Legalization the Optimistic View

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• What was there before Prohibition
• What Problems were to be solved
• What are the Problems now Solved
• So Cannabis will be legal. What is next?
• Options to deal with new Problems
• Opportunities for a Better Life
Certainly Herodotus was referring to cannabis when he wrote in 5 BC that the Scythians cultivated a plant that grew like flax but grew thicker and taller; this hemp they deposited upon red-hot stones in a close rooms producing a vapor. Herodotus noted, "that no Grecian vapour-bath can surpass. The Scythians, transported by the vapor, shout aloud".

Herodotus also described people living on islands who "meet together in companies" throw cannabis on a fire, then "sit around in a circle; and by inhaling the fruit that has been thrown on, they become intoxicated by the odour, just as the Greeks do by wine; and more fruit is thrown on, the more intoxicated they become, until they rise up and dance and betake themselves to singing." Other passages from Pliny, Marco Polo, Abu Mansur Muwaffaq and The Arabian Nights show that cannabis was cultivated both for its fibre and for its psychoactive properties throughout Asia and the Near East from the earliest known times.
O’ Shaughnessy established his reputation by successfully relieving the pain of rheumatism and stilling the convulsions of an infant with cannabis. He eventually popularized its use back in England. His most famous success came when he quelled the wrenching muscle spasm of tetanus and rabies with resin. While he could not cure tetanus, he did observe that the cannabis mixture reduced their symptoms of spasticity and their suffering.[4] In 1841, he returned to England where he introduced cannabis indica to Western medicine and continued his scientific writings. He was elected a fellow of the Royal Society in 1843
FLUID EXTRACT
CANNABIS, U.S.P.

(AMERICAN CANNABIS)

POISON

FORMULA

PARKE, DAVIS & CO.
DETROIT, MICH., U.S.A.

Specific Medicine
CANNABIS

Unaltered, active, and active.

M.B.C. BROTHERS, CINCINNATI

TINCTURE No. 17
CANNABIS

Pharmacologically tested, contains alcoholic extract.

Lilly
What Problems were to be solved with Prohibition?
Dr. William C. Woodward, legislative counsel of the American Medical Association

I object to the act because it is utterly unsusceptible of execution, and an act that is not susceptible of execution is a bad thing on the statute books.

The sick, along with all other persons, will have to pay through general taxation the cost of enforcing this act, in excess of the taxes collected. Congress should labor under no delusions about the cost of enforcement, if genuine enforcement of the law be attempted. If it is not, the bill will be an idle gesture, an evidence of bad faith on the part of the Government, and had best not be enacted.

It could never undertake to prosecute, and if it did prosecute it would meet with the same difficulty that it met in prosecuting under the National Prohibition Act; the inadequacy of courts and the inadequacy of prosecuting attorneys, and I may say, the inadequacy of jails.
We are told that the use of marihuana causes crime. 

.....An informed inquiry shows that the Bureau of Prisons has no evidence on that point.

You have been told that school children are great users of marihuana ....

Inquiry of the Children's Bureau shows that they have had no occasion to investigate it and know nothing particularly of it.

Inquiry of the Office of Education--- .. they certainly should know something of the prevalence of the habit among the school children of the country--- indicates that they have had no occasion to investigate and know nothing of it.

Moreover, there is in the Treasury Department itself, the Public Health Service, with its Division of Mental Hygiene. The Division of Mental Hygiene ... has control at the present time of the narcotics farms that were created about 1929 or 1930 and came into operation a few years later. ...

Informal inquiry by me indicates that they have had no record of any marihuana of Cannabis addicts who have ever been committed to those farms.
Reefer makes darkies think they're as good as white men

- Harry J. Anslinger
“There are 100,000 total marijuana smokers in the US, and most are Negroes, Hispanics, Filipinos and entertainers. Their Satanic music, jazz and swing, result from marijuana usage. This marijuana causes white women to seek sexual relations with Negroes, entertainers and any others.”

Victor Licata, Tampa, Florida, on October 17, 1933, while under the influence of Marijuana, murdered his Mother, Father, Sister and Two Brothers, WITH AN AXE while they were asleep.
The La Guardia Committee Report: The Marihuana Problem in the City of New York Mayor's Committee on Marihuana, by the New York Academy of Medicine, 1944.

The publicity concerning the catastrophic effects of marihuana smoking in New York City is unfounded.

The Report of the National Commission on Marihuana and Drug Abuse: Marihuana: A Signal of Misunderstanding
Commissioned by President Richard M. Nixon, March, 1972

The Commission recommended decriminalization of simple possession.
The Commission found that the constitutionality of marijuana prohibition was suspect, and that the executive and legislative branches had a responsibility to obey the Constitution.
The Commission also found that "the use of drugs for pleasure or other non-medical purposes is not inherently irresponsible; alcohol is widely used as an acceptable part of social activities."

Considering the range of social concerns in contemporary America, marihuana does not, in our considered judgment, rank very high. We would deemphasize marihuana as a problem.

The existing social and legal policy is out of proportion to the individual and social harm engendered by the use of the drug. To replace it, we have attempted to design a suitable social policy, which we believe is fair, cautious and attuned to the social realities of our time.
You know it's a funny thing, every one of the bastards that are out for legalizing marijuana is Jewish. What the Christ is the matter with the Jews, Bob, what is the matter with them? I suppose it's because most of them are psychiatrists.
Michele Leonhart said she felt the administration didn’t understand the science enough to make those statements. She was particularly frustrated with the fact that, according to her, the White House participated in a softball game with a pro-legalization group. ... But she said her lowest point in 33 years in the DEA was when she learned they’d flown a hemp flag over the Capitol on July 4.
The War on Marijuana in Black and White
ACLU 2013

• Marijuana arrests have increased between 2001 and 2010 and now account for over half (52%) of all drug arrests in the United States

• The report also finds that, on average, a Black person is 3.73 times more likely to be arrested for marijuana possession than a white person, even though Blacks and whites use marijuana at similar rates. Such racial disparities in marijuana possession arrests exist in all regions of the country, in counties large and small, urban and rural, wealthy and poor, and with large and small Black populations. Indeed, in over 96% of counties with more than 30,000 people in which at least 2% of the residents are Black, Blacks are arrested at higher rates than whites for marijuana possession.
States with Largest Racial Disparities in Marijuana Possession Arrest Rates (2010)

- ArrestRatesper100,000
- State Total Black White Times More Likely Blacks Arrested
- Iowa 211 1,454 174 8.34
- D.C. Minnesota Illinois Wisconsin Kentucky Pennsylvania South Dakota Nebraska New York Nevada North Dakota Kansas Alabama

- Vermont 119 514 118 4.35
- Source: FBI/Uniform Crime Reporting Program Data: Arrests by Age, Sex, and Race and U.S. Census Data
With regard to progress toward achieving Strategy goals, ONDCP stated that it is important to analyze trends for each drug category separately and noted that we recognized this in our discussion of ONDCP’s goal to reduce drug use among 12- to 17-year-olds by 15 percent by 2015. As the report states, marijuana accounts for almost 80 percent of drug use in this age group, and the lack of progress on this goal is due primarily to an increase in the rate of reported marijuana use, offset by decreases in the rates of other drug use.
So where is the prohibition achievement:
Suppression of people of color - check
Devotes all research funds to seek harmful effects and impedes research on benefits (UIC)
Kids have easier access to cannabis than alcohol (UIC)
The cannabis distribution network feeds down more dangerous drugs (UIC)
Urine testing drives the development of Spice which causes strokes (UIC)
It is expensive bad public policy: use rates increasing
“I object to the act because it is utterly unsusceptible of execution, and an act that is not susceptible of execution is a bad thing on the statute books.” Dr. William C. Woodward
What are the Problems now Solved
None

So Cannabis will be legal.
What is next?
Since alcohol Prohibition ended there have been 80 years of correcting problems.

The Legislature will try to avoid these.

The Rand Report has offered policy options.
Prohibition <-> Wild West

- Communal own-grow and distribution
- Government operates the supply chain
- Nonprofit organizations
- Very few monitored for-profit licensees
- Allow adults to grow their own
- Retail sales only (Dutch model)
- Public authority (Near monopoly)
- For-benefit companies
Opportunities

• Recreational use
• Treatment of the aches and pains of life without resorting to Benzos (Xanax), antidepressants, nonsteroidals, Nyquill and anger management, CBT ...
Some folk will replace alcohol with cannabis for relaxation

• **CONCLUSION**: The psychological effects of cannabinoids, such as anxiety reduction, sedation, and euphoria can influence their potential therapeutic value. Those effects are potentially undesirable for certain patients and situations, and beneficial for others. In addition, psychological effects can complicate the interpretation of other aspects of the drug effect. (IOM Report 1999)
Medical Marijuana Laws, Traffic Fatalities, and Alcohol Consumption

To date, 16 states have passed medical marijuana laws, yet very little is known about their effects. Using state-level data, we examine the relationship between medical marijuana laws and a variety of outcomes. Legalization of medical marijuana is associated with increased use of marijuana among adults, but not among minors. In addition, legalization is associated with a nearly 9 percent decrease in traffic fatalities, most likely due to its impact on alcohol consumption. Our estimates provide strong evidence that marijuana and alcohol are substitutes.
Objectives. We estimated the association between legalizing medical marijuana and suicides. Methods. We obtained state-level suicide data from the National Vital Statistics System’s Mortality Detail Files for 1990–2007. We used regression analysis to examine the association between medical marijuana legalization and suicides per 100,000 population. Results. After adjustment for economic conditions, state policies, and state-specific linear time trends, the association between legalizing medical marijuana and suicides was not statistically significant at the .05 level. However, legalization was associated with a 10.8% (95% confidence interval [CI]=–17.1%, –3.7%) and 9.4% (95% CI=–16.1%, –2.4%) reduction in the suicide rate of men aged 20 through 29 years and 30 through 39 years, respectively. Estimates for females were less precise and sensitive to model specification. Conclusions. Suicides among men aged 20 through 39 years fell after medical marijuana legalization compared with those in states that did not legalize. The negative relationship between legalization and suicides among young men is consistent with the hypothesis that marijuana can be used to cope with stressful life events. However, this relationship may be explained by alcohol consumption. The mechanism through which legalizing medical marijuana reduces suicides among young men remains a topic for future study. (Am J Public Health. Published online
Objective: Despite an extensive theoretical literature on acute alcohol intoxication likely increasing the odds of aggression between intimate partners, there have been few temporal studies on the relation between alcohol use and increased odds of intimate partner violence (IPV). Moreover, the literature on the temporal relation between marijuana use and IPV is in its infancy. The existing temporal research has yet to examine in the same study the three distinct types of IPV that occur most often between partners: physical, psychological, and sexual. Thus, the present study examined the temporal relationship between acute alcohol use, marijuana use, and male perpetrated physical, psychological, and sexual dating violence. 

Results: On any alcohol use days, heavy alcohol use days (5 or more standard drinks), and as the number of drinks increased on a given day, the odds of physical and sexual aggression perpetration increased. The odds of psychological aggression increased on heavy alcohol use days only. Marijuana use days did not increase the odds of any type of aggression.

Conclusions: These findings contribute to a growing body of research on the temporal relation between acute alcohol use and IPV perpetration among college men. Combined with previous research, our findings suggest that dating violence intervention and prevention programs should target reductions in alcohol use. © 2013 Elsevier Ltd. All rights reserved.
Some folk will find cannabis a great substitute for OTC medicine

- Degenerative Neurological Diseases
- Arthritic disorders, PAIN
- Immune disorders, MS
- Ischemic disorders brain and cardiac, Stroke
- Neoplastic disorders
- Psychiatric disorders, PTSD, ADHD
- Glaucoma, epilepsy, immortality and vapor
Mutually Reinforcing Circles

- Depression
- Anxiety
- Pain
- Addiction
- Sleep
I Need You to End The Drug War