



Citizen consultation on 'recreational' cannabis

A political choice in obvious conflict with public health

Bi-academic Press Release of the French National Academy of Medicine, and
the French National Academy of Pharmacy

On January 14, 2020, a parliamentary mission was set up to examine the regulation and impact of the various uses of cannabis in terms of its "therapeutic", "well-being" and even "recreational" aspects.

In September 2020, the mission delivered a first report on the medical use of cannabis. A press release of the French National Academy of Pharmacy¹ denounced a procedure that contravened the regulatory, safety and ethical requirements for drugs use due to the absence of an assessment of the risk/benefit ratio that is strictly essential for any candidate for a therapeutic label.

Continuing the investigation of the "wellbeing cannabis" and "recreational cannabis" sections, the same parliamentary mission launched a "citizen consultation" on the recreational use of cannabis via the Internet. The French National Academy of Medicine and National Academy of Pharmacy are surprised that a questionnaire with numerous methodological biases was proposed, leading the users to provide the answers desired by those questioning them.

In addition, this questionnaire deals with questions essentially medical without any prior medical information. It asks citizens to compare the dangerousness of cannabis and its THC (tetrahydrocannabinol) with that of alcohol and tobacco, without taking into account the following elements:

- the recreational use of cannabis is by inhaling smoke most often with tobacco smoke. This disguised encouragement of smoking goes against the objective of reducing the number of avoidable deaths (75 000 a year) through a "zero tobacco" policy, like that adopted by several countries;
- the scientific data² now very solid on the cardiovascular, cerebrovascular, pulmonary, psychiatric and immune toxicities of cannabis, as well as its deleterious effects on the pregnant women and the unborn child;

- the impact of epigenetic modifications³ on the gametes of childbearing age individuals, which are at the origin of epigenetic modifications, sources of neurodevelopmental abnormalities and subsequent addiction;
- adolescent and young adult brain THC vulnerability⁴ (in relation to their brain maturation, which is not yet complete and will not be until around the age of 25);
- the impact on accidents at work and on public roads: drug testing is positive in 23% of subjects involved in a fatal accident; whereas cannabis consumption alone doubles the risk of a fatal accident; this risk is amplified by 30 when alcohol is associated with it⁵.

The aim of a health policy is to inform and prevent the consequences of behavior and consumption. However, prevention and information hardly exist in educational programs at schools or universities: for example, the European Monitoring Centre for Drugs and Drug Addiction, in its 2017 report, blamed France, the leading cannabis user in Europe. In its 2019 report "Legal and illegal drug use among adolescents: an alarming situation requiring early prevention", the National Academy of Medicine made proposals, which to date have remained a dead letter.

It is in this context that this citizen consultation has arisen, whose proposed items are clearly oriented, not towards a public health approach, but towards a control of the illegal cannabis market. This objective is utopian, as shown by the situation in Canada, where the legalization of the recreational use of cannabis has not eliminated the parallel market. It remains dominant, because the offer remains flourishing - and at a lower cost for the user - of cannabis with higher THC concentrations than legally marketed products.

The revenue argument resulting from the taxes collected on the sale of legalized cannabis is a lure: like with tobacco, the health and social expenditure involved will be much higher than the tax revenue. A recent study in the state of Colorado shows that for every dollar collected in tax revenue, the state spends about \$4.50 to deal with the health and social effects attributable to the legalization of cannabis⁶. It should be remembered that in France, taxes on alcohol and tobacco cover only 37% and 40%, respectively, of the cost of care caused by diseases secondary to their consumption⁷

The Academies of Medicine and Pharmacy, which have issued this press release, are calling for a reconsideration of the citizen consultation process set up by the parliamentary mission aimed at changing the regulation of cannabis. They recommend that, before any initiative is taken, all citizens should be objectively informed about the health, medico-social and economic consequences of the

cannabis use. In the light of these elements, they oppose the simplistic and highly biased interpretation that could be made of the current citizens' consultation.

1- Press release of November 24, 2020

2- Diseases linked to cannabis use. Thematic dossier. Presse Med Form, 2020, 1: 258-284 and 355-409.

3- Costentin J. The epigenetic effects of cannabis/tetrahydrocannabinol. Bull Acad Natl Med. 2020, 204: 570-576.

4- Krebs M.-O., Demars F., Frajerman A., Kebir O., Jay T. Cannabis and neurodevelopment. Bull Acad Natl Med. 2020, 204: 561-569.

5- Observatoire national interministériel de la sécurité routière (National Interministerial Road Safety Observatory), Statistics 2019

6- Economic and social costs of legalized marijuana, Centennial Institute, Colorado University, November 2018, 94 pp.

7- Kopp P.A. The social cost of drugs in France. French Observatory for Drugs and Drug Addiction, Bull Acad Natl Med, 2019, 203: 193-200.