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Medical marijuana

Most people around the world have experienced or read about the use of Marijuana and its effects. To this effect, many claims have been logged about effects of smoking marijuana with some people claiming that the habit has some benefits and others stressing on its harmful effects. Some groups or individuals conceal their individual financial, personal or religious interest in the drug behind clever talk such as the drug's medicinal value with the aim of convincing their governments to legalize it. The legalization of Marijuana is a very contentious issue that has been addressed in many forums ranging from high school and parliamentary debates, court proceedings, activists and some religious affiliations. In my opinion, Marijuana should be banned and if it is to be used for its medicinal purposes, the government should be its sole distributor.

The compromise made in the national war against illegal drugs commenced in 1996, when a group of well funded drug law reformers and activists advocated for the legalization of medical marijuana in the states of Arizona and California. Backed up by the evidence of

the drug's ability to suppress symptoms and the side effects exhibited in sick people, the Clinton administration was able to legalize the use of medical Marijuana in the two states. This move gained the Clinton administration a large popularity winning with a margin of over 56% in California and 65% in Arizona. Overwhelmed by the success of such acts, the Clinton's administration embarked on a game plan that was geared towards avoiding similar efforts by other states and to prevent the move to expand marijuana use to cover other non medical uses. The government's forceful response, gave rise to a tight legal clash in regards to whether it was appropriate to break the drug laws that existed at that time, on grounds that the move would be as a result of medical necessity. According to Gen McCaffrey who was the drug czar at that time, small groups of individuals who had their own interests, were determined to see Marijuana being legalized. The individuals had the necessary finances and the energy to ensure that the drug was legalized.

James E Coople, who was the president of the Community of anti-drug coalitions of America in 1996, made an argument against the legalization efforts by claiming that the remaining 48 states had to be protected from the medical marijuana propaganda that was advocating for retaliatory messages to counter the propaganda.

As the debate on legalizing marijuana exacerbates, there is a great need to educate people on the health disorders that may result from marijuana use. Statistics indicate an increasing potency of disorders among minors in the US as a result of the use of the increased use of Marijuana. According to a psychiatric research done in 2012, marijuana related disorders are a notch higher when compared to previous years especially among groups of

minors. Since 1999, several interviews have been carried out using computer aided techniques and through personal interviews that entailed demographic questions that were related to substance abuse. Out of the 6917 marijuana users that were interviewed, 15% of the respondents were satisfied with the DSM IV criteria of the that was used to investigate the level of drug abuse, 9.6 % of the respondents were found to be dependent on the drug while 24% had a sub-threshold dependence on marijuana. A high rate of abuse was reported among male respondents and among young adults between the ages of 18- 25 years. A 10% prevalence was reported among adults who never completed high school.

Most respondents preferred the use of the dependence criteria more than abuse criteria when data for the research was being collected from them. The abuse group had a higher probability of reporting an A2 i.e. a hazardous use of the drug while 18% reported an A3 which means problems with the law. Nonetheless, 34% of marijuana abusers who were interviewed, endorsed a DI tolerance standing. With regards to the severity of the effects of marijuana use, all respondents who were interviewed, associated with an increased level of marijuana abuse as time went by. There was a high number of respondents who claimed that they started to abuse marijuana at a very young age. Some of the health conditions that were reported during the research included, SUDs, intense psychological distress, poor self related health and severe depression. There was also n increased rate of marijuana usage disorders especially among minors, admissions and the related treatments calls for more intense research on the potential of MUDs profile changes.

Most Americans may be surprised by the idea of legalizing recreational weed smoking but the presence of campaigns and calls to legalize the illegal drugs are slowly gaining root e.g. in California and Arizona, it is clear that many Americans will help deter government initiatives to fight drugs. The new move to legalize pot has unearthed the age old question of whether the drug can act as a medicine. According to DEA agents, the drug is both dangerous and useless. The officers have made a move to the court and are vowing to severely punish doctors who prescribe marijuana to their patients. On the other hand, the proponents of the drug claim that weed assists to control diseases like Glaucoma and AIDS related conditions. The drug also reduces nausea and epileptic symptoms. Marijuana also said to increase the appetite of AIDS victims.

All in all, Marijuana's fundamental mode of action is well known and a few years back, doctors discovered that the human body manufactures a chemical that resembles THC, a main ingredient of cannabis. The brain has specific receptors that trap the THC. These receptors are found in the part of the brain responsible for motor activity, short-term memory and concentration. Anyone who has used the drug can attest to this. Marijuana has the ability to disrupt these activities in the brain.

For many decades now, the federal government has branded marijuana as a schedule drug, a category reserved for substances that have no apparent medicinal value and those that have a high potential of being abused by users. There exists no proven or convincing scientific evidence linking marijuana to some form of medicinal value. The drug cannot be obtained from other prescriptions. As far as glaucoma goes, it is widely known that weed can

reduce pressure within the eye which happens to be the hallmark of Glaucoma. Nonetheless, the drug also reduces the supply of blood to the eye's optic nerve. This is the last thing that a glaucoma patient would want. If marijuana is to solve the eye problem, it would take enormous effort and days of being stoned.

Marijuana may have a good side too. Similar to AIDS related wasting, the nausea caused by cancer chemotherapy has ready prescriptions though the drugs are expensive and they also contain some harmful side effects. This is because marijuana smoke contains carcinogens though they are less toxic than other alternatives. There has been no reported case of a death caused by the drug overdose and hence the patient can tailor its consumption according to his/her needs.

Although marijuana has been praised by many especially those with a special interest in the drug, there is very little evidence that suggests the existence of advantages that can be associated with the use of marijuana. Most advantages derived from the drug can be related to the use prescriptive commercial drugs apart from a few cases where raw marijuana has served a better purpose. Many users have tried to justify their usage on peculiar characteristics such as the negative effects they may face if they stopped using the drug. What they fail to understand is that the drug has a slow but eventual detriments that cannot be reversed. The government should intensify its efforts to curb all forms of marijuana abuse.

Work cited

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