

Marijuana and Health

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- In 2011, approximately 4.2 million people met the diagnostic criteria for abuse or dependence on marijuana.¹
- Studies have shown that long-term use of marijuana may be linked with lower IQ (as much as an average 8 point drop) later in life.²
- Marijuana is the second leading substance for which people receive drug treatment in the United States.³
- The average amount of THC (the chemical that causes the high) in seized samples has reached 12.55 percent. This compares to an average of just under 4 percent reported in 1983 and represents more than a tripling of the potency of the drug since that time.⁴
- Among emergency department visits made by patients aged 20 or younger resulting in drug misuse or abuse, marijuana was the most commonly involved illicit drug (143.9 visits per 100,000).⁵
- Babies born to marijuana users tended to weigh less and have smaller heads than other infants, both of which are linked to increased risk of problems with thinking, memory, and behavioral problems in childhood.⁶

- Researchers in Canada reported that "marijuana smoke contains significantly higher levels of toxic compounds – including ammonia and hydrogen cyanide – than tobacco smoke and may therefore pose similar health risks." "Ammonia levels were 20 times higher in the marijuana smoke than in the tobacco smoke, while hydrogen cyanide, nitric oxide and certain aromatic amines occurred at levels 3-5 times higher in the marijuana smoke."⁷
- A study published in the March 2008 Journal of the American Academy of Child and Adolescent Psychiatry cited the harm of smoking marijuana during pregnancy. The study found a significant relationship between marijuana exposure and child intelligence. Researchers concluded that "prenatal marijuana exposure has a significant effect on school-age intellectual development.⁸
- Marijuana increases heart rate by 20-100 percent shortly after smoking, an effect that can last for up to three hours. In one study, it was estimated that marijuana users have a 4.8-fold increase in the risk of heart attack in the first hour after smoking.⁹

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- 1 Substance Abuse and Mental Health Services Administration. Results from the 2011 National Survey on Drug Use and Health: Summary of National Findings. U.S. Department of Health and Human Services. [September 2012].
- 2 Meier et al., "Adolescent-onset cannabis and neuropsychological health." Proceedings of the National Academy of Sciences. [August 27, 2012].
- 3 Substance Abuse and Mental Health Services Administration. Treatment Episode Data Set (TEDS), Substance Abuse Treatment Admissions by Primary Substance of Abuse, 2010. U.S. Department of Health and Human Services. [2012].
- 4 "Potency Monitoring Program Quarterly Report Number 124, Reporting Period December 16, 2013 March 15, 2014." Mahmoud ElSohly, Director, NIDA Marijuana Project. p.7.
- 5 "Highlights of the 2010 Drug Abuse Warning Network (DAWN) Findings on Drug-Related Emergency Department Visits." The DAWN Report, Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality July 2, 2012. P.4.
- 6 "Pot smoking during pregnancy may stunt fetal growth." January 22, 2010. http://www.reuters.com/article/ id=Ustre60L55L20100122.
- 7 Marijuana Smoke Contains Higher Levels of Certain Toxins Than Tobacco Smoke." Science Daily, December 18, 2007.
- 8 "Prenatal Marijuana Exposure and Intelligence Test Performance at Age 6." Abstract, Journal of the American Academy of Child & Adolescent Psychiatry. 47(3):254-263, March 2008. Goldschmidt, Lidush Ph.D. et al.
- 9 "Marijuana." Drug Facts. NIDA. January 2014. Pp. 2-3. http://www.drugabuse.gov/publications/researchreports/ marijuana-abuse



Contact us for more information on marijuana:

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Drug Free Action Alliance is a statewide, 501(c)(3) non-profit charitable organization founded in 1987. We deliver up-to-date information and develop initiatives that serve the immediate needs of those working to prevent substance abuse throughout the State of Ohio and beyond.

While young people are our primary target population, we also engage in efforts to promote healthy lifestyles for all Ohioans. We form partnerships with businesses, community members, substance abuse prevention professionals, policy makers, law enforcement, school personnel, and, most importantly, parents.