 - Multiple Sclerosis *spasticity*
 - *Chemotherapy* induced nausea
- Texas Compassionate Use Program Qualifying Medical Conditions (2025)
 - Amyotrophic Lateral Sclerosis (ALS), Autism, Cancer, Chronic pain, Crohn’s/ IBD, Epilepsy, Incurable neurodegenerative diseases, Multiple sclerosis (MS), Post-traumatic stress disorder (PTSD), Seizure disorders, Spasticity, Terminal illness or conditions requiring hospice or palliative care, Traumatic brain

Is Cannabis Medicine?

THC Short Term Effects:

Sleep Aid

Nausea Relief

“Chill”

“High”

Pain Relief

THC Long Term Effects:

Insomnia

Cannabis Hyperemesis

Anxiety disorders

Depression

Lowers pain thresholds

Proximate Cause Bias promotes Cannabis Use Disorder

Is Cannabis Medicine?

- *APA Statement on Cannabis as Medicine*: Not a treatment for any psychiatric condition and is likely to cause or worsen many of them
 - VA/DOD Clinical Guidelines advise *against* use for PTSD
 - No medical society supports legalization
 - 326 “providers” out of 26,000 Colorado *physicians* wrote “recommendations” for cannabis last year
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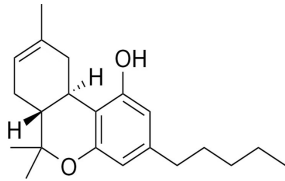
Is Cannabis Medicine?

- Texas Compassionate Use Program (TCUP)
 - Qualifying Condition
 - Texas resident
 - No age restriction (minors with parent/ guardian approval)
 - Video visit with a prescribing doctor
 - Register prescription through Compassionate Use Registry of Texas (CURT)
 - “Low potency” (1 % THC) dispensed through any licensed dispensary
 - 90 day rx with up to 4 refills (not smoked)
 - Only 110,000 unique patients and half have not filled a rx in past year
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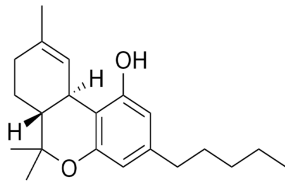
“Hemp/ Δ8” THC Loophole

- “Hemp” is a *Cannabis Sativa* plant with < 0.3% THC (tetrahydrocannabinol)
 - 2018 Federal Farm Bill legalized for industrial purposes
 - “Rope not Dope”
 - Industry exploited that loophole and asserted that anything produced from “hemp” (or claimed to have been) was now federal and state legal
 - Low in THC but high in CBD: *“The CBD is chemically extracted from hemp using dichloromethane, boron trifluoride etherate and various other Frankensciences thus creating a chemical alphabet soup of isomerized THC molecules.”*
 - SB 3 (Perry) closing the “hemp loophole” passed Texas House and Senate with bipartisan support vetoed by Gov Abbott in the final hour after intense lobbying and closed door meetings with industry representatives.
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“Hemp” THC: A Chemical Alphabet Soup



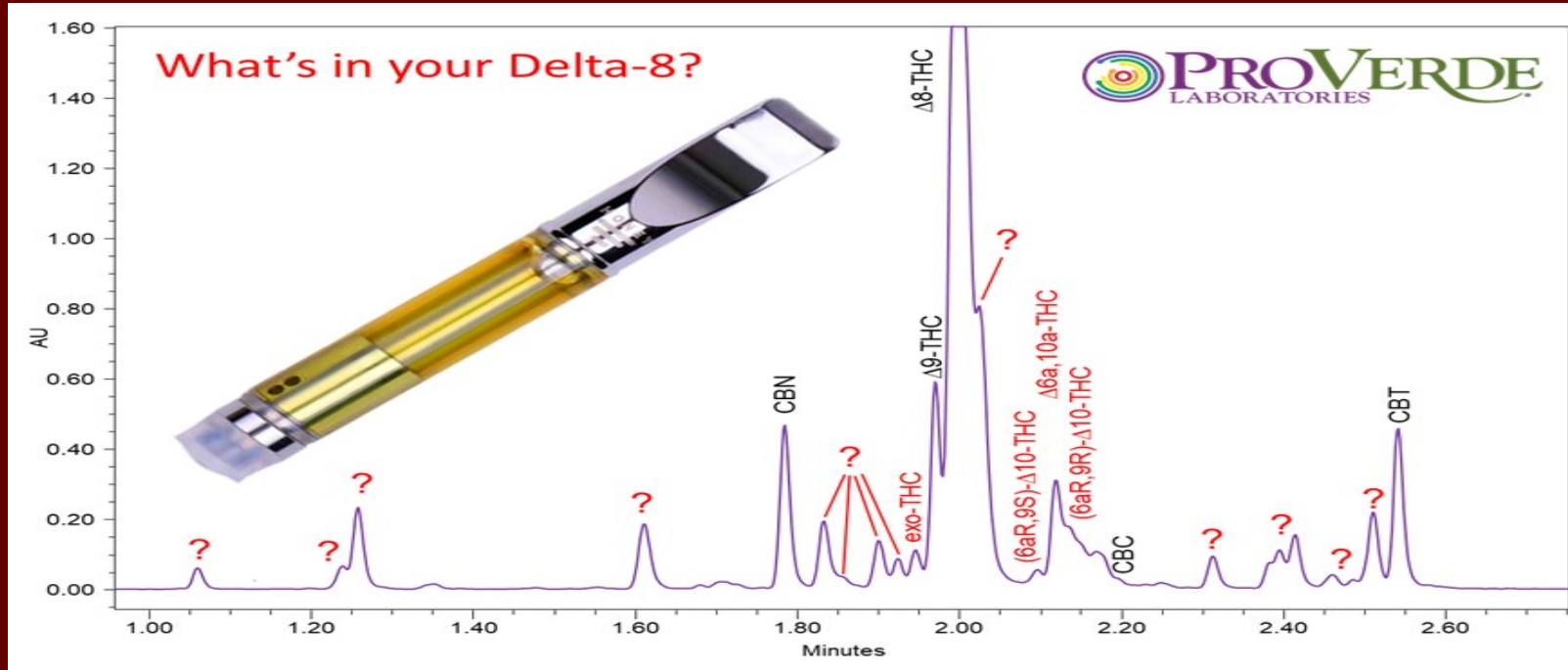
Delta 8 THC



Delta 9 THC

- CBD derived THC isomers ($C_{21}H_{30}O_2$) vary in *potency* (CB1 receptor affinity) but not *effect*
- Δ -8, Δ -10, THC-V and HHC are 80 proof whiskey to Δ -9's 110 proof
- THC0 and THCP are much more potent than Δ -9 THC. Acetylated THC researched as a chemical weapon by US Army Laboratories
- THCA (THC cannabinolic acid) is just a Δ -9 “pro-drug”

“Hemp” THC: A Chemical Alphabet Soup



Clarion Compliance: 99% non-compliance “The hemp industry is primarily a criminal enterprise.”

Cannabis is Safe! (Non-lethal)

- Then LSD is “safer” than table salt
 - #1 substance found in teen and young adult suicide victims in CO
 - #1 substance implicated in child abuse and neglect fatalities in Texas
 - #1 substance found in the 42% of fatally injured drivers who tested positive for a drug (NHTSA)
 - Wright State Driver Autopsy Study: 42 % THC positive
 - US Adults past 30 day THC use: 16%
 - Avg 30 ng/ dl (impairment at 2 to 5 ng/ dl)
 - 6,800 additional roadway deaths due to legalization (JAMA IM, June 2020)
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Well, Cannabis is Safer than Alcohol

- Marijuana users use more alcohol than non-marijuana users (Gunn. Oct, 2018, *Psych of Addict Behavior*)
 - Marijuana users are FIVE times more likely to have an alcohol use disorder (Weinberger. April, 2016 *Drug and Alcohol Dependence*)
 - THC is very different than ETOH in terms of pharmacokinetics (fat soluble) and pharmacodynamics
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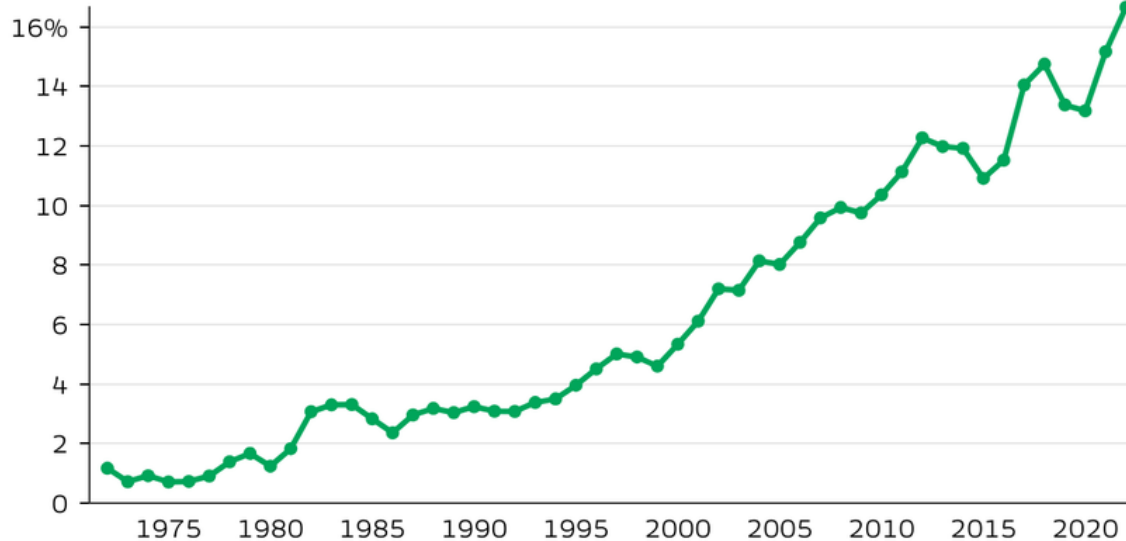
Cannabis in Youth/ Young Adults

- NIDA: Suicidal ideation doubles with even occasional marijuana use
 - Triples with daily use
 - Quintuples with Cannabis Use Disorder (CUD—addiction)
 - Including in users who were not depressed (NIH June, 2021)
 - 2024 Univ of Toronto study: **11 fold** increase in psychotic illnesses (CIP) in teen marijuana users vs non-users
 - Responsible for up to **30% of new schizophrenia** diagnoses in young adult males (Copenhagen study, NIH May 2023)
 - 50-year longitudinal study concluding in 2016: **600% increase** in violence for persistent cannabis users. (*Cambridge Study on Delinquent Development*)
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Cannabis Sativa Potency

Today's cannabis is a lot stronger than its predecessors

Cannabis available today contains more than 10 times as much **THC**, on average, than it did in the 1970s



SOURCE: NIDA POTENCY MONITORING PROGRAM, UNIVERSITY OF MISSISSIPPI

Cannabis in Youth/ Young Adults

- **Cannabis (Cannabinoid) Hyperemesis Syndrome (CHS)**
 - Nausea/Vomiting
 - Abdominal pain
 - Relief with hot bath or shower
 - Related to potency, frequency, and duration of use
 - Up to 1/3 of cannabis related ER visits
 - The vicious cycle “Afrin effect”
 - Multiple case reports of CHS fatalities
 - Electrolyte abnormalities
 - Kidney failure
 - Seizures
 - Heart arrhythmias
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Cannabis in Youth/ Young Adults

- **Failure to graduate** from high school and college, more absences and lower GPA (Arria, *Psychol Addict Behav*, Aug 2015)
 - **5 to 8 point IQ decline** due to a “neurotoxic effect” (Meier, NIH Aug 2012)
 - **500% increase in MIs** and 300% increase in strokes for users under age 50 (*JACC* Mar 2025)
 - **Addiction:** At age 21, > 40% of cannabis “users” (30d) have Cannabis Use Disorder (CUD)
 - CUD correlated with earlier age of onset
 - Higher frequency of use
 - THC potency (Hinckley, May 2024. *American Journal of Psych*)
 - 40 % of Cannabis users use *daily* (≈15-20% of drinkers drink daily)
 - 15 million daily ETOH vs 18 million daily THC (1 million in 1992)
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Cannabis Use Disorder

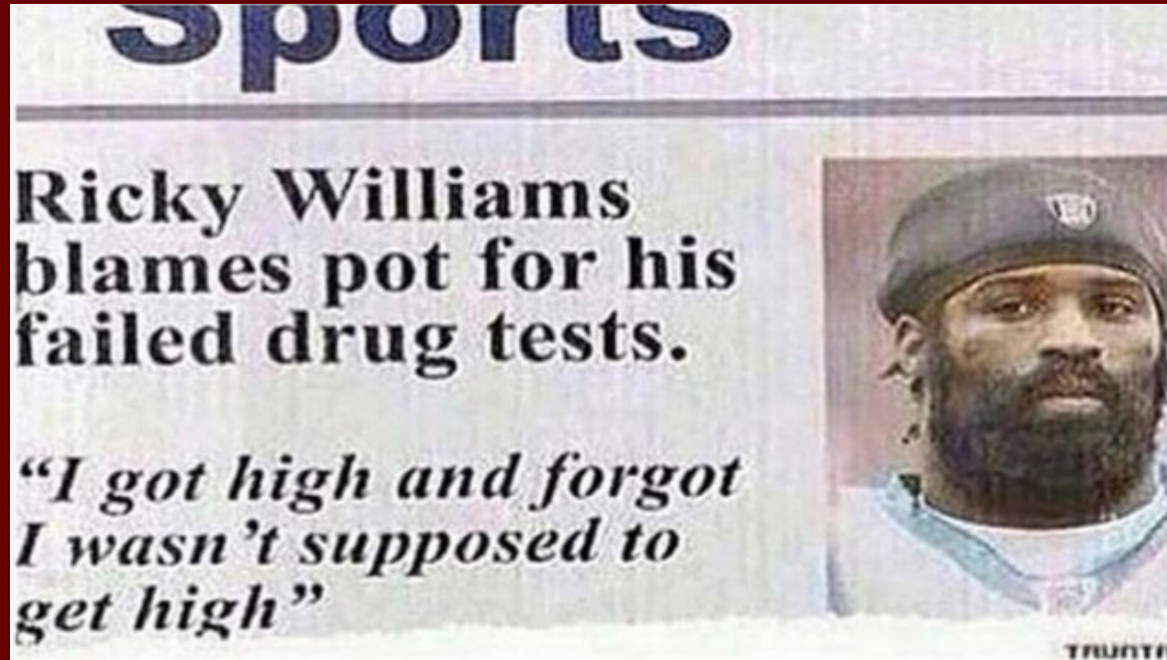
“Use leading to significant impairment or distress”

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|---------------------------------------|---------------------------------------|
| 1. Using more than intended | 7. Giving up normal social activities |
| 2. Unable to reduce use | 8. Using when physically hazardous |
| 3. Time spent obtaining or recovering | 9. Use despite recognizing the harm |
| 4. Craving | 10. Tolerance |
| 5. Failing obligations due to use | 11. Withdrawal |
| 6. Interpersonal problems from use | |

Mild: 2-3, Mod: 4-5, Severe

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Cannabis in Youth/ Young Adults



Cannabis in Youth/ Young Adults

2017 past yr youth
use*

Marijuana 35%

Hallucinogens 5%

Alcohol 82%

2022 past yr youth use

Marijuana 44%

Hallucinogens 8%

Alcohol 84%

*Disinformation
Normalization*

➡ *Legalization*

➡ *Commercialization*

Cannabis in Youth/ Young Adults

- *JAMA Network*, Apr 2025. Legalizing Youth Friendly Cannabis
 - 106,000 Canadian adolescents post legalization
 - 26% increase in total cannabis use
 - 43% increase in edible cannabis use
 - 28% increase in co-use of alcohol with cannabis

Cannabis in Older Adults: Vascular Disease

- *Journal of American Heart Association*, Feb 2024
 - 25% increase in MACE (MI, CHF, cardiac death)
 - 42% increase in Strokes
 - “Cannabis smoke is not all that different from tobacco smoke”
 - BUT the risk was *independent of the method of ingestion*
 - *JAMA Cardiology*, May 2025
 - Measured Flow Mediated Dilation and NO production in 55 non-tobacco users
 - Endothelial dysfunction was significantly worse in smoked *and* edible THC users relative to nonusers.
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Cannabis in Older Adults: Cancers

- Cancers Associated with Marijuana Use:
 - **Head and Neck** Cancers 3 to 5 fold increase risk (JAMA Otolaryngology Aug, 2024)
 - **Lung** Cancer: Nearly all marijuana smokers smoke tobacco
 - *Chest Journal* Sep 2025 150 lung cancer patients: tobacco vs tobacco/cannabis
 - Dual use were younger (53 vs 56, $p = .006$)
 - More aggressive cancers (17 vs 4, $p = .007$)
 - More emphysema (64% vs 38%, $p = .003$)
 - 70 % increased rate of **Testicular** cancer (*Cancer*, Feb 2009)
 - *J Cancer Research and Clinical Oncology* Sep 2023 implicated:
 - **Cervical**
 - **Laryngeal**
 - **Breast**
-

Cannabis in Older Adults: Dementia and Death

- *JAMA Neurology*, April 2025 study of 6 million ED patients for cannabis dx
 - 23% more likely to receive dementia diagnosis in next 5 years relative to age and health matched *ED patients*
 - 72% more likely than age and health matched controls in the *general population*
 - *JAMA Network*, Feb 2025 study of 11.6 million ED patients for CUD dx
 - aHR of 2.79 for 5 year death relative to *matched* controls in *general population*
 - Suicides (aHR 9.7)
 - Trauma (aHR 4.5)
 - Opioid poisoning (aHR 5.0)
 - Other drug poisonings (aHR 4.6)
 - Lung cancer (aHR 3.8)
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Cannabis and Youth/ Young Adults



Salvador Ramos's first victim was his Grandmother who "did not let him smoke weed". *

Devin Patrick Kelley positive for THC and showed clear symptoms of Cannabis Induced Psychosis

THC: 30% of psychotic illnesses in young men**

600% increase in violence for persistent users

CIP, gaslighting, and the "Dead Suspect Loophole"

* NYT 5/26/22 (censored)

** Univ of Copenhagen, 2024

*** Cambridge Study on Delinquent Development, 2016

