



American Academy of Addiction Psychiatry (AAAP)

MEDICAL USE OF MARIJUANA

The American Academy of Addiction Psychiatry endorses the Institute of Medicine (IOM)¹ report supporting the therapeutic value of cannabinoid drugs for pain relief, control of nausea and vomiting and appetite stimulation for debilitating conditions such as AIDS. We are in favor of compassion for the ill and the availability of marijuana for medical purposes based on current evidence. Although we are against State and Federal regulations and laws that would make it difficult for physicians to prescribe marijuana for medical uses, we see a need for significant research to develop better drugs. We also remain against legalization of marijuana, unregulated use of marijuana, or use for conditions other than those specified in the IOM report.

Numerous studies suggest that marijuana smoke poses a significant risk for the development of respiratory diseases, substance abuse and substance dependence. In addition, research suggests that marijuana can lead to hazardous operation of heavy equipment and can complicate psychiatric conditions.

We therefore make the following recommendations:

1. That marijuana undergo clinical trials for FDA drug approval as a class 2 drug
2. That research focus on the potential usefulness of marijuana's isolated components, the cannabinoids, and their synthetic derivatives as well as the development of rapid onset non-smoked cannabinoid delivery systems
3. That the recommended IOM conditions be met prior to short-term use of smoked marijuana (less than 6 months) for patients with debilitating conditions. These conditions are:
 - failure of all approved medications to provide relief has been documented
 - the symptoms can reasonably be expected to be relieved by rapid-onset cannabinoid drugs
 - such treatment is administered under medical supervision in a manner that allows for assessment of treatment effectiveness
 - and there is an oversight strategy comparable to an institutional review board process that could provide guidance within 24 hours of submission by a physician to provide marijuana to a patient for a specified use
4. That caution should be followed in patients with co-morbid psychiatric problems

References: Marijuana and Medicine: Assessing the Science Base, Janet E. Joy, Stanley J. Watson, Jr., and John A. Benson, Jr., *Editors*; Division of Neuroscience and Behavioral Health, Institute of Medicine, National Academy Press, Washington, DC 1999.

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