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## Abstract

There is a vigorous debate raging in the medical profession in the use of alternative medicine. One such alternative therapy that is gaining notoriety is the use of marijuana for treating pain for cancer victims and HIV/ AIDS victims. However, the government has been the obstacle on a uniform acceptance of marijuana as an alternative medicine. This paper explores the ethics behind the use of marijuana for medical purposes. The paper makes an argument that denying patients access to this drug is like denying them dignity, respect and right of treatment.

Legalization of marijuana is still a subject of debate even after decades of intense debate. In the United States, marijuana’s first attempt of illegalization was in 1937 when the U. S Congress passed the Marijuana Act. Even though the Marijuana act did not illegalize marijuana, it became dangerous to deal with marijuana as a drug or for medicinal or spiritual purposes. In 1970, U. S. Congress passed the Controlled Substances Act of 1970 that formally elevated marijuana to a schedule 1 narcotic drug, which is illegal for public consumption. Currently, marijuana’s legalization is still debatable (Steshyn, 2010). This paper explores the ethics behind the use of marijuana for medicinal purposes.   
According to the United States Drug Enforcement Agency, (DEA) marijuana is illegal. However, states such as California allow the consumption of marijuana for medicinal or spiritual purposes. Regardless, the consumers of marijuana must seek medical approval from a State approved clinician. Scientifically, marijuana has limited effect compared to other drugs. Indeed scientists have reported that marijuana has medicinal value for some people and can be helpful if used appropriately. For example, in March 1999, scientists from the United States’ Institute of Medicine published a report that revealed that marijuana was an effective pain reliever for patients of cancer especially for chemotherapy. In addition to easing pain, the scientists found marijuana useful for controlling nausea and vomiting. The same report recommended marijuana usage for HIV treatment especially in combating problems arising from multiple sclerosis. Moreover, the scientists revealed that there was no correlation between marijuana consumption to addiction and usage of harder drugs (PA, 2000).   
Opponents of marijuana cite the probable emotional and physical health effects of the drug. Some are against marijuana because of its alleged lasting damage to brain hence inhibiting the person's cognitive skills over time. Other proponents charge behavior alteration such as loss of incentive, paranoia, and obsession as possible reasons against marijuana usage. While the allegations on marijuana’s effect on personality are justifiable, the assumed effect on personality is not inherently because of marijuana. In fact, research reveals that marijuana users who suffer personality change are the ones that started using the drug as minors. This means that marijuana, just like any legalized drug, is not favorable to minors especially in a time when youngsters are undergoing psychological development. According to Dr. Alan J Burdney of University of Vermont, only 10-14 percent of marijuana users have addiction problems and withdrawals. This is comparable to problems associated with nicotine withdrawals (Caroll, 2008 ). If marijuana is to be used for medical purposes, then it beats logic not to use it for medical purposes.   
Other medical researchers have concluded that marijuana usage has the capability of causing in an individual’s life. In some cases, the use of marijuana can increase an already existing problem. These researchers pointed out that marijuana distorts individual’s measurement of vital things in life. For example, marijuana’s usage can lead to symptom of less value to career, education, and family or may lead to lack of financial integrity. Many studies have connected marijuana usage to an exponential increase in absenteeism, increased accidents, and high job turnover (Kirchheimer, 2005). Will be ethical for marijuana to be used under these circumstances if it will have the said effects for its medical users?   
As for physiological health effects, marijuana is associated with the three key complications. These three complains occur in the brain, heart, and lungs. However, many studies dispute this claim. Like cigarette smoking, research has pointed out that use of marijuana can increase the chances of a heart attack in the first hour of usage. Biologically, this is feasible because marijuana smoking increases blood pressure and heart rate. Marijuana also harms the respiratory organs by its effect on the lungs (NIDA).   
The increased debate on marijuana’s effect has insinuated research on marijuana and its effect on health. The results have been as varied as the opinions. A research conducted on the effects of marijuana on the brain defied the myth that marijuana’s usage caused a permanent damage to the brain. The study was done with 15 controlled groups in a period of 3 months to 13 years. In this research, scientists observed marijuana users and non-users to determine if marijuana usage caused brain damage. In the 15 experiments carried out, none of them proved that marijuana usage caused brain damage. Many other studies found the same report (Kirchheimer, 2005).   
While some studies concluded that marijuana users suffer from addiction, other studies have proved otherwise. Proponents of marijuana usage argue that any substance can be addictive if used incorrectly. Moreover, marijuana users suffer from limited withdrawal symptoms compared to drugs such as cocaine, alcohol, and tobacco. According to NIDA, marijuana’s withdrawal begins after average of one-day abstinence and peaks two or three weeks.   
Even with the findings accruing from scientific researches on marijuana, a consensus has not been arrived in the United States. Based on the research, one can conclusively argue that while marijuana’s usage is controversial, its effect in the society is highly exaggerated and without quantitative and scientific evidence. One can be correct to argue that illegalization of marijuana in the United States is a question of moral values not scientific proof. It is necessary to examine ethics behind marijuana usage, not from scientific analysis, but from the United States’ traditional values on morality. (Caroll, 2008).   
Even though the American public remains polarized about legalizing marijuana as a luxury drug, the populace has a favorable view of legalization of marijuana on medical grounds. In October 2009, Gallop Poll reported that 44 percent of Americans supported legalization of marijuana in general while 77 percent of Americans supported legalization of marijuana on medical grounds. In the United States, fourteen states have laws that allow the cultivation and consumption or possession of marijuana to relieve pain and suffering. If pending Legislations pass nearly half of the United States would have legalized marijuana for medical purposes. Florida remains one of the states that have refused to legalize marijuana (Steshyn, 2010).   
It is also crucial to look at the effects of illegalization of marijuana in the society. Illegalization of marijuana has led to arrests and detainment of millions of Americans. In 2007, 872, 721 were arrested for possession of marijuana. This was an increase of 5. 2 percent in the previous year (Steshyn, 2010). The treatment of marijuana users and possessors poses the question of ethics on the society. If individuals possessing marijuana are doing so out of personal liberty, then how does this threaten the society? Arresting people for possessing marijuana not only harms the society but also reduces productivity. In addition, it increases government expenditure on prisons and other detention facilities. Funds spent on this venture could be used to provide healthcare for millions of Americans overburdened with excessive health costs.   
Under President George Bush, Federal Drug officials made clear that they would enforce federal laws against doctors who distributed marijuana. The law applied to doctors in states that had legalized marijuana such as California, Illinois, and Nevada. However, the Obama administration has been lenient with marijuana users. Under Obama’s administration, the Federal officials have stated that they will not pursue those cases in states where marijuana is legalized for medical uses. Legislation of marijuana is thus a question of ethics. Personal ethics determine whether individuals can risk personal arrest to offer marijuana for medical reasons or not (Pollock, 2010). After a careful analysis of the relatable scientific data and relating the theory of double effect, there is a need to allow medical practitioners to prescribe marijuana for medical purposes. To deny patients access to this drug is like denying them dignity, respect and right of treatment. However, marijuana’s effect on the society is a subject of debate for another day.

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