CHAPTER 1

A CANNABIS ODYSSEY

This is my account of how I, as a young instructor in psychiatry, veered, without realizing it, from my tenure track at Harvard Medical School when I began to study marijuana in 1967. Upset by the growing use of this dangerous drug by young people who were ignoring the government’s warnings about its toxicity, I decided to review the science on which these warnings were based. Much to my surprise, I discovered that I had been brainwashed, as had most other people, by an almost ubiquitous cannabis catechism which was based primarily on fear, not science.

Both because of my fascination with the depth and ubiquity of this misunderstanding as well as my growing interest in the psychopharmacological properties of marijuana, I began to devote a significant fraction of my time to learning more about it, and in 1971 I published a book, *Marihuana Reconsidered*, in which I asserted that marijuana was far less dangerous than either alcohol or tobacco and that there was no psychopharmacological effect of the drug which justified the annual arrest of 300,000 (now almost 900,000) mostly young people in the United States.¹

While this book touched on the subject of the nineteenth-century use of cannabis as a medicine, it was only after my oldest son, who had been stricken by a grave illness in 1967, discovered in 1971 how miraculously useful it was symptomatically to him, that I began to explore the clinical
and scientific evidence of its usefulness as a medicine. In 1993 I published the first edition of *Marijuana, the Forbidden Medicine*, in which I made the claim that marijuana would eventually be recognized as a wonder drug because of its virtual lack of toxicity, its medical versatility, and its potential, once free of the prohibition tariff, to be much less expensive than the conventional drugs it will replace.²

In the meantime, in 1973, I began to use marijuana, and have been doing so for 36 years. I now believe that there are three overlapping categories of marijuana use: recreation, medicine, and personal enhancement. Because most people have at least a glimmer of understanding of its use recreationally and a growing appreciation of its usefulness as a medicine, I will emphasize my personal use and the way it buttressed my belief that it can be used to enhance personal experience and understanding.

Every age has its peculiar folly, and if Charles Mackay, the author of the nineteenth-century classic, *Extraordinary Popular Delusions and the Madness of Crowds*, were alive today, he would surely see “cannabinophobia” as a popular delusion along with the “tulipmania” and “witch hunts” of earlier ages. I believe that we are now at the cusp of this particular popular delusion, which to date has been responsible for the arrest of over 20 million US citizens. I also believe that future historians will look at this epoch and recognize it as another instance of the “madness of crowds.” Millions of marijuana users have already arrived at this understanding, but for some of us enlightenment came later than we would have wished.

In every life there occur seminal events that modify the seemingly established probable trajectory of one’s personal history. For me, there have been four. The first three were, in order of importance, the extraordinary good fortune of meeting the woman I married, the gift of children, and the decision to go to medical school. The fourth was my improbable encounter with cannabis, an event that divided my life into two eras: the before cannabis era, and the cannabis era (my son David refers to these phases of my life as BC and AD for before cannabis and after dope). My cannabis era began to unfold in 1967. As the senior author of a book which would summarize the results of our seven-year study of schizophrenia, I found myself with what I estimated would be two to three relatively free months before my co-authors would finish their chapters. Because I had become concerned that so many young people were using the terribly dangerous drug marijuana, I decided to use the time to review the scientific literature so that I could write a reasonably
objective and scientifically sound paper on the harmfulness of this sub-
stance. Young people were ignoring the warnings of the government, but 
perhaps some would seriously consider a well-documented review of the 
available data. So I began my systematic review of the medical and scien-
tific literature bearing on the toxicity – mental and physical – of mari-
jjuana. It never occurred to me then that there were other dimensions of 
this drug that warranted exploration.

During my initial foray into this literature I discovered, to my astonish-
ment, that I had to seriously question what I believed I knew about can-
nabis. As I began to appreciate that what I thought I understood was 
largely based on myths, old and new, I realized how little my training in 
science and medicine had protected me against this misinformation. 
I had become not just a victim of a disinformation campaign, but because 
I was a physician, one of its agents as well. Believing that I should share 
my skepticism about the established understanding of marijuana, I wrote 
a long paper that was published in the now-defunct *International Journal 
of Psychiatry*; a shorter version was published as the lead article in the 
December 1969 issue of *Scientific American*. In these papers I questioned 
whether the almost ubiquitous belief that marijuana was an exceedingly 
harmful drug was supported by substantial data to be found in the scien-
tific and medical literature. While there was little notice of the paper 
published in the psychiatric journal, there was much interest in the 
*Scientific American* article.

Within a week of the appearance of the article, I received a visit from 
the associate director of the Harvard University Press, who suggested 
that I consider writing a book on marijuana. I found the idea both attrac-
tive and daunting. The subject was worthy of a book-length exposition, 
and I would have a reason to deepen my exploration of this fascinating 
and harmful misunderstanding. And there was another reason, perhaps 
the most compelling of all. The one aspect of my work that interested my 
12-year-old son Danny was my study of marijuana. His illness began in 
July of 1967, just about the time I had decided to learn about the dangers 
of marijuana. He was diagnosed with acute lymphocytic leukemia, and 
his prognosis was, of course, guarded. He was both excited and pleased 
when I told him that I had decided to write a book on marijuana.

A few weeks later I learned that the Board of Syndics of the Harvard 
University Press had rejected the book proposal as too controversial. 
Until that moment I was unaware of the existence of this board, which 
must approve every book published by the press. An image of the 
Rembrandt painting “Syndics of the Cloth Guild” came to mind: a group
of serious-looking, longhaired men sitting around a table, exuding caution and conservatism. I was disappointed but not surprised that they rejected this proposal; it was the first instance of academic resistance to my work in this area. I could have signed on immediately with a trade publisher that offered the prospect of selling more books. But I believed that a conservative, prestigious press would lend more credibility to a book that promised to be quite controversial. The director of the press was undaunted; he believed that he could persuade the Syndics to reverse their decision. And so he did.

It turned out to be a much bigger project than I had anticipated. I found that I had more than the medical and scientific literature to review. Because so much of the misinformation and myths about this drug had their origins in the gaudy writings of the French Romantic literary movement, I felt compelled to examine the works of Théophile Gautier, Charles Baudelaire, and other members of Le Club des Haschischins, as well as those of Bayard Taylor and Fitz Hugh Ludlow. It was fascinating to learn that much of the mythology about cannabis that was being promulgated by the US government had its origins in these writings. It is difficult to imagine that Harry Anslinger (our first drug czar) was directly familiar with these nineteenth-century authors, but clearly some of their hyperbolic descriptions of the cannabis experience, largely products of effusive imagination under the influence of copious amounts of hashish, are echoed almost a century later in the “teachings” of Harry Anslinger.

I had come to understand that marijuana was not addicting in the usual, rather vague understanding of that word, but I certainly got hooked on learning about it. I was fascinated by my growing understanding of how little I actually knew about this drug, and even more so by the many false beliefs I had held with such conviction. It soon dawned on me that I, like most other Americans, had been brainwashed, that I was a part of this madness of the crowd. And the more I learned about cannabis, the more it seemed to be capable of providing experiences which would be worth exploring personally sometime in the future. In the meantime, I felt like an explorer sailing an inaccurately and inadequately mapped ocean. Where earlier cartographers had found many shoals, I found few; where others found barren and dangerous islands, I saw lands that looked increasingly interesting as I drew closer. The clearer the view, the greater the temptation to land and make a direct exploration, but I reminded myself that the point of this trip was to chart the ledges and shoals, not to explore forbidden lands to look for riches. Long before I decided to
land, more than a year after the publication of *Marihuana Reconsidered* in 1971, it had become inescapably clear that while marijuana was not harmless, its harmfulness lay not so much in any inherent psychopharmacological property of the drug but in the social and legal consequences of our firmly held misbeliefs.

After the publication of *Marihuana Reconsidered*, I was often asked about my personal experience with cannabis. Some questioners were skeptical when I replied that I had never used it: “What, you wrote a book about marijuana and you have never experienced it!” The implication was that inexperience would invalidate my claim to expertise. I would defensively respond, “I have written a book on schizophrenia and I have never experienced that.” It was not until some years later that I realized that there was validity to this criticism of my lack of personal experience with cannabis. Especially in the later phases of this research and writing, I had flirted with the idea of trying marijuana, not because I believed at that time that it would inform my work, but because it appeared to be such an interesting experience. I decided against it out of fear that it would compromise my goal of producing as objective a statement as I could. Of course, the further I pursued the subject the more I realized how difficult, if not impossible, it would be to produce a truly neutral and objective statement. But I was not about to add to this difficulty by personally exploring marijuana at this time, even though the temptation to do so became greater as I learned more about it.

I had another reason for postponing personal experience with cannabis. If the book were successful, I expected to be called as an expert witness before legislative committees and in courtrooms. I correctly anticipated that some of my interrogators would want to know whether I had ever used cannabis, and I wanted to be able to deny it so as to preserve at least the appearance of objectivity. In the beginning I did not believe this question unfair. It seemed to me to be no different from other questions about my credentials. But I soon learned that when it was asked, it was almost always put by a legislator, lawyer, judge, or media person who was hostile to the suggestion that cannabis might not be as harmful as he firmly believed. It became increasingly clear that the question was asked, not in the spirit of learning more about the context of my understanding of this drug, but rather in the hope that I would answer affirmatively and that this would discredit my testimony. More than a year after the publication of the book I was testifying before a legislative committee when a senator who had already revealed his hostility asked, “Doctor, have you ever used marijuana?” Perhaps because
I was irritated by the hostility reflected in his previous questions and his sneering tone of voice, I replied, “Senator, I will be glad to answer that question if you will first tell me whether if I answer your question affirmatively, you will consider me a more or less credible witness?” The senator, visibly upset by my response, angrily told me that I was being impertinent and left the hearing room. That was the moment that I decided that the time had come.

Later that week Betsy and I went to a party in Cambridge where we knew that some guests would be smoking marijuana. Ever since a review of Marihuana Reconsidered had appeared on the front page of the New York Times Book Review (under the banner, “The best dope on pot so far”) people had been offering my wife and me marijuana, and we had been politely and often a little apologetically declining it. Those guests who knew of our previously resolute abstemiousness were surprised when we decided to join them. We were cautious, as cannabis-naïve people should be, as we inhaled our first tokes ever. Shortly afterward, my first and only unpleasant cannabis experience began. A lit joint was passed around a small circle and we took turns inhaling big, noisy puffs and holding them in for a few seconds. One by one the others said they had had enough and waved off the passing joint; they were high, or at least claimed to be. I asked Betsy, “Do you feel anything?”

“Nothing!”

“Neither do I.”

We were disappointed. We had been looking forward to this initiation for several years. I had come to expect so much from the experience, from the magical possibilities of this subtly altered state of consciousness – and now nothing! I began to wonder: Was this all there was to it? Was my acceptance of the claims of cannabis aficionados just as naïve as my earlier belief in the propaganda disseminated by the Harry Anslinger truth squad and its descendants? Could it be true that all I had accomplished in over three years of intensive research was to swing the pendulum of my gullibility from one extreme to the other? Soon my disappointment gave way to a palpable level of anxiety. Was it possible that I had spent all this time studying what must be for some people an enormously persuasive placebo? Would not the author of a book that took as a basic premise that marijuana is a real drug be considered fraudulent? I tried to reassure myself. I reminded myself that I had, after all, carefully explained to the reader that many if not most people do not get high the first time they use marijuana.
At that time I believed that the anxiety I experienced that night was generated by a precipitous loss of confidence in my newly arrived-at understanding of cannabis, an unshakable belief that after more than three years of hard work, I had gotten it wrong and as a consequence had misled a lot of people – certainly sufficient grounds for a good dose of anxiety. It was not until much later, both chronologically and in my experience with “stoned thinking,” that I began to question that explanation. It occurred to me only years later while I was smoking cannabis that I might have actually achieved a high that first night, an “anxiety high,” not the kind I had expected. This was certainly not impossible; a small percentage of people who use cannabis for the first time experience some degree of anxiety. There are even a few people who always get anxious when they use marijuana. Among the Rastafarians of Jamaica, these folks are considered slightly deviant, but are understandably excused with the expression, “He don’t have a head for ganja!”

This was not a problem with my head, for a week or so later we smoked cannabis, and again neither Betsy nor I noticed any change in our states of consciousness that would even remotely suggest that we were high. Thankfully, however, I was not the least bit anxious this time – only disappointed again. Finally, on our third attempt, we were able to reach the promised high. Our awareness of having at last crossed the threshold arrived gradually. The first thing I noticed, within a few minutes of smoking, was the music; it was *Sgt. Pepper’s Lonely Hearts Club Band*. This music was not unfamiliar to me, as it was a favorite of my children, who constantly filled the house with the sound of the Beatles, the Grateful Dead, and other popular rock bands of the time. They frequently urged me to get my “head out of classical music and try listening to rock.” It was impossible not to listen to rock when they were growing up, but it was possible for me, as it was for many parents of my generation, not to hear it. On that evening I did “hear” it. It was for me a rhythmic implosion, a fascinating new musical experience! It was the opening of new musical vistas, which I have with the help of my sons continued to explore to this very day. A year later, I related this story to John Lennon and Yoko Ono, with whom I was having dinner. (I was to appear the next day as an expert witness at the Immigration and Naturalization Service hearings that Attorney General John Mitchell had engineered as a way of getting them out of the country on marijuana charges after they became involved in anti-Vietnam War activities.) I told John of this experience and how cannabis appeared to make it possible for me to “hear” his music for the first time in much the same way that Allen Ginsberg reported that he had
“seen” Cézanne for the first time when he purposely smoked cannabis before setting out for the Museum of Modern Art. John was quick to reply that I had experienced only one facet of what marijuana could do for music, that he thought it could be very helpful for composing and making music as well as listening to it.

In my next recollection of that evening, Betsy and I and another couple were standing in the kitchen in a tight circle, each of us in turn taking bites out of a Napoleon. There was much hilarity as each bite forced the viscous material between the layers to move laterally and threaten to drip on the floor. It seemed a riotous way to share a Napoleon. But the most memorable part of the kitchen experience was the taste of the Napoleon. None of us had ever, “in our whole lives,” eaten such an exquisite Napoleon! “Mary, where in the world did you find these Napoleons?” “Oh, I’ve had their Napoleons before and they never tasted like this!” It was gradually dawning on me that something unusual was happening; could it be that we were experiencing our first cannabis high?

We drove home very cautiously. In fact, one of the observations I made on the way home was how comfortable I, an habitual turnpike left-laner, was in the right-hand lane with all those cars zipping past me. It seemed like a very long time before we arrived home. Not that we were in a rush – the ride was very pleasant. Time passed even more slowly between our arrival and our going to bed, but once we did, we knew with certainty that we had finally been able to achieve a marijuana high. And that marked the beginning of the experiential facet of my cannabis era, a development that furthered my education about the many uses of this remarkable drug.

I was 44 years old in 1972 when I experienced this first marijuana high. Because I have found it both so useful and benign I have used it ever since. I have used it as a recreational drug, as a medicine, and as an enhancer of some capacities. Almost everyone knows something of its usefulness as a recreational substance, growing numbers of people are becoming familiar with its medical utility, but only practiced cannabis users appreciate some of the other ways in which it can be useful. It has been so useful to me that I cannot help but wonder how much difference it would have made had I begun to use it at a younger age. Because it has been so helpful in arriving at some important decisions and understandings, it is tempting to think that it might have helped me to avoid some “before cannabis era” bad decisions. In fact, now, when I have an important problem to solve or decision to make, I invariably avail myself of the opportunity to think about it both stoned and straight.
I cannot possibly convey the breadth of things it helps me to appreciate, to think about, to gain new insights into. But I would like to share several not too personal instances. For example, let me tell you about the worst career choice I have ever made; it was my decision to apply to the Boston Psychoanalytic Institute as a candidate for training in psychoanalysis. I began this training, which was enormously costly in both time and money, in 1960, and graduated seven years later. Although I developed considerable skepticism about certain facets of psychoanalytic theory during training, it was not sufficient to dull the enthusiasm with which I began treating patients psychoanalytically in 1967 (coincidentally, the same year I began to study cannabis). It was not until about the mid 1970s that my emerging skepticism about the therapeutic effectiveness of psychoanalysis began to get uncomfortable. This discomfort was catalyzed by cannabis. On those evenings when I smoke marijuana, it provides, among other things, an invitation to review significant ideas, events, and interactions of the day; my work with patients is invariably on that agenda. This cannabis review-of-the-day is almost always self-critical, often harshly so, and the parameters within which the critique occurs are inexplicably enlarged. My psychotherapy patients, patients who sat opposite me and who could share eye contact and free verbal exchange, always appeared to be making better progress than my psychoanalytic patients. I was generally satisfied with my work with the former, and invariably at first impatient and later unhappy with the lack of progress made by patients on the couch. There is little doubt that it was the cumulative effect of these stoned self-critiques that finally, in 1980, compelled me to make the decision not to accept any new psychoanalytic patients. The subsequent decision to resign from the Boston Psychoanalytic Institute was very difficult, a little like deciding to get a divorce after more than a decade of marriage. But I have no doubt that it was the only way I could deal with this growing discomfort and rectify what was now clearly seen as a mistake. Some of my former psychoanalyst colleagues might believe, among other things, that I had merely traded my involvement in what I considered a macro-delusional system for immersion in an inverse micro-version. Such a possibility notwithstanding, I am indebted to cannabis for the help it provided me in achieving the clarity necessary to arrive at this most difficult decision.

Cannabis can also be used as a catalyst to the generation of new ideas. Experienced cannabis users know that under its influence new ideas flow more readily than they do in the straight state. They also understand that some are good and others are bad ideas; sorting them out is best done
while straight. In the absence of an agenda, the ideas are generated randomly or as close or distant associations to conversation, reading, or some perceptual experience. It is sometimes worthwhile to have a stoned go at trying to solve a particular problem. An illustration comes to mind. In 1980, during my tenure as Chairperson of the Scientific Program Committee of the American Psychiatric Association (APA), I “invented” and then edited the first three volumes of the *Annual Review of Psychiatry*, a large book which is still published yearly by the APA. Mindful of how much money this annual publication was earning for the APA, the chief off our sub-department of psychiatry asked me to put my “thinking-cap” on and come up with a way for the Harvard Department of Psychiatry to supplement its shrinking budget. Taking his request seriously, I smoked that night for the express purpose of trying to generate relevant ideas. Within days, at a meeting in the Dean’s office, it was agreed that the idea I arrived at that evening would be pursued – the publication of a monthly mental health letter. The first edition of *The Harvard Mental Health Letter* appeared in July 1984 and it soon achieved considerable success as an esteemed mental health publication and a steady source of income to the Harvard Medical School Department of Psychiatry. Would the idea have come or come as easily in a straight state? Maybe.

All through the seemingly endless heated discourse on cannabis in this country over the last four decades, little has been said or written about its many uses. The overwhelming preponderance of funding, research, writing, political activity, and legislation has been centered on the question of its harmfulness. The 65-year-old debate, which has relatively recently included discussion of its usefulness and safety as a medicine, has never been concerned with its non-medicinal uses; it is always limited to the question of how harmful it is and how a society should deal with the harm it is alleged to cause. It is estimated that 100 million Americans have used cannabis and more than 10 million use it regularly. They use it in the face of risks that range from opprobrium to imprisonment. From the time I began my studies of marijuana, 20 million citizens of this country have been arrested for marijuana offenses. The number of annual marijuana arrests is increasing, and in 2007 over 872,000 people were arrested on marijuana charges, 90 percent of them for possession. Because the government allows confiscation of property in drug cases, many have lost valued possessions ranging from automobiles to homes. Most have to undertake expensive legal defenses and some have served or will serve time in prison. Unless we are prepared to believe that all these people are driven by uncontrollable “Reefer Madness” craving, we
must conclude that they find something in the experience attractive and useful. And yet there is very little open exploration of these uses, with the growing exception of its value as a medicine. Even here, government officials want to mute the discussion out of a fear expressed by the chief of the Public Health Service when in 1992 he discontinued the only legal avenue to medicinal marijuana: “If it is perceived that the Public Health Service is going around giving marijuana to folks, there would be a perception that this stuff can’t be so bad . . . it gives a bad signal.” The government has, until very recently, refused to acknowledge that cannabis has any value, even medicinal, but there are millions of citizens who have discovered through their own experience that it has a large variety of uses they consider valuable and that the health costs are minimal.

This large population of marijuana users is a subculture, one that has been present in this country since the 1960s. Three decades ago it was an open, vocal, active, and articulate culture on and off campus. Today, it is silent and largely hidden because most users, understandably, do not want to stand up and be counted. They have more than the law to fear. Urine testing is now a fact of life in corporate America; a positive test result can lead, at the very least, to a stint in a “drug treatment” program, and at most, to the loss of a job, career destruction, even imprisonment. Users are very mindful of this minefield, and most find ways around it. Even more pervasive and in some ways more pernicious is the stigmatization attached to cannabis use. Young people often experience little of this, at least among their friends. But as they grow older and move into increasingly responsible and visible positions they become much more guarded. Many believe, correctly, that colleagues would regard them as deviant if they knew. This stigmatization is abetted by the media, which have created and perpetuated a stereotyped image of “potheads” as young, hirsute, slovenly dressed ne’er-do-wells or disreputable, irresponsible, and socially marginal hedonists who use marijuana only to hang out and party. One reason for the fierce resistance to marijuana is the fear that it will somehow taint middle-class society with the “pothead” culture.

There is no denying that many, especially young people, use marijuana primarily for “partying and hanging out” in the same way that many more use beer. And most non-users, until they become aware of its medical value, believe that smoking to party and hang out pretty much defines the limits of its usefulness. This stereotype is powerful, and reactions ranging from puzzlement to outrage greet claims that this party drug could be useful as medicine or for any other purposes. People who make claims about its usefulness run the risk of being derided as vestigial
hippies. Under these circumstances it is not surprising that most people who use cannabis do so behind drawn curtains, alone or with others who share some appreciation of its value.

It is unfortunate that those who, from personal experience, are aware of its usefulness are so reluctant to be public about it. I believe it would be good for the country if more people in business, academic, and professional worlds were known to be marijuana users. The government has been able to pursue its policies of persecution and prosecution largely because of the widespread false belief that cannabis smokers are either irresponsible and socially marginal people or adolescents who “experiment,” learn their lesson, and abandon all use of the drug. That lie is unfortunately perpetuated when those who know better remain silent. It’s time to let the truth come out. Just as the gay and lesbian out-of-the-closet movement has done so much to decrease the level of homophobia in this country, when the many people of substance and accomplishment who use cannabis “come out” it will contribute much to the diminution of cannabinophobia.

Not many well-known people are identified as users of cannabis. A few politicians have been outed by their enemies (one went so far as to claim that he did not inhale), and some would-be political appointments have failed because of a history of marijuana use. Occasionally a screen star, musician, or professional athlete is arrested for possession. Aside from Allen Ginsberg, Bill Maher, some popular musicians, and a few notables from the Beat and hippie movements, few people in the public eye have voluntarily acknowledged cannabis use. Except for one well-known scientist, the physicist Richard Feynman, academics have been most cautious. Feynman, by courageously acknowledging his ongoing use of marijuana, won the respect and appreciation of many and the enmity of others. Fear of “coming out” is, of course, not without foundation. As long as the present stereotyped understanding of marijuana use and its effects continues to prevail, anyone who acknowledges using it will risk being taken less seriously from then on. It is thought that potheads could not possibly be considered mature, serious, responsible, and credible. Yet only those who actually use cannabis can teach us how useful it is.

There was a time not so long ago when it was generally assumed that any use of marijuana was “merely recreational.” This was certainly true at the time I wrote Marihuana Reconsidered. The chapter on marijuana as medicine (“The Place of Cannabis and Medicine”) was concerned with past (nineteenth- and early twentieth-century) and potential uses; there was no overt and little covert use of cannabis as a medicine at that time.
Now, there are many thousands of patients who use cannabis medicinally. And as the ranks of these patients grow, so does the number of people who observe for themselves how relatively benign this substance is. Seventy-four percent of Americans presently believe that cannabis should be made available as a medicine; very few people would have held this belief in 1971. Currently, it is generally thought that there are two generic categories of marijuana use: recreational and medical. But in fact many uses do not fit into these categories without stretching their boundaries to the point of distortion; they fall into a third category, one that is more diverse and for that reason difficult to label. It includes such disparate uses as the magnification of pleasure in a host of activities ranging from dining to sex, the increased ability to hear music and see works of art, and the ways in which it appears to catalyze new ideas, insights, and creativity, to name a few. Furthermore, at its edges, which are fuzzy, there is some conflation with both medicine and recreation. Yet, the preponderance of these uses falls into this broad and distinctive third category that I call enhancement. This is the class of uses which is generally the least appreciated or understood by non-cannabis users. It is also the case that some people who use or who have used marijuana may not be aware of some – if not most – of the enhancement possibilities.

One category of cannabis utility that we have studied is its usefulness as a medicine. Because there is not at this time a systematic clinical literature on the medicinal uses of cannabis, James B. Bakalar and I asked patients to share their experiences with cannabis as a medicine for our book, *Marihuana: The Forbidden Medicine*. We supplemented these anecdotal patient accounts with our own clinical experience and what we could glean from the medical literature. Anecdotal evidence is not as persuasive as that from double-blind placebo-controlled studies, the more scientifically sound modern medical approach to the safety and efficacy of new therapeutics. As the results of such studies become available we may be compelled to modify our estimate of the clinical usefulness of cannabis. At this time, however, it is difficult to imagine that future studies will subtract much from the clinical experience-driven perception that cannabis is a remarkably versatile medicine with relatively little toxicity.

It is my intention to roughly follow the same format in the Uses of Marijuana Project (www.marijuana-uses.com). While I will attempt to illuminate the various uses of cannabis through literary accounts and by sharing some of my own experiences, the prime source of what I hope will be a fairly comprehensive understanding of the uses of this versatile
drug will come from contemporary users. Some will identify themselves; others will prefer to remain anonymous for reasons that have already been noted. Either way, I hope to present enough information about the witness to put his or her account into a meaningful context. Unlike medicinal use, which will eventually be fitted with scientific costume, an understanding of those uses which fall into the category of enhancement will probably always be based on anecdotal accounts; it is unlikely that marijuana’s capacity for the enhancement of sexual pleasure, for example, will ever be the subject of a modern scientific (double-blind placebo-controlled) study. However, if this ethnographic method is successful, we should be able to provide a reasonably proximate picture of the varieties and value of cannabis use in contemporary society. And in so doing, we cannabis users can make a significant contribution to the demise of cannabinophobia, one of our age’s most damaging popular delusions.

NOTES

