Do You Know...

Street names: marijuana (grass, weed, pot, dope, ganja and others), hashish (hash), hash oil (weed oil, honey oil)

What is it?
Cannabis sativa, also known as the hemp plant, has been cultivated for centuries for industrial and medical use, and for its psychoactive, or mind-altering, effects. Marijuana, hashish and hashish oil all derive from the cannabis plant.

More than 61 chemicals, called cannabinoids, have been identified as specific to the cannabis plant. THC (delta-9-tetrahydrocannabinol) is the main psychoactive cannabinoid, and is most responsible for the “high” associated with marijuana use.

Hemp grown for industrial use has very low levels of THC. Hemp fibres are used to make rope, fabric and paper. Hemp seeds are high in protein and yield an oil with nutritional and industrial value.
Many claims about the medical uses of marijuana have not been scientifically proven; however, some have. In Canada, THC and other pure cannabinoids are available in three prescription medications:

- Marinol (dronabinol) is synthetic THC and Cesamet (nabilone) is another synthetic cannabinoid. Both are prescribed to relieve nausea and vomiting and to stimulate appetite. This can help people who have AIDS or who take drugs used to treat cancer.
- Sativex, the world’s first prescription medicine derived from the cannabis plant, was approved in Canada in 2005 for the relief of pain in multiple sclerosis. Sativex is a combination of THC and cannabidiol.

Where does cannabis come from?
Cannabis is native to tropical and temperate climates, but is cultivated around the world. Modern illegal growing operations use sophisticated methods to produce high-potency marijuana.

People with a medical exemption from Health Canada may grow their own supply or designate someone to grow it for them. Research-grade cannabis is grown by a producer appointed by the federal government.

What does cannabis look like?
Marijuana is the dried flower buds and leaves of the cannabis plant. It ranges in colour from grayish green to greenish brown and may contain seeds and stems. Hashish is the dried, compressed resin of cannabis flowertops. It ranges in colour from brown to black, and is sold in chunks. Hash oil is made by boiling cannabis flowertops or resin in an organic solvent, which produces a sticky reddish-brown or green substance. The THC content of each variety of cannabis varies, although hash is generally more potent than marijuana, and hash oil is usually the most potent form.

Marijuana, hash or hash oil are sometimes mixed with tobacco, and are most often rolled into a cigarette called a joint, or smoked in a pipe. Cannabis is sometimes cooked in foods, such as brownies, or made into a drink.

Who uses cannabis?
Cannabis is the most commonly used illegal drug in Canada (after alcohol use by minors). However, most cannabis use is infrequent and experimental.

A 2009 study reported that 42 per cent of Ontarians over the age of 18 had used cannabis at some point in their life, and 12 per cent had done so in the past year.

Another survey from 2009 found that about 26 per cent of Ontario students in grades 7 to 12 had used marijuana at least once in the previous year. About three per cent reported daily use in the past four weeks. These rates of use were significantly higher among males than females.

How does cannabis make you feel?
How cannabis affects you depends on:

- how much you use
- how often and how long you’ve used it
- whether you smoke it or swallow it
- your mood, expectations and environment
- your age
- whether you have certain pre-existing medical or psychiatric conditions
- whether you’ve taken any alcohol or other drugs (illegal, prescription, over-the-counter or herbal).

When people first try cannabis, they often feel no psychoactive effect. With repeated use, however, these effects are felt.

People can have very different experiences with cannabis. Some may feel relaxed, lively, talkative and giggly, while others feel tense, anxious, fearful and confused. The kind of experience a person has can also vary from one drug-taking episode to another. People who are familiar with the drug learn to stop when they’ve had enough, and have more control of the effects than do people who are new to the drug.
At low doses, cannabis mildly distorts perception and the senses. People who use the drug say that it makes music sound better, colours appear brighter and moments seem longer. They say that it enhances taste, touch and smell and makes them feel more aware of their body. Some enjoy these effects, but others find them uncomfortable.

Smoking larger amounts may intensify some of the desired effects, but is also more likely to produce an unpleasant reaction. Too high a dose may result in feelings of losing control, confusion, agitation, paranoia and panic. Pseudohallucinations (seeing things such as pattern and colour that you know are not real) or true hallucinations (where you lose touch with reality) can occur.

The physical effects of cannabis include red eyes, dry mouth and throat, irritated respiratory system (from smoking) and bronchodilation (expansion of breathing passages). Appetite and heart rate increase, while blood pressure, balance and stability decrease. Cannabis may cause drowsiness or restlessness, depending on the amount taken and individual response to the drug.

How long does the feeling last?
When cannabis is smoked, the effect is almost immediate and may last several hours, depending on how much is taken. When it is swallowed, the effect is felt in about an hour, and lasts longer than when it is smoked. Although the high lasts only a few hours after smoking, THC is stored in fat cells and expelled from the body over a period of days or weeks, depending on the frequency of use and the amount used. This is why drug tests for cannabis use can give a positive result long after the effect of the drug has worn off.

Is cannabis addictive?
It can be.

People who use cannabis regularly can develop psychological and/or mild physical dependence. People with psychological dependence crave the high. The drug becomes overly important to them, they may feel they need it, and if they can’t get it, they feel anxious. Long-term frequent use can lead to physical dependence. People who develop physical dependence may experience a mild withdrawal syndrome if they suddenly stop using cannabis. Symptoms can include irritability, anxiety, upset stomach, loss of appetite, sweating and disturbed sleep. These symptoms generally last for about a week, although sleep problems may continue longer.
What are the long-term effects of using cannabis?
People who use cannabis heavily or regularly, or people with certain medical or psychiatric conditions, risk the following possible long-term effects:

- Cannabis smoke contains tar and other known cancer-causing agents. People who smoke cannabis often hold unfiltered smoke in their lungs for maximum effect. This adds to the risk of cancer.
- Smoking cannabis irritates the respiratory system. Chronic marijuana smoking has been linked to bronchitis.
- The constant intoxication associated with heavy cannabis use often reduces motivation for work and study, although this usually returns when drug use is stopped.
- There is a possible association between heavy regular cannabis use and the onset of schizophrenia. It is not clear, however, whether cannabis use releases latent symptoms of schizophrenia, or whether people use cannabis to help them cope with the symptoms of an emerging psychosis. Evidence suggests that continued cannabis use in people with schizophrenia accentuates psychotic symptoms and worsens the course of the illness.
- Chronic, heavy use of cannabis may impair people’s attention, memory and the ability to process complex information for weeks, months and even years after they have stopped using cannabis.

Cannabis and the law
A first-time conviction for possession of 30 grams or less of marijuana can result in a six-month jail sentence, a $1,000 fine, or both—and a criminal record, which limits employment and travel. Subsequent convictions and possession of larger amounts can result in more severe penalties. A first offence of possession of small amounts of cannabis usually results in a fine or discharge.

In 2007, 47,000 people were arrested for possession of marijuana; this was about half of all drug arrests in Canada for that year. In an ongoing debate lasting many years, various government, health, police, policy and legal groups have suggested that criminal punishment for the possession of cannabis is too severe.

One alternative to current laws is to “decriminalize,” which would reduce the legal penalty for possession of cannabis. Another option is to “regulate,” giving cannabis a legal status similar to alcohol.

New regulations were enacted under Canada’s Controlled Drugs and Substances Act to permit the cultivation of industrial hemp in 1998, and to provide access to marijuana for medical use in 2001.
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