

Medicinal Marijuana

Alyssa Fiebrantz – Washburn University

Significance:

The media as an issue has characterized medicinal marijuana for lazy “stoners” or the disenfranchised youth. The media and the state both have glossed over the long history of medicinal marijuana in other countries and the useful aspects of it in favor of lumping it into the category of “illegal drugs” that have become contraband with almost harsher penalties than murder. This is most often done to secure financial funding by a lobbyist group, or if other wise proposed would threaten a re-election for said statesperson. However, medicinal marijuana has been used by many cultures as a form of medicine. There are studies that argue medicinal marijuana can be used not only as a form of pain medication to make people more comfortable but also as a natural remedy to many ailments. For example, Ancient Indian culture used cannabis (marijuana) as medication during childbirth as well as a cure for migraines. People argue that legalizing medicinal marijuana would revolutionize the drug market. Currently, the health care industry focuses on pharmaceuticals and research as cures or remedies to current illnesses. However advocating for medical marijuana would symbolize a shift from Western medicine into embracing other Eastern medicine especially for the pharmaceutical companies. This is true for a few reasons. First, legalizing medicinal marijuana would mean the government acknowledging the things they have been saying that condemn medicinal marijuana would suddenly become false. In turn the same condemnation that the government uses for other forms of Western medicine would be rendered false as well. But secondly and more importantly medicinal marijuana has been recorded to cure or work better than any other drug with certain ailments including AIDS, Multiple Sclerosis, and Tourettes Syndrome. This would provide incentive to other companies researching other types of Eastern medicine as well. Whether or not medicinal marijuana is allowed would represent a large shift in United States attitude in the “War on Drugs” as well as with pharmaceutical companies. People against medicinal marijuana argue that the shift to Eastern Medicine can actually be more harmful than good. But more importantly the federal allowance of medicinal marijuana would eliminate marijuana as a target for the “War on drugs”, this will significantly affect our Latin American allies who have been severely harmed by the war on drugs, it will also make us appear to be weak on the “War on Drugs” as well. Legalizing medicinal marijuana will require an investigation of not only the medicinal aspects of this legalization but also the other political effects of this action.

Government’s/Proposition’s Proposal

The Government’s proposal is to legalize all marijuana (cannabis) for medicinal purposes. This would most likely entail a method of using licenses or identification cards for people that are given permissions by a licensed medical practitioner to use marijuana for a medical purpose. Similar situations and structures have been imposed in several states, most prominently California. However, the problem with state legalized marijuana is individuals are still subject to federal jurisdiction and while they may not face state penalties they are still prosecuted to the full extent of the federal law. This is why there has been a call for legalization of marijuana federally to get rid of the question of whether or not this is a state or federal issue. The affirmative case argues that it is good to legalize marijuana for two reasons. The first is simply the medical value of marijuana. This would significantly outweigh any potential freeze on research and development that would occur from the shift to medicinal marijuana from mainstream drugs. Medicinal marijuana has been known to work more effectively than drugs like AZT to stall the onset of AIDS in HIV positive patients. It also works better than steroids in patients with multiple sclerosis. The last example is medicinal marijuana prevents neurons from misfiring in children with Tourettes Syndrome this is proven more affective then the generic drugs that are given today to children with Tourettes. What is also interesting about children with Tourettes is that they are not affected by marijuana like other people are the “high” that other people get do not affect children with Tourettes. This is particularly interesting considering gateway drug arguments that are most often made to the legalization of marijuana. That is your first advantage. Your second advantage is discussing the concept of Eastern vs. Western medicine. Currently the American Medical Community focuses on synthetic remedies or cures for illnesses. For instance, doctors instead of prescribing a tea to open up your lungs will prescribe Prednisone to dilate your

bronchial tubes. Or instead of prescribing herbs or vitamins to fix an infection doctors prescribe antibiotics. This is problematic for two reasons. The first is that the constant prescription of antibiotics when herbs or something that is not habit forming and does not allow your body to build up a resistance to. This has increasingly become a problem in the past century especially. After the development of penicillin as an effective antibiotic the over-prescription of drugs have reached an exorbitant high. Doctors often prescribe antibiotics when simple rest and taking care of your body is all that is needed. When this is done on a national level the strains that actually require antibiotics are being found to become increasingly resistant to common antibiotics and stronger and stronger antibiotics are needed. This is especially scary to the medical community considering we are due for a pandemic in the near future. The other problem with a constant fascination with only Western medicine is it precludes other forms i.e. Eastern forms of medicine such as medicinal marijuana. Your argument is that legalizing medicinal marijuana will be perceived as a shift away from western medicine being the ONLY form of medicine and instead accepting alternative forms of medicine. This acceptance of alternative forms of medicine will help prevent or decrease the antibiotic problem from above but also allow different cures for things as well. For instance, other herbs that are able to make similar remedies for other types of diseases or ailments may not only become more mainstream but more widely accepted as well. These benefits of medicinal marijuana far outweigh the negative implications that could potentially come from it.

Leader of Opposition

Your case is defending the current system that does not allow medicinal marijuana in any instance. You have four key arguments as to why this is the case. The first is that medicinal marijuana is a gate way drug. There are numerous studies with rats as well as people that show an individual is more likely to enjoy or want to use a different drug more often after trying it once if they have smoked marijuana even just once. While some of the examples of people with that medicinal marijuana is necessary are elderly people or people that are terminally ill. However, the most common instances of medicinal marijuana use is younger people not necessarily for pain management but for other facilities such as multiple sclerosis treatment, or AIDS treatment. While it may not be as much of a fear for an elderly person being subject to other drugs, the probability of a younger individual being offered other illegal substances is significantly higher. After having used medicinal marijuana the propensity for them to become addicted to those drugs is significantly higher. Your second argument is the manner in which the medicinal marijuana is ingested is also problematic. Marijuana has been known to have a higher rate of emphysema as well as carcinogens within medicinal marijuana when smoked. Considering, that marijuana is being given to people with weakened immune systems or that already have cancer. One of the biggest problems with most of the marijuana studies that deem it beneficial do not take into account the other chemicals in marijuana that produce illnesses that do not become detectable for quite some time. The fact of the matter is it makes little sense to give someone with cancer a "medicine" with carcinogens in it. The lack of studies is another argument in the case that the scope of the research for medicinal marijuana is not only short and incomplete but very bias in nature. Your third argument is using medicinal marijuana on a frequent basis ignores the extremely harmful side affects of medicinal marijuana. For instance, using medicinal marijuana and driving a car can lead to a fatal accident when other pharmaceutical that treat the same illnesses do not have those side affects.

Strategy

MG

Your strongest argument is that medicinal marijuana has cures or remedies for ailments that Western medicine is actually making worse rather than better. Your big example is actually AIDS. The common drugs such as AZT that are prescribed to people with AIDS actually are known to suppress the immune system rather than help it. Whereas medicinal marijuana is known to actually help the immune system not suppress it. Statistically it has been found as more affective in actually preventing cancer and tumors than causing them. There are numerous examples of medicinal marijuana being more beneficial than modern western medicine as already stated above, along with many others discussed within the PMC. Your argument is that while there may be negative aspects of legalizing marijuana beyond the scope of the actual medicine that should not be evaluated because it is not a guarantee. You have a guarantee that medicinal marijuana will assist people with certain illnesses and cure others. Your argument is that probability is

West Coast Publishing
ParliFiles
January 2009

more important than magnitude because voting on something that is more probably or guaranteed to happen makes more sense than an obscure disadvantage that takes numerous steps to accomplish. Your second focus of why medicinal marijuana is good is the perceptual shift of the American medical community from solely focusing on synthetic western medication and beginning to accept alternative forms of medication. Considering medicinal marijuana has been traced back to Ancient India and to other cultures in the Middle East to help in things such as childbirth. The reason why this is good is that it will represent a shift in antibiotics being the super drugs and the end all be all for all forms of illnesses. Also, a new acceptance for herbal remedies for illnesses where doctors simply threw antibiotics back, this is a large impact relatively speaking in most of your debate rounds. A change of this perceptual shift would warrant an affirmative ballot because a decrease in the use of antibiotics guarantees an increase in the overall human health and a less chance of diseases mutating into antibiotics resistant strains. The next impact off of this is an increase in tolerance of other viewpoints and aspects of medicine, which is also uniquely good and a reason to warrant the legalization of medicinal marijuana. You are not denying that there may be some problematic aspects of medicinal marijuana but the benefits far outweigh those as described above.

MO

Your strongest argument is two fold. First, regardless of the medicinal benefits of medical marijuana the studies indicating that marijuana is a gateway drug far outweigh that. It does not matter if marijuana allows for people to comfortably live their lives when other drugs are just as successful but do not drastically increase the propensity for that individual to become addicted to a harder drug later on. Your argument is that when medicinal marijuana is given to younger kids with cancer, or Crohn's or something along those lines it may cure or make their life better at that instance. But those achievements are moot when they are dying from a drug over dose, or addicted to harder drugs such as cocaine or heroin. This is medically proven to be true with more extensive testing than the testing that concludes marijuana is a helpful drug. Your second argument is based upon the affirmative argumentation their biggest impacts stems from a new found appreciation for eastern forms of medicine. There is not a cohesive story with this shift; your argument is the pharmaceutical companies will never allow that shift to occur. Considering the reason for the ban on medicinal marijuana is pharmaceutical companies. Lifting that ban will not lessen the hold that pharmaceutical companies have on society, switching to eastern medicine will simply not happen.

Prime Minister Constructive

Plan text: The United States federal government will legalize the use of marijuana for medicinal purposes.

Observation one: Cannabis has tremendous medical value

A. Currently, the use of medical marijuana is only permitted for use on an incredibly limited scale.

There are fourteen states that allow the medicinal use of marijuana: Alaska, California, Colorado, Hawaii, Maine, Maryland, Michigan, Montana, Nevada, New Mexico, Oregon, Rhode Island, Washington, and Vermont. In each and every other state the use of marijuana, even for medical purposes, is strictly forbidden. In fact, the United States Supreme Court has deemed that even in the event of an individual state declaring medical marijuana legal the federal government can still regulate and abolish those state laws.

B. Federal legalization is the only method of mainstreaming the medicinal use of marijuana

The only way for states to coalesce around medical marijuana is for the federal government to make clear that it is not opposed to the practice. Since there is an emerging medical consensus concluding that medical marijuana is productive for many patients, this is the only substantial roadblock to implementation. The American College of Physicians, Aids action, the American Public Health Association, the American Academy of Family Physicians, among a number of cancer charities and research groups support medicinal THC consumption.

C. California proves that the application of THC has vast medical value.

The use of medicinal THC has effectively treated nausea, vomiting, weight loss, lack of appetite, as well as a number of specific diseases and conditions. It's been applied with positive results to depression, arthritis, glaucoma, asthma, as well as treating symptoms of cancer, aids, inflammatory bowel disease, and hepatitis. Its recent use in instances of mental health diseases has also been shown to be fruitful in the cases of post traumatic stress disorder, clinical depression, attention-deficit disorder, attention-deficit hyperactivity disorder, obsessive compulsive disorder, panic disorder, Crohn's disease, bipolar disorder, and even insomnia.

Observation two: Western medicine

A. Opposition to medical marijuana is premised on a prolonged racist refusal to integrate non-Western medical techniques into the system.

Medical marijuana was first used by China, India, and Egypt nearly 4,000 years ago. It first began being integrated into modern medicine immediately after studies at the Medical College of Calcutta. At the time, it was used to treat nausea and pain. It was federally banned in 1937 amid racist stereotypes being propagated by the media that the drug was only popular among Mexican and African immigrants. That negative stereotype has been used to discriminate against people that utilize those drugs as a form of medicine.

B. The acquisition of techniques which have been peripheralized by classist and racist medical norms keeps people alive longer and makes lives better.

A good example of a productive application of Eastern medical techniques is in the treatment of aids. Western medicine treats aids with, among other things, steroids. This actually weakens the immune system of persons infected with a virus which already irreparably weakens the immune system. Eastern medical techniques can accomplish the same thing while actually *strengthening* the immune system. The philosophy of Eastern medicine is that the body doesn't consist of any one "organ" but rather is views the body as one single organ with interconnected inner parts. This philosophy is preferable because it allows us to fully understand the interaction of one medical problem with another.

C. Our system is controlled by a powerful conglomeration of self interest concerned with endlessly prolonging the medical status quo.

The unfortunate reality is that Eastern medicine is systematically excluded from our system because lobbying is conducted by powerful pharmaceutical companies who fear being crowded out if medical integration occurs. The reality is that the integration of Eastern medical norms would make it dramatically easier for consumers to have credible, beneficial treatments. This would dramatically alter the manner in which medical treatment is conducted in a way that is good for consumers and bad for companies who provide endless antibiotics to our problems when there's a more direct and responsive answer to medical ailments which has been tested for thousands of years.

Leader of Opposition Constructive

Observation one: There is strong evidence that marijuana is a gateway drug.

A number of studies have concluded that relatively consistent exposure to THC eventually maximizes the propensity for users to move on to other more powerful and dangerous drugs. A popular 2006 study by Ellgren, Spano, and Hurd concluded that this is the case. The study featured 12 rats, 6 in the control group. After being injected with THC for a number of weeks, the rats were given the opportunity to voluntarily ingest heroin via a lever. The rats having been exposed to THC were 1.5 times more likely to consume heroin.

Observation two: Consumption methods often exacerbate health issues.

Imagine someone with cancer, for whom medicinal marijuana consumption is said to be very helpful for pain. Under what conditions is it deemed reasonable to give them a product which contains carcinogens? There have been studies which have demonstrated that cannabis dramatically increases the risk of different forms of cancer, especially lung cancer.

Observation three: Cannabis consumption represents a serious public danger.

The consumption of marijuana for medicinal purposes still has the same qualities of impaired motor skills. One of the main reasons why marijuana consumption is not legal is a result of the reality that it dramatically alters your conception of reality. Part of the problem is that there are few regulations concerning things like driving under the influence of medicinal marijuana.

Observation four: More studies need to be conducted before medicinal marijuana is put onto the market.

There have been a limited amount of studies conducted on the medicinal value of marijuana as a result of the reality that it's not legal. A huge amount of recent studies have conflicting results, and very little consensus exists on the extent to which the medical value of THC is worth the cost. Until further study is done, it's better to err on the side of caution.

Member of government constructive

Observation one: Marijuana is not a gateway drug, especially in instances of medicinal usage.

The gateway drug hypothesis has been decimated by modern study. It's been concluded that smoking tobacco actually has a higher propensity for promoting the future use of "hard" drugs. Some of the most recent research on the subject indicates that drug "sub cultures" are probably much more influential than cannabis itself. Since medicinal marijuana doesn't require that users interact with dealers who might possess other illegal drugs, the threat of this is eliminated.

Observation two: There are a number of alternative consumption methods which allow the medical benefits to be experienced without medical harms.

As we have already determined, there are a number of productive medical benefits to marijuana consumption. The problems associated with smoking can be minimized and eliminated if a vaporizer is used rather than a "joint." A vaporizer is a device which, rather than heating through combustion, heats marijuana in a controlled manner so that the active ingredients become a "vapor." This vapor is often filtered through cold water, further preventing the ingestion of carcinogens.

Observation three: At the very least, medicinal marijuana is a step in the right direction for the integration of Eastern medicine.

Western medicine is incomplete because it's controlled by power structures which are more concerned with profit margins and market monopolization than reducing human suffering. Integrating medical techniques which are credible methods of alleviating the pain of millions of people is worth the risk of potentially taking away a fraction of the already obscene profits of powerful pharmaceutical companies.

Member of opposition constructive

Observation one: Even if medicinal marijuana can be consumed more safely through alternative consumption methods, that doesn't make it safe.

The reality is that marijuana, even for medical purposes, threatens public safety. There is not a medical professional anywhere on the planet who would disagree with the conclusion that it dramatically impairs judgment and motor skills. All of the things that make it a popular drug also make it a serious danger. Even if we accept, for the sake of argument, that it's not a public threat (which isn't accurate) it's a threat to the smoker. Not enough study has been done concerning the extent to which alternative consumption methods avoid the medical costs associated with smoking.

Observation two: There's no reason to believe that medicinal marijuana triggers cascading integrations of competing medical perspectives.

Even if we accept the faulty premise that Eastern medicine will solve every problem associated with our medical system (which is vastly preferable to any system with largely integrated Eastern medicine) medicinal marijuana has been legalized and made accessible in many states without any fundamental changes to the structure of the industry.

Observation three: The risk of marijuana being a gateway drug outweighs its medical benefits.

There are other methods of dealing with each and every medical issue that marijuana is said to benefit. These things don't typically lead to the usage of things like heroin, ecstasy, or other dangerous "hard" drugs. Many of these drugs can kill you very quickly, as a deadly overdose takes one mishap. It has to be true that a certain number of people begin hard drug use because of the relationship of drug dealers and other norms associated with common marijuana consumption, but that does little to take away from the validity of a multitude of studies which show a biological propensity to move on to more dangerous substances. It makes little sense to deal with the pain of dangerous medical conditions by offering a substance likely to lead to the consumption of more dangerous residual drugs that might kill you much more quickly than the condition you're being treated for in the first place.

West Coast Publishing
ParliFiles
January 2009

Work Cited

Cannabis Vaporizer Combines Efficient Delivery of THC with Effective Suppression of Pyrolytic Compounds By D. Gieringer et.al. *Journal of Cannabis Therapeutics*, Vol. 4(1) 2004, (2)

Chon, Gina. *Medicinal Marijuana. A Dream Up in Smoke?* Human Rights Magazine Fall 1997
<http://www.abanet.org/irr/hr/fall97/marijuan.html>

Dale Gieringer, "Medical Use of Cannabis in California," in Franjo Grotenhermen, M.D. & Ethan Russo, M.D., ed., *Cannabis and Cannabinoids: Pharmacology, Toxicology and Therapeutic Potential*, Haworth Press, 2002

Evaluation of a Vaporizing Device (Volcano) for the Pulmonary Administration of Tetrahydrocannabinol. By A. HAZEKAMP, R. RUHAAK, et.al. *JOURNAL OF PHARMACEUTICAL SCIENCES*, VOL. 95, NO. 6, JUNE 2006

Greenberg, Gary. *Respectable Reefer.* Mother Jones. 2005
http://www.motherjones.com/news/feature/2005/11/Respectable_Reefer-3.html

Mack, Alison ; Joy, Janet (2001). *Marijuana As Medicine.* National Academy Press.

Russo, Ethan; Mathre, Mary Lynn; Byrne, Al; Velin, Robert; Bach, Paul J.; Sanchez-Ramos, Juan; Kirlin, Kristin A (2002). "Chronic Cannabis Use in the Compassionate Investigational New Drug Program: An Examination of Benefits and Adverse Effects of Legal Clinical Cannabis" (PDF). *Journal of Cannabis Therapeutics* (The Haworth Press, Inc.) **2** (1), http://www.medicalcannabis.com/PDF/Chronic_Cannabis.pdf.

Zuardi, A.W; J.A.S. Crippa, J.E.C. Hallak, F.A. Moreira, F.S. Guimarães (2006). "Cannabidiol as an antipsychotic drug" (PDF). *Brazilian Journal of Medical and Biological Research* **39**: 421–429.