



MARIJUANA

AAFP Position

The AAFP is dedicated to helping physicians provide quality and individualized care through a variety of treatments that satisfy the needs of their patients. Despite the limited body of research supporting the medical properties of marijuana, a growing number of patients have turned to medical marijuana to treat symptoms associated with conditions like chronic pain or chemotherapy.

The AAFP opposes the recreational use of marijuana. However, the AAFP [supports](#) the decriminalization of possession of marijuana for personal use. The AAFP recognizes the benefits of intervention and treatment for the recreational use of marijuana, in lieu of incarceration, for all individuals, including youth.¹

The AAFP also recognizes that several states have passed laws approving limited recreational use and/or possession of marijuana. Therefore, the AAFP advocates for further research into the overall safety and health effects of recreational use, as well as the effects of those laws on patient and societal health.²

Federal Classification of Marijuana

As a federally classified Schedule I drug, marijuana is in the same category as heroin, LSD, and peyote – drugs with no medical value and a high potential for abuse. By contrast, Schedule II drugs, including cocaine, methamphetamine, and many opioids, also have a high potential for abuse, but have a currently accepted medical use. The categorization of marijuana as a Schedule I drug allows the Drug Enforcement Administration (DEA) to prohibit access to the drug, complicating clinical trial research into the medical use of marijuana. In response, four states (GA, HI, KS, PA) have passed legislation to encourage the federal government to reclassify marijuana to a less stringent category, mirroring bipartisan federal [legislation](#) that would reduce it to a Schedule III drug. In 2022, the House of Representatives passed the [Marijuana Opportunity Reinvestment and Expungement \(MORE\) Act](#), which would have removed marijuana from the federal list of controlled substances. The bill also would have expunged the record of those convicted of marijuana-related offenses and reduced sentences for others.

Legality of Marijuana

Despite the federal government's strict categorization of marijuana as a Schedule I drug with no medical value, 18 states and DC have legalized recreational marijuana for personal use. While the drug remains illegal on the federal level, the Department of Justice under the Obama Administration avoided prosecuting individuals possessing marijuana in states that had legalized it for recreational use. The Trump Administration, however, reversed this directive in a

¹ American Academy of Family Physicians. [Substance abuse and addiction](#)

² American Academy of Family Physicians. [Marijuana possession for personal use](#)



document known as the [Cole Memo](#), and encouraged federal authorities to actively indict and prosecute marijuana possession and distribution, even in states where it had been legalized. In October 2022, [the Biden Administration](#) granted a pardon to all people convicted of simple marijuana possession under federal law. President Biden also urged governors to take similar actions for state offenses of civil possession of marijuana. Lastly, the administration called on the Secretary of Health and Human Services and the Attorney General to initiate the administrative process to review how marijuana is scheduled under federal law.

Marijuana remains fully illegal in four states (ID, WY, SC, KS). All other states have adopted measures that either decriminalize marijuana, legalize medical marijuana, legalize recreational marijuana or some combination thereof. Fourteen states have medical cannabis laws (AZ, DE, IL, MD, MI, MN, MT, NH, OH, PA, RI, SD, UT, VT), and seven of those states have decriminalization laws that have removed jail time for possessing small amounts of marijuana (DE, IL, MD, MA, NH, RI, VT)³. In these states, individuals found in possession of marijuana by state authorities no longer face arrest, jail time, or a mark on their criminal record for the first-time possession of a small amount of the drug. As of February 2022, 37 states along with three territories and the District of Columbia allow the medical use of cannabis products⁴. Additionally [19 states](#), two territories, and the District of Columbia, have taken measures to regulate cannabis for adult non-medical use⁵. South Dakota Circuit Judge Christina Klinger declared [Amendment A](#), which would have legalized adult-use marijuana, to be unconstitutional. The South Dakota Supreme Court upheld this decision by a vote of 4-1. Furthermore, some states have passed legislation allowing individuals convicted of possession, cultivation, or manufacture the chance to clear their record now that more permissive drug laws exist in those states. Both New York and [Virginia](#) included provisions that expunge marijuana convictions in the laws that legalize recreational use.

Medical Marijuana

As of July 2022, 38 states, DC, US territories such as Puerto Rico, Guam, the Northern Mariana Islands, and the US Virgin Islands have legalized marijuana for medical use⁶. Despite limited medical research on the efficacy of marijuana to treat various medical conditions, marijuana has been used to treat pain, chronic conditions such as multiple sclerosis and Alzheimer's disease, and bipolar disorder. More than 60 U.S. and international health organizations, support physicians granting patients legal access to medical marijuana⁷. Because marijuana organizations remain illegal under federal law, physicians and pharmacies are prohibited from writing and filling prescriptions. Instead, physicians "recommend" marijuana to their patients, to be grown by the patient or purchased from a dispensary, to treat one of a limited number of qualifying conditions, which often include cancer, HIV/AIDS, chronic pain, PTSD, seizures, ALS, and other conditions. However, populations such as adolescents, pregnant or nursing mothers,

³ Marijuana Policy Project 1995-2022. State Policy. <https://www.mpp.org/states/>

⁴ State Medical Cannabis Laws. 2022. NCSL. <https://www.ncsl.org/research/health/state-medical-marijuana-laws.aspx>

⁵ Marijuana Policy Project 1995-2022. 2022 Cannabis Policy Reform Legislation. <https://www.mpp.org/states/>

⁶ NORML and The NORML Foundation. Medical Marijuana Laws. <https://norml.org/laws/medical-laws/>

⁷ NORML and The NORML Foundation. Health Organizations Endorsements. <https://norml.org/laws/medical-laws/>



and patients who have a history of psychiatric illnesses and cardiovascular diseases may be vulnerable to the increased risks of using cannabis⁸. Patients should consult with their physician before deciding if using medical marijuana is safe. Given the renewed federal focus on marijuana prosecutions, marijuana patients and physicians can – theoretically – be arrested under federal law for these activities.

While medical marijuana may have value as a treatment, most legislation legalizing medical marijuana does not have the full backing of research because researchers are largely prohibited from studying marijuana's medicinal properties due to its status as a Schedule I drug. Reclassifying marijuana as Schedule II would allow for long-overdue, evidence-based research into the safety and effectiveness of marijuana as a possible safer tool than opioids in managing pain and assisting individuals living with disease.

Medical Marijuana and Opioids

Increasingly, patients and states are turning to marijuana to ameliorate chronic and severe pain. For example, medical marijuana reduces the use of opioids in patients with chronic back pain and osteoarthritis. However, further studies are needed to review how it can affect opioid use for pain management. Most medical marijuana legalization laws already include a provision allowing the state health department to add additional medical conditions as needed, as New York did with opioids. In 2018, New York, Illinois, Pennsylvania, and New Jersey became the first states to explicitly list opioid misuse as a qualifying condition for medical marijuana. Pennsylvania has funded eight state universities to conduct medical marijuana research and its relationship with opioid addiction. According to the New York State Department of Health, marijuana can be an effective opioid substitute to treat severe pain partially because it is much less addictive and removes the threat of fatal overdose present with opioids. A study from *JAMA Internal Medicine* found that access to medical marijuana may lead to a decrease in opioid prescriptions. Unfortunately, due to the small size of these studies, neither the Food and Drug Administration (FDA) nor the DEA recognizes these findings.

Looking Ahead

Despite lack of federal action, states have continued to pursue efforts to decriminalize and legalize both medical and recreational marijuana. There is increased momentum on the federal level to change the status of marijuana. President Biden supports decriminalizing marijuana on the federal level and automatically expunging prior convictions, legalizing medical marijuana, and rescheduling marijuana. Several senators have expressed support for legalizing marijuana for recreational use, citing the disproportionate harm of criminalization on communities of color.

Updated: **December 2022**

⁸ NORML and The NORML Foundation. Recent Medical Marijuana Research. <https://norml.org/laws/medical-laws/>