WHY WE NEED TO LEGALIZE MEDICAL MARIJUANA

One more potential therapy

BY JACOB MIRMAN, M.D.

I am a primary care internist. I am not a politician, a law enforcement officer or a medical policy expert. Yet I feel I have a valid view that should be considered in the debate over whether to legalize medical marijuana. Although the bill being considered by the Minnesota Legislature this year may need to be adjusted to satisfy all concerns, I hope it eventually passes. Here’s why.

Patients come to me because they need help. I agree to see them and do my best to help them. I get paid for it. The buck stops with me. If I send a patient to a specialist and he or she is unable to help, the patient comes back to me and their medical care is again my responsibility. This is the contract I work under.

When standard approaches do not help the patient, my responsibility as their physician does not end. I have to become creative and look outside of standard practices. I have to continue learning and looking for new methodologies. In our integrative medicine clinic, we have done that and added a number of modalities including homeopathy, acupuncture, supplements, herbs and low-level laser therapy, all of which are done by qualified specialists. This enables us to help many more patients than we could with conventional approaches alone. Yet some people are still not helped. So we have to continue looking.

I see marijuana as one more potential complementary therapy. We can help a vast majority of our patients with other methods, but for some, marijuana may be the only thing that works. Those patients will come to you and say: “Doctor, I don’t know how to put it, but I have to smoke pot to feel better. My specialists have already tried everything else and nothing works.” Then they add, “I know it’s illegal, so don’t put this in the notes, please.”

I’ve had two such cases. One was a patient with end-stage breast cancer and the other a patient with severe MS. I couldn’t help either of them with the modalities we have, nor could their specialists. These patients found their own way to get relief, albeit an illegal one. In cases such as these, the law does not make sense. It interferes with my contract with the patient, and it forces me to do something that I feel is unethical (suggest they stop the sole effective therapy) or potentially illegal (suggest they break the law in order to obtain relief).

Some patients don’t know marijuana might be an effective therapy. I, on the other hand, know about it but can’t suggest it. The law prevents me from treating those patients the best way I know how. You may argue that marijuana can be misused. It can. But so can amphetamines, opioids, benzodiazepines, Tylenol and every other drug we prescribe or patients buy over the counter. Would you deny a patient Tylenol for their headache because some people use it to commit suicide? Sure, it’s an extreme example, but misuse of drugs happens every day.

Prescribing is always a matter of judgment. If we physicians feel a patient may be suicidal, we should be careful about suggesting they take Tylenol. Similarly, if I suspected a patient was asking for marijuana for reasons other than what they claimed, I wouldn’t recommend it. But if in my judgment the benefits outweighed the risks in a particular case, I would want to be able to recommend this treatment—just as I would any other medication.

A few more people will misuse marijuana if it becomes legal and, therefore, more available. Sorry, but this is not my responsibility. My contract is only with my patient.

If law enforcement wants to create more fail-safes for keeping it out of the hands of those who may want it for nonmedical purposes, I’ll be happy. Driving under the influence is illegal, and I’ll tell my patient not to do that, just as I do when I prescribe other mind-altering drugs.

Those who oppose legalization of medical marijuana cite a number of reasons for their argument: not enough research on the effects of smoke inhalation, the side effects, the abuse potential, the theoretical concern about the multitude of alkaloids in the whole plant that we don’t know much about, etc., etc., etc. None of their concerns strike me as any more worrisome than those associated with other treatments we use all the time. Many of our treatments have side effects and the potential for abuse. We deal with those issues, and not by making the treatments illegal.

The law needs to be changed so doctors can do what they do best.

Jacob Mirman is a primary care internist and classical homeopath. He is medical director of Life Medical, an integrative medicine clinic in St. Louis Park.