# Cannabody

The graphic below illustrates some of the effects that recreational cannabis use has on the human body. Many are present only during the 'high', while others (marked with  $\triangle$ ) continue to persist either permanently or until a sufficient period of abstinence has been observed. The main ingredient in cannabis that causes the high, and many of these side effects, is THC (or tetrahydrocannabinol). Like the amount of alcohol in alcoholic beverages, cannabis can have varying levels of THC. With liberalisation, there is a risk that users consume stronger forms of the drug, which could exacerbate the negative effects.

#### **B**rain

- Judgment compromised (timing; behaviour)
- Impaired concentration and attention
- Can lead to anxiety, fear, panic attacks<sup>4</sup>
- Potential link between increased risk of schizophrenia/psychosis and heavy or long-term use<sup>3</sup> A
- Association with impairment of verbal memory, and cognitive processing  $\underline{\wedge}$

#### Hearing

Audio hallucinations are common

# Eyesight

- Struggle to determine depth/distance
- Distorted reality/hallucinations

Gum disease⁵∆

# **Airways ∧**

Increased airway resistance, inflammation of airways and lung

hyperinflation (when smoked)<sup>4</sup>

#### Cardiovacular

- Increased heart rate
- Fluctuation with small increased risk of heart attacks in older people<sup>4</sup> ▲

# Hyperemesis Syndrome 🛆

Vomiting, nausea and abdominal pain

#### **Reproduction**

Lower sperm count and disruption of menstral cycle<sup>2</sup>

#### **Pregnancy** ▲

Cannabis might affect fetal growth, potentially leading to miscarriage or cognitive deficits in childhood<sup>1,4</sup>

# Medical Use

Cannabis can be used to treat conditions such as stress, anxiety, PTSD, HIV and cancer.<sup>4</sup>

However, more evidence is required to understand the long-term impact of cannabis as a medical drug, including further clinical trials (as with normal drug development).

There is limited evidence showing efficacy of general cannabis use relative to traditional medication. A key argument for the medical use is that overdose is far less likely compared to drugs such as opioids.

Medical treatment based on cannabis can be different to recreational forms. In particular, the active ingredient is often CBD (cannabidiol) and not THC. CBD is non-psychoactive (there is no "high") and is not generally associated with the side-effects listed here.





Fonseca et al, 2013, "The Endocannabinoid System in the Postimplantation Period"
Mari M et al, 2011, "The Manifold Actions of Endocannabinoids on the Female and Male Reproductive Events"
Di Forti, Met al, 2009, "High-potency Cannabis and the Risk of Psychosis", BRJP
NHS, https://www.nhs.uk/live-well/healthy-body/cannabis-the-facts/; accessed Oct 2018
Thomson, WM et al, 2008, "Cannabis Smoking and Periodontal Disease Among Young Adults", JAMA
Patton, GC, 2002, "Cannabis use and mental health in young people: cohort study"