

Addiction docs restate anti-marijuana stance

By Lisa Leff, Associated Press

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SAN FRANCISCO (AP) - A medical society for addiction doctors has reiterated its opposition to marijuana legalization as its California chapter considers voicing its support for allowing and regulating adult use of the drug as a way to prevent its abuse by adolescents.

Directors of the American Society for Addiction Medicine meeting in Washington are scheduled on Sunday to discuss a report from three of its top California members that recommends replacing the state's besieged medical marijuana program with a system that treats and taxes pot like alcohol.

"The best course at this point is to replace the current system of medical marijuana dispensaries and physician recommendations with a more strictly regulated system in which physicians are no longer gatekeepers for access, and fees and taxes from marijuana sales preferentially support education, prevention, and intervention for youth with marijuana-related problems," reads the 15-page California Society for Addiction Medicine report, a copy of which was obtained by The Associated Press.

The provocative report is unlikely to produce any immediate changes in the national group's anti-marijuana stance. Its board on Thursday restated its official position, last approved in 2006, that marijuana should not be legal for medical or recreational use until its health benefits and risks are more fully understood.

"We oppose any changes in law and regulation that would lead to a sudden significant increase in the availability of any dependence-producing drug," the society's board said in a statement. "This policy includes marijuana, a mood-altering drug capable of producing dependence as well as serious negative mental, emotional, behavioral and physical consequences."

The move was not a response to the forthcoming recommendations from its California affiliate, but rather to the California Medical Association's endorsement earlier this month of decriminalizing recreational marijuana use for adults 21 and over, said Stuart Gitlow, acting president of the American Society for Addiction Medicine.

"It's an old policy, but it's obviously timely right now given CMA's newly released policy," Gitlow said. "We had been getting a number of phone calls asking if we had any sort of policy regarding the same subject matter."

Both the American Society for Addiction Medicine and the American Medical Association have urged the federal government in recent years to review marijuana's status as an addictive substance with no medical value so it would be easier for scientists to obtain the drug and conduct studies on its medical efficacy and physiological effects.

But doctors in California, which legalized marijuana use for residents with physician recommendations 15 years ago, have felt the need to go farther due to the proliferation of medical marijuana dispensaries and specialty clinics that some think run counter to their profession's aims.

Earlier this month, the 53 trustees of the California Medical Association approved a new policy that made it the nation's first professional medical society to support making marijuana use legal for adults 21 and over and regulating the drug like alcohol or tobacco.

Donald Lyman, who chaired the nine-member committee that produced the policy, said the call for complete decriminalization was a reluctant, but clear-eyed acknowledgement that the federal government needs to be pressured to promote research on pot's medical potential, and also that the medical underpinnings of California's medical marijuana system are flimsy at best.

"We have become the gatekeepers to a substance that is largely nonmedical and there is no gate," Lyman said. "There is no regulatory structure we can hang our hats on to say, this stuff is helpful for certain conditions and if you are going to inject it into the brownie, you better make sure it doesn't have salmonella. It's the absence of that solid foundation for this activity that really, really troubles us."

Similar assumptions buttress the report from the president and two past presidents of state addiction doctors group. It states that while marijuana already is easy to obtain in California, adolescents are most at risk of developing addictions or other ill effects and that allowing adults to use the drug legally would make it harder for under-age users to access the drug and provide income that could be funneled toward treatment for young people.

"It should be clear by now that it is impossible to stamp out drugs," the report says. "This fact ultimately leads us to confront the inevitable choice: non-medical drug markets can remain in the hands of unregulated profiteers or they can be controlled and regulated by appropriate government authorities."

California Society for Addiction Medicine Timmen Cermak, one of the report's co-authors, said the document was submitted for a vote of the chapter's membership last week, but that it was premature to reveal the outcome given the upcoming presentation at the national meeting.

Gitlow said it would take at least a year and a review by several committees for the national group to consider changing its anti-legalization policy. Under the American Society for Addiction Medicine's bylaws, chapters are prohibited from taking positions that run counter to the national board's, he said.

"The reason it is coming before us for discussion is to see if California intends for it to become one of their policies and if they do, what would have to happen for them to do that," Gitlow said. "At the moment, what would have to happen is ASAM would have to have a policy consistent with that."

Kevin Sabet, a former senior adviser to the president's drug czar and a fellow at the University of Pennsylvania's Center for Substance Abuse Solutions, said relying on hoped-for treatment and research dollars as a rationale for legalization is naive, if not "a hijacking from the legalization movement" of California's medical establishment.

"Last time I checked, anti-binge drinking and anti-drunk driving programs weren't a dime a dozen," Sabet said. "They are not that plentiful because there aren't funds for these types of programs, and these drugs are already legal."