

## 9. What's So Wrong With Getting High?

By Kevin Patrick Baiko, M.D.

For many medical cannabis patients, getting high is a desired part of the treatment. This desire troubles critics both in states which sanction medical cannabis use and in states yet considering to do so. I recently participated in an interview for a North Carolina based radio broadcast exploring the question of whether or not a medical cannabis program is right for Carolina, and not surprisingly one concern raised by my interviewer was that mind-altering effects of cannabis use, namely “the high”, might somehow undermine the legitimacy of the medicine and, by extension, the legitimacy of the true motivations of patients who would choose to medicate with cannabis in a manner imparting psychoactive effects. Implied in this concern is the opinion that getting high is at best a necessary evil side-effect of medical cannabis use, an effect best done away with if ever possible. However, at the risk of the exposing one of the many double standards still circling the cannabis bowl after nearly a century of baseless anti-cannabis propaganda, I must ask: What's so wrong with getting high?

I should say right away that cannabis offers so much more than getting high to the patients who use it. I can testify as a professional witness: this herb is one powerful medicine! I've seen patients with autoimmune disorders successfully prevent their symptoms without the use of harsh anti-inflammatory and immunosuppressant drugs. I've had cancer patients not just treat, but beat their disease without surgery, radiation or chemotherapeutic agents. I've watched sufferers of chronic debilitating pain conditions not only wean off addicting, mind-numbing constipating opiate medications, not only manage their pain, but actually regain function and activity. And the list of success stories attributed to cannabis goes on and on. I never truly loved being a doctor until I started practicing cannabinoid medicine. It blesses so many lives. It treats so many health conditions so well, and it does so with minimal risk. I realize that some people smoke marijuana simply for the high, but I don't see how that fact belittles the healing power of cannabis in any way. The veteran treating his phantom limb pain and post-traumatic stress disorder (PTSD) with cannabis finds relief no less when his stoner neighbors light up for fun. The patient wasting away with acquired immune deficiency syndrome (AIDS) stimulates his appetite no less when his cat gets a little silly on secondary smoke. So, I ask again, what's so wrong with getting high?

Some condemn getting high on religious grounds. While I'm not aware of any of the world's major religious texts specifically condemning cannabis use or its high, I hold the utmost respect for spiritual ascetics who shun the “pleasures” of this world in their efforts to atone with God. I have a much harder time respecting logic which regards a cannabinoid high as sinful while a caffeine buzz or a sugar rush or an alcohol tipsiness as somehow non-sinful. Patients, doctors and onlookers who claim getting high from medical cannabis is somehow immoral, while the psychoactive effects of medications used to treat pain, insomnia, anxiety, depression, etc. are just fine by God, strike me as hypocrites. What about the natural high felt after prolonged exercise, and now attributed to an activated endocannabinoid system? Is physical exercise immoral? Religious morality is often influenced by civil law. The criminalization of cannabis, along with nearly a century of baseless fear-mongering propaganda, has led to widespread condemnation of its use within the ranks of organized religion, at great cost to our collective advancement as an informed, compassionate civilization. Fortunately, the more the general population sees through the politically motivated lies about cannabis, the more spiritually minded folks are opening up to its true virtues as one of Creation's natural healing wonders.

Medical professionals are no less influenced by belief. There is a certain dogma held by many medical researchers and practitioners alike that the ideal medicine treats an illness and/or its symptoms safely

with little to no side effects. Given that most medical side effects are unpleasant and considering that some side-effects can be so pleasant as to be addicting, this seems a reasonable ideal, but what about non-addicting pleasant side effects? I suppose it could be argued that a medicine's enjoyability possibly undermines a truly unbiased scientific assessment as to whether it is treating the symptoms targeted or just helping the patient feel good enough to not care about said symptoms, but upon further consideration, such arguments betray an heartless non-holistic paradigm of medicine which certainly shouldn't apply to a non-addicting substance like cannabis. I want my patients to feel good, to laugh, to relax, to sleep well... You see, I don't just treat symptoms in isolation, I seek to treat the body-mind of each of my patients both as a whole and as part of the whole. That cannabis' 60+ naturally occurring cannabinoids safely treat an almost unbelievable array of symptoms should not overshadow their fundamental supplementation to our general population's characteristically depleted endocannabinoid system, the very system that fine tunes physical and mental homeostasis. On the contrary, this fact helps explain why cannabis treats so many symptoms and disease processes so effectively. Why on earth so many doctors believe they should avoid helping their patients feel good is beyond me, especially if it contributes to medication compliance, a primary reason patients prescribed medications with unpleasant side effects fail to get better. Fortunately, the more research and anecdotal reports that come in confirming the safety and efficacy of medical cannabis, the more doctors on the whole are opening up to its healing potentials, not only as a means to treat specific ailments and symptoms, but even on a more holistic scale. Cannabinoid medicine is transforming the practice of medicine in this country.

Even beyond dogmatic objections to getting high, both “religious” and “scientific”, some view the habit as an avoidance of responsibilities. The stereotype of a middle-age slacker squandering his potential is no less pitiful than that of his teenage counterpart, and to be sure this stereotype accurately describes a small subset of regular users, just as it does a statistically larger subset of “couch potatoes” procrastinating on Facebook or any number of popular brain drains. We all find ways to escape or at least temporarily delay the inevitable, and that's probably not such a bad thing. As the Type-B personality advice for Type-A personalities wisely goes: “1) Don't sweat the small stuff. 2) It's all small stuff.” While cannabis physiologically helps its users “sweat the small stuff” less, a majority of my patients report that cannabis helps them meet their responsibilities at work, at home and at play, not only achieving their non-medicated potential, but actually exceeding it. If the mind-altering properties of cannabis somehow undermine motivation to excel in life in a certain subset of users, I can only conclude that this subset is not inclined to seek my services, as I witness a very different quality in my patients on the whole. My patients consistently praise cannabis for the life restoring properties it provides. It helps them sleep, and this helps their bodies heal naturally, while restoring the body and mind to face the following day's challenges. It not only treats their debilitating symptoms of pain, nausea and the like, it also works at underlying disease mechanisms through its anti-inflammatory, antioxidant and homeostatic influences on the psycho-neuro-immunologic axes. On the whole, patients and their loved ones consistently report that medicating with cannabis helps them accomplish far more with their lives. Rather than being the gateway drug to destructive and addictive lifestyle choices, cannabis has continually impressed me as an herbal gateway to empowering attitudes, abilities, behaviors and healing breakthroughs.

Drugs which lead to addiction, both illicit and prescription, are worthy of concern, if not outright condemnation. It's no surprise that patients voice such concerns and condemnation so much, especially over regularly prescribed opiates (like hydrocodone and oxycodone). They commonly describe opiates as being far more psychoactively debilitating than cannabis at any dose, and they're afraid to get hooked on them. Addiction is a horribly disempowering state, and all the more so when caused by chemicals that can lead to damaging or deadly overdose. Addiction alters judgment, leading to

devastating repercussions to the addict and those nearby, all to relive the original high, or at least avoid anxiety and withdrawal symptoms in its absence. The high that patients experience from cannabis is, to my knowledge, in no way dangerous. No one has ever died or suffered organ damage from cannabis over-dose. It does not cause addiction or physiologic craving to relive the experience like heroin or methamphetamine. It does not “fry” the brain like an egg on a hot skittle, literally or figuratively. If anything, cannabis has been shown to be beneficial to the nervous system. In fact, the U.S. Government holds a patent (U.S. Patent 6630507) for its neuroprotectant and antioxidant properties. Most users generally find the experience pleasant and relaxing. Medical science's technical term for it is “euphoria”, which translates as “feeling good.” Now what's so bad with feeling good?

Granted, not everyone enjoys getting high. Some find it unpleasant. Some don't like feeling out of control. Some get nauseous. Some get paranoid. And some are just afraid of the sensation. If there is any common complaint patients mention about medical cannabis (besides perhaps not having an adequate supply), it is that they wish they could enjoy its medicinal benefits without getting high. Even more common are patients who enjoy the high, but not during the day as it effects them too much to satisfactorily attend to responsibilities at home and especially at work. Like it or not, being high at work is generally frowned upon in our stress-ridden society, and so the majority of working medical cannabis patients abstain from their medicine until night time, when it helps them relax, rest and recover with a clear head the following morning. That so many adopt such a discipline, rather than just getting high all the time, speaks volumes on true motivations of medical cannabis patients on the whole. Their goal is to live more fully. Often that requires not being high.

Fortunately, a variety of ways exist to medicate with cannabis without the high. The most obvious is to use it topically. Cannabinoids are oil soluble, and human skin absorbs oil. Whether applied as a concentrate as “Rick Simpson oil” to skin cancers or applied as an diluted oil infusion over aching arthritic joints, topical cannabis generally fails to dose the central nervous system sufficiently enough to induce mind altering effects, but it can treat local symptoms and lesions. Another clever way to avoid the high is to ingest the cannabis raw, before the non-psychoactive THC-acid degrades into its psychoactive chemical form (THC), a process triggered by drying and heating after harvest. Ingested as freshly harvested leaves and flowers or as a fresh juice, (much like wheat grass juice,) this non-psychoactive form of cannabis enables patients to consume substantially higher and more therapeutic quantities of the other non-psychoactive cannabinoids (most notably CBD & CBD-acid) than tolerated when THC is present in its inhaled and cooked edible forms. Of course, a third option is to use medicine derived from a growing list of cannabis cultivar strains containing insignificant quantities of THC when compared to the other cannabinoids (as exemplified by strains like recently popularized “Charlotte's Web”.) However, while a great many of my patients would be thankful to just have these options, a great many more would describe a decrease in satisfaction with cannabis as a medicine if they were limited to such non-euphoric options.

THC, the cannabinoid with notorious mind-altering effects, has medicinal value too. It stimulates the appetite, relieves pain, muscle spasm and nausea, and plays a synergistic role with its non-mind-altering counterparts, which is to say it potentiates their medicinal effect. Not to be overlooked, the high itself can be therapeutic, especially in the context of physical therapy, because rather than numbing the body-mind as its opiate counterparts do, it seems to refocus body awareness, facilitating therapeutically directed stretching and exercise while the pain is rendered less immobilizing, muscles looser and the mind calmer. It's not uncommon to hear patients describe activities like yoga, Tai Chi, Pilates and even martial arts as making more sense and feeling more body-centered when practiced while high, with such enhancements becoming incorporated into their disciplines even when practiced in a non-high state. Cannabis is truly a mind-body medicine. Its ability to ease such symptoms as

insomnia, anxiety and irritability is regularly reported, especially amongst sufferers of depression, psychosis and PTSD. It is obnoxious for critics who have never experienced nor witnessed such benefits to discount them.

Let it be clear that I am speaking about patients using cannabis as a medicine. As a physician who helps patients go through a process that enables them to medicate with cannabis legally, I only approve those who present valid subjective and/or objective evidence that they are legally qualified by state law. People use cannabis recreationally all the time simply to get high, and it's not too far fetched to assume that some patients apply to participate in the state's medical cannabis program for no other reason than to get high "legally". This is often cited by critics as an abuse of the program, and I don't deny the possibility that some patients might misrepresent themselves to me for this very reason. Naturally, in defense of my own professional reputation, the legitimacy of my patients' needs and the viability of the state medical cannabis program, I cannot condone nor enable such fraudulent behavior. However, to put it in perspective, the drug war, and more specifically the government's systemic terrorization of cannabis users, inflicts far more physical, psychological and economic abuse upon individuals, families and communities than any damage cannabis has ever been shown to cause. For all its faults, Hawaii's medical cannabis program provides a legal safe haven for at least some of the people who benefit from its use, and I'm thankful to be a part of it, despite the double standards attached to it.

The criticism of cannabis for its enjoyability is one double standard most people now reject. The notion that medical cannabis should be avoided when it causes a high is about as ridiculous as the notion that driving in a car should be avoided when it causes enjoyment. Driving is without question far more dangerous than cannabis use, yet many enjoy the experience, at times traveling without practical purpose, merely for the joy of taking a trip in their vehicle. Why do so many condemn the relatively safe source of enjoyment (and healing) medical cannabis can provide while simultaneously accepting far more dangerous sources of nonclinical entertainment? The answer is ignorance. People have been conditioned by decades of false propaganda to believe that getting high generally undermines human and medicinal potential. But what of our potential to feel good in the context of our healing journey? Must therapeutic massages be pleasureless? Must healthy foods be rendered bland for our well-being? Even if the euphoria known as getting high is viewed as a side-effect of medical cannabis use, shouldn't we leave its tolerability to the judgment of the patient experiencing it? While some don't like the sensation of being high, most clearly prefer it to the side-effects, both psychoactive and otherwise, of this herb's pharmaceutical alternatives. A growing number of my patients are sincerely scared of pharmaceutical drugs, both prescription and over-the-counter, knowing full well that such substances are statistically hazardous to one's health. Frankly, I am reassured by this trend as evidenced in patient feedback and in expressions of public opinion the world over. Though a few retarding holdouts remain, we as a species are in the process of collectively realizing how the cannabis plant is far more empowering to human and planetary health than its prohibition. It's high time we reprioritize our concerns.

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