



Press Release
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For Immediate Release

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Public Health Professionals Say “No” to Portland Referendum Question on Marijuana Legalization

The Maine Public Health Association (MPHA) announced today its opposition to the City of Portland’s referendum question to legalize marijuana. Passage of this ordinance would allow adults aged 21 and older to possess 2.5 ounces of marijuana or paraphernalia.

“The link between negative public health, safety and financial indicators and the use of marijuana has been well documented” said Tina Pettingill, MPH, Executive Director of MPHA, and “because of this scientific link, MPHA opposes legalizing marijuana and specifically this ordinance.”

MPHA opposes marijuana legalization on the basis of a number of public health facts:

- Marijuana is an addictive substance¹. It is an illicit drug with a high rate of dependence and cause for close to ½ million U.S. emergency room visits in 2011.
- People who drive after using marijuana are twice as likely to be involved in a fatal car crash and more than three times as likely to be responsible for the fatal car crash².
- Research has shown that adolescent brain development continues until the age of 25 and marijuana negatively effects that development.
- Taxation and regulation of other substances, such as alcohol and tobacco, are not enough to counteract the negative safety, financial or social burdens that those substances cause, and we can safely assume that this will be the case for marijuana as well.
- Recent studies have shown a link between frequent marijuana use and the occurrence of testicular cancer³ and lung cancer⁴.

“The Maine Public Health Association opposes policies where there is strong evidence to suggest significant threats to the public’s health and safety,” stated Doug Michael, Board President Elect of the Maine Public Health Association “Marijuana is already decriminalized in Maine. If this addictive and cancer-causing substance becomes legalized, we can expect to see an increase in adverse health outcomes such as automobile fatalities, harm to brain development in young people, lung cancer and emergency room visits.”

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The Maine Public Health Association is dedicated to improving and sustaining the health and well-being of all Maine residents by advocating for polices and environments that promote public health and health equity. Our diverse membership has a common interest in protecting and advancing the health of residents through advocacy, education, research and service.

¹ Anthony, J.; Warner, L.A.; and Kessler, R.C. *Comparative epidemiology of dependence on tobacco, alcohol, controlled substances, and inhalants: Basic findings from the National Comorbidity Survey*. *Exp Clin Psychopharmacol* 2:244–268, 1994.

² Ashbridge, M. & Hayden, JA (2012) Acute Cannabis Consumption and Motor Vehicle Collision Risk: Systematic Review of Observational Studies and Meta-analysis. *British Medical Journal*, 344:e356.

³ Lacson, J., Carroll, J., Tuazon, E., Castelao, E., Bernstein, L., & Cortessis, V. (2012). Population –based case-control study of recreational drug use and testis cancer risk confirms an association between marijuana use and nonseminoma risk. *Cancer*, 118(21) 5374-5383.

⁴ The British Lung Foundation (2012) *The Impact of Cannabis on Your Lungs*. Accessed at: <http://www.blf.org.uk/Files/8ec171b2-9b7e-49d9-b3b1-a07e00f11c05/The-impact-of-cannabis-on-your-lungs---BLF-report-2012.pdf>

MPHA implements the following strategies to achieve its mission: Provide leadership in public health; provide a forum to advance local, state and federal public health issues and policy; promote and assist with public health training and education and recognize model programs and public health leaders in Maine.

MPHA was formed in 1984 and is an affiliate of the American Public Health Association which represents thousands of health professionals' nationally. MPHA's diverse membership includes concerned citizens, students, professionals, businesses, and agencies.

To learn more about MPHA and our members, please visit, www.mainepublichealth.org

Below is additional information from the Maine Substance Abuse and Mental Health Services (SAMHS) and 21 Reasons.

Key Messages from [SAMHS](#):

Marijuana is a harmful drug.

- Today's marijuana is far more potent: The average THC content in marijuana has risen from under 4% in 1983 to more than 10% in 2008.
- Greater marijuana potency means a smaller amount can make someone higher, faster- and perhaps far more intoxicated than they can handle.
- Marijuana users risk exposure to dangerous pesticides which pose a significant risk to human health.

Marijuana use lowers teens' good judgment and self-control.

- Heavy marijuana use is linked to an increased risk of a motor vehicle crashes.
- Nationally, in 2011, 57 % of Emergency Department visits for illicit drug use among 12-24 year olds involved marijuana.
- Using marijuana weekly or more has also been shown to double a teen's risk of depression or anxiety.

Marijuana use damages teen brains and bodies.

- Studies indicate that problems with attention, learning, memory and processing speeds can be associated with heavy marijuana use during adolescence.
- The amount of tar inhaled by marijuana smokers and the level of carbon monoxide absorbed are three to five times greater than from tobacco smoke.
- Marijuana contains more cancer causing chemicals than tobacco. Marijuana smokers inhale deeply and hold the smoke in their lungs longer which may increase their risk for developing lung cancer.
- Recent studies have shown a link between frequent marijuana use and the occurrence of testicular cancer.

Marijuana use keeps teens from doing their best.

- Marijuana use in teens has been linked to lower academic performance and reduced job prospects.
- Heavy marijuana users experience attention and memory problems which last beyond the time when they are high. Studies indicate these problems can worsen with years of regular use.

Teens who use marijuana are at an increased risk for addiction.

- Research has established that marijuana is addictive and that it is three times more likely to lead to dependence among adolescents than adults.
- About 1 in 6 of those who start using marijuana in their teens develops addiction.
- Nationally, in 2011, 872,000 persons reported receiving treatment for marijuana use.

Perception of Harm Information from [21 Reasons](#):

- There is a clear correlation between youth's decreased perception of harm and increased marijuana use. After sweeping changes to Maine's medical marijuana policies in 2009, 52% of Portland students in grades 9-12 believed people risk harming themselves if they smoked marijuana regularly (2011 Maine Integrated Youth Health Survey), a drop from 60% in 2009.
- Maine high school students who think there is little risk from smoking marijuana are 5.3 times as likely to use it. From 2009 and 2011, students in Portland reporting marijuana usage in the past 30 days rose from 24% to 28%; that of those who reported ever having used marijuana rose from 39% to 42%.