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Public Policy. Engagement. Education.

Date: June 6, 2022

To: Senate Select Committee on Addiction & Community Revitalization

From: David Mahan
Policy Director
Center for Christian Virtue

Re: The Health Risks Associated with Commercialized Marijuana

To Senator Johnson and the esteemed members of the Senate Select Committee on Addiction & Community Revitalization, my name is David Mahan and I am writing on behalf of the Center for Christian Virtue, Ohio's largest Christian public policy organization. With all of the activity around recreational Marijuana and the expansion of our current medical marijuana program, I have spent the past several months meeting with subject matter experts from all across Ohio and Colorado trying to figure out what impact these policies would have on our communities. In so doing, I've formed valuable relationships with drug court judges, law enforcement officers, treatment and recovery professional prevention specialists, doctors, government officials, and one individual who's drug policy expertise has been called upon by 3 U.S. presidents. Their advice to me regarding the commercialization of marijuana can be summed up in one single statement; there are two sides to a P&L- profit and **LOSS**, and ignoring one for the promise of the other will almost certainly prove disastrous for communities.

An analysis by **Attorney General Yost's Scientific Committee on Opioid Prevention and Education found the death rate in Ohio from opioid overdose in the second quarter of 2020 to be "the highest rate in 10 years."** Who do policies like these benefit the most - Ohioans who are already struggling with epidemic rates of addiction, historically high crime, and a mental health crisis, or the marijuana industry that first masquerades as "medical" before revealing its true recreational identity, as we've clearly seen in several other states? While the campaign for recreational use has been stalled until next year, the "Big Marijuana" industry, who is driving the "medical marijuana" program in Ohio as well, is actively marketing



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marijuana as a solution to the opioid epidemic, claiming that marijuana is a safe and effective substitute for opioids for the management of pain. However, the following studies have shown that **marijuana is a significant risk factor in the increased non-medical use of opioids:**

“The opioid crisis appears to be worsening where marijuana has been legalized.” - **JAMA INTERNATIONAL MEDICINE JOURNAL, 2018¹**

Over 30,000 American adults were sampled and researchers found that marijuana users were more than twice as likely to move on to abuse prescription opioids. - **THE AMERICAN JOURNAL OF PSYCHIATRY, 2017²**

“[P]rescription opioids were seen as a wonder drug, especially for pain management.” “We should not repeat history with yet another wonder drug installed before proper evidence.” - **Addiction, 2018³**

Opioid overdose fatalities have increased in Colorado since legalization⁴ - **Colorado Department of Public Health and Environment, 2018**

As much as we like to simply focus on Ohio when considering Ohio policies, it is vital to also look at the recent history of what the marijuana industry has already done in states like Colorado and California? Wellington Webb, Former 12 year, Democrat Mayor of Colorado, and Former supporter of Marijuana Commercialization stated that, “The Money promised for education is going to marijuana regulation and the Pot Industry”. He went on to say that what it actually produced was “a 32% increase in Pot related traffic deaths and more pot dispensaries than Starbucks and McDonalds combined”- and I’m sure it would not surprise you to know that most of those pot shops are located in disadvantaged communities. What policy makers like Mayor Webb and Mayor John Suthers, of

¹ Bleyer, A., & Barnes, B. (2018). Opioid Death Rate Acceleration in Jurisdictions Legalizing Marijuana Use. *JAMA internal medicine*, 178(9), 1280-1281.

² Olfson, M., Wall, M. M., Liu, S. M., & Blanco, C. (2017). Cannabis use and risk of prescription opioid use disorder in the United States. *American Journal of Psychiatry*, 175(1), 47-53.

³ Rehm, J. (2018). Commentary on Liang et al.(2018): The potential impact of medical cannabis on public health with respect to reducing prescription opioid use and associated harm. *Addiction*.

⁴ Colorado Department of Public Health and Environment. (n.d.). Vital Statistics Program. Retrieved November 2, 2018, from <https://www.colorado.gov/pacific/cdphe/vital-statistics-program>



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Colorado Springs (former CO Attorney General) have realized after a decade since legalization, is that the LOSS side of the P&L includes increased traffic fatalities, out-of-control black markets, hiring shortages due to failed drug tests, the exacerbation of the opioid epidemic, and the predatory targeting of children by a well funded, **addiction-for-profit marijuana industry that produces heavy users by hooking early users.** These are just some of the reasons why organizations like the **American Medical Association (AMA), the American Society of Addiction Medicine, AAA, the American Academy of Family Physicians, and the National Fraternal Order of Police all oppose the commercialization of such a dangerous schedule 1 narcotic.**

The truth is, the 2-3% THC, 20th century marijuana that we all like to giggle and joke about hardly even resembles the 35-90% high potency products of today. When people speak of the benefits of marijuana they are typically speaking of the CBD **component** that can be found in the FDA approved drug epidiolex, not the psychosis, intoxication and addiction causing THC component that the industry likes to mix into waxes and enticing edibles such as, candies, sodas, brownies, dabs and cookies. To ignore a decade of the lived experiences of mayors, attorney generals, business owners, healthcare professionals, drug court Judges, law enforcement agencies and Treatment Professionals from legalized states would be utter insanity, and Ohio families deserve more. That said, I would like to invite you all to watch a recording of a webinar CCV hosted for the Ohio General Assembly a couple weeks ago. I assure you that our presenters, **Dr. Kevin Sabet, Former Drug Policy Advisor for President's Obama, Clinton and GW Bush,** and **Dr. Ken Finn, President of the American Board of Pain Medicine,** will help clear-up any confusion you may have regarding marijuana's relationship to the health and safety of the citizens of your community. The webinar and corresponding slides can be found [HERE](http://www.ccv.org/marijuana). (www.ccv.org/marijuana)

Sincerely,

David Mahan

Policy Director

Center for Christian Virtue



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National Institute on Drug Abuse Advancing Addiction Science



Research Report

Cannabis (Marijuana) Research Report Is there a link between marijuana use and psychiatric disorders?

July, 2020

Several studies have linked **marijuana use to increased risk for psychiatric disorders, including psychosis (schizophrenia), depression, anxiety, and substance use disorders**, but whether and to what extent it actually causes these conditions is not always easy to determine. Recent research suggests that **smoking high-potency marijuana every day could increase the chances of developing psychosis by nearly five times** compared to people who have never used marijuana.

Teen **visits to Emergency Departments increase** post legalization **with 71%** for psychiatric events (Colorado, Wang, 2018)

G.S. Wang et al. / Journal of Adolescent Health 63 (2018) 239–241

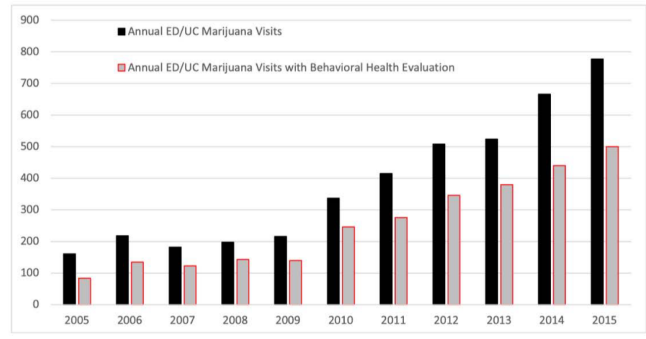


Figure 1. Annual marijuana-related emergency department (ED) and urgent care (UC) visits from a tertiary care children's hospital in Colorado.

In the February 2nd edition of Cleveland.com's Capitol Letter, it was reported that, **“The campaign to legalize recreational marijuana raised \$1.3 million last year. Half of it came from the Marijuana Policy Project, the national advocacy organization behind the push for the legislature to legalize medical marijuana. Laura Hancock reports that the other contributors were mainly medical marijuana businesses in Northeast Ohio.”**