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I. WHAT IS MARIJUANA, AND WHAT ARE THE EFFECTS OF MARIJUANA ON THE BODY?

MARIJUANA

Marijuana is a form of the *cannabis sativa* plant.^{1,2} The *cannabis sativa* plant contains more than 100 chemical compounds known as cannabinoids.³ The most commonly known cannabinoids are delta-9-tetrahydrocannabinol (THC) and cannabidiol (CBD).⁴

UNDERSTANDING THC, CBD, AND HEMP.

THC is the main cannabinoid that causes the "high" in marijuana. Marijuana with more than 0.3% THC is federally illegal, although it is legal in many states for adult and/or medical use.

CBD, or cannabidiol, is a naturally occurring compound found in the cannabis plant. It's known for its potential therapeutic properties, particularly for pain relief and reducing anxiety, without producing the "high" associated with THC.

Forms of the *cannabis sativa* plant with less than 0.3% THC are known as hemp and are not illegal. Hemp is often used for industrial purposes. Marijuana and hemp both have the cannabinoid CBD.

MARIJUANA'S EFFECT ON MOOD.

When someone consumes marijuana, they may experience mood changes. Many feel euphoria and relaxation, although others may feel energized and more awake. Some people report changes in thoughts and perceptions, including feeling more creative. For many, marijuana increases appetite, which is informally known as "the munchies." Some people may experience feelings of anxiety or paranoia after using marijuana. This depends on the individual's mindset before consuming and the dosage consumed.

DIFFERENT FORMS OF CONSUMPTION: FROM FLOWER TO CONCENTRATES TO CAPSULES.

The most commonly consumed form of marijuana is the **bud or flower**, which is dried from the cannabis plant.⁵ Marijuana is often smoked in joints (rolled like cigarettes), blunts (marijuana-filled cigars), pipes (also called bowls), and water pipes (like bong or hookahs).⁶

Other marijuana products include concentrates like resin (such as hashish and bubble hash) and oils or concentrates (like shatter, wax, crumble, and butane honey oil) that are typically vaped.⁷ Smoking and vaping marijuana products lead to the quickest effects. Because the lungs absorb and pass THC directly into the bloodstream, it quickly enters the brain and body.

Marijuana is also consumed in other forms, such as edibles, capsules, and drinks. Forms of marijuana that are taken orally (i.e., eaten, drunk, swallowed) take longer to work. Because they must pass through the digestive system, effects may not be felt for up to an hour or more.

Tinctures are made by soaking dried cannabis flowers in alcohol. Tinctures are consumed by placing a few drops under the tongue with a dropper, which can lead to the body absorbing them faster and feeling the effects sooner.⁸

SYNTHETIC CANNABINOIDS

Synthetic cannabinoids, also known as K2 or Spice, are lab-made drugs meant to act like THC and other mood-altering cannabinoids. Synthetic cannabinoids are not marijuana. These synthetic drugs are unregulated and untested. They affect the body in different and often unpredictable ways.⁹

While some states have banned certain synthetic cannabinoids, there are many states where these exist in a legal grey area. In those states, they may be sold in gas stations, convenience stores, or online.

Synthetic cannabinoids are made by spraying man-made chemicals onto dried plant material. This can then be smoked or mixed into liquid for vaping. These products are often sold as "herbal incense" or "potpourri" in bright packaging. They might have a label 'not for human consumption' because their effects can be unpredictable and can be harmful.¹⁰ However, these products remain popular with those who want to get high but need to pass drug tests, since they do not show up on many routine urine drug tests.¹¹

HEMP PRODUCTS

Science doesn't differentiate between "hemp" and "cannabis," but the law does. Legally, the key difference between the two is THC content. The term "hemp" is used to mean cannabis that contains 0.3% or less THC. Products made from hemp can be intoxicating and they include various cannabinoids derived from hemp. These cannabinoids can create psychoactive effects like those from regular cannabis.

Delta-8 tetrahydrocannabinol (THC) is popular, but it's just one of many hemp-based compounds. Other intoxicating hemp products include CBD, THC-A, and THC-O.¹² For example, Delta-8 is a cannabinoid found in small amounts in hemp.¹³ It has effects similar to delta-9-tetrahydrocannabinol (THC), but is often less strong.

The legal status of these intoxicating hemp products is complicated. The 2018 Farm Bill made hemp legal across the U.S. This opened the door for more intoxicating hemp products.¹⁴ But only a few states regulate these products. In those states, vendors have to be licensed and products must be accurately labeled.

In most states, hemp products are in a legal gray area. They aren't illegal, but they aren't regulated either. This can cause people to buy products with unknown concentrations or harmful chemicals. Labels and ads for unregulated products might make claims about their effects or medical uses.

However, these claims may not be backed by evidence. These products are especially popular in states where marijuana is not legal for adult or recreational use.

So far as of April 2025, 17 states have banned delta-8-THC, and 7 have put strong restrictions on its sale.¹⁵ Policymakers and communities are trying to regulate these intoxicating substances.

2. ARE THERE ANY MEDICAL USES OF MARIJUANA?

People have used marijuana for medicinal purposes for thousands of years.

Research supports using medical marijuana to treat chronic pain and chemotherapy-related nausea. It also supports the use for muscle stiffness in multiple sclerosis patients.¹⁶ Many people use marijuana to relieve pain and nausea. Its effects can vary for different conditions. Some studies show that marijuana might take the place of traditional pain meds. This includes opioids for many people.¹⁷

Some evidence suggests that marijuana can help improve short-term sleep. This is especially true for those with sleep issues like sleep apnea or fibromyalgia. Limited evidence shows it may help with symptoms of Tourette syndrome, social anxiety disorder, and PTSD. Limited evidence shows that marijuana can boost appetite and reduce weight loss in people with HIV/AIDS. It might also improve recovery after a traumatic brain injury or hemorrhage.¹⁸

As of April 2025, thirty-nine states and the District of Columbia have legalized marijuana for medical purposes.^{19,20} However, marijuana is classified as a Schedule I drug under the Controlled Substances Act. This puts marijuana in the same group as heroin and LSD. Despite both anecdotal and qualitative evidence showing the medical benefits of marijuana, being a Schedule I drug suggests that marijuana has no recognized medical use under federal law. This makes it hard for researchers to explore its benefits and risks. The scheduling of marijuana creates barriers to federal funding, limits access to quality research samples, and restricts large clinical trials. Despite these obstacles, research shows conclusive evidence that marijuana is medically effective for many treatments.

3. HOW LONG DOES MARIJUANA STAY IN THE SYSTEM?

Marijuana's mood-altering effects can last for a few hours. The length depends on the form of product consumed (flower vs. edible), the concentration (low THC vs. high THC), and how it was consumed (smoked vs. eaten).

Marijuana can stay in the body for days, weeks, or months. This means a person might test positive for marijuana long after using it. How long it stays depends on several factors, including how often someone uses it, their metabolism, how they consume it, and their body fat percentage.²¹

For people who use marijuana often, more THC builds up in the body because it can only be broken down at a certain rate. Occasional users might have marijuana in their system for 1 to 3 days. Moderate users, who use it about three times a week, can test positive for up to 5 to 7 days. Daily users may show traces for up to 14 days. Heavy users might have it in their system for 14 to 90 days.²²

Different drug tests can detect marijuana metabolites for different lengths of time. A blood test can detect for up to 12 hours, and a saliva test for up to 34 hours. A urine test can detect for up to 30 days (depending on use and other factors), and a hair test for up to 90 days.²³

The presence of marijuana in someone's system doesn't mean they are high or impaired. Marijuana stays in the body long after its effects fade. This is different from blood alcohol content (BAC), which shows real-time intoxication levels. Current drug tests can only determine if someone has used marijuana at one point in the past, not if someone is currently under the influence. This difference is important because legal measures based on drug tests can unfairly impact people who aren't impaired. Policies that focus only on these tests, without looking at how often they're used, how substances are consumed, or the risk of impairment, can lead to unnecessary job loss and legal issues.

4. WHAT HAPPENS IF YOU MIX MARIJUANA WITH OTHER DRUGS?

Mixing means using marijuana with other substances to change or enhance the experience. This can include alcohol, prescription drugs, stimulants, or opioids.

- Mixing marijuana and alcohol can make the effects of both stronger. This can cause dizziness, poor coordination, and vomiting.
- Using marijuana with prescription drugs, such as sedatives or anti-anxiety meds, can alter how those medicines work. It may also boost side effects, like making you feel drowsy.
- Mixing marijuana with stimulants like cocaine or methamphetamine can lead to anxiety, paranoia, or confusion.
- Some people may use marijuana in combination with prescription or street opioids for pain relief, but this can be risky. High doses of opioids (like heroin or fentanyl) can slow down breathing and increase the risk of overdose.²⁴ (Stories of fentanyl-adulterated marijuana have not yet been confirmed with forensic testing. Smoking marijuana with a direct flame would destroy fentanyl. Consuming marijuana from a licensed dispensary reduces the risk of any contaminants or adulterants in the product.²⁵)

Lacing occurs when other drugs or chemicals are added to marijuana. This can happen with or without the user knowing. It can include drugs like PCP, heroin, cocaine, methamphetamine, and LSD. When marijuana is laced with other drugs, it can increase the risk of adverse effects. Fentanyl is more likely to be found mixed with drugs like heroin and pills. However, it rarely appears in marijuana. This is because fentanyl doesn't mix well with it, and smoking would destroy the fentanyl.

5. CAN YOU OVERDOSE ON MARIJUANA?

Like with all substances, it is possible to consume too much marijuana.

When someone consumes too much marijuana, some people may call it an “overdose.” Remember: not all overdoses are fatal, but non-fatal overdoses can have lasting health effects.

While it's unclear whether a person can die from a marijuana overdose, using too much—especially high-THC products—can cause stronger or unwanted side effects. These may include extreme confusion, paranoia, hallucinations, panic attacks, severe nausea, vomiting, and a fast heart rate.²⁶ This is why it's important to go slow if consuming edibles or high potency products. Often the drug effects may be delayed and/or they can last for a long time. It is also safer to avoid taking marijuana along with other drugs because it can lead to more uncomfortable or harmful effects. Check product labels for dosing information.

It is important to store all marijuana products in locked, secure containers and away from children, teens, and pets.

Some people who use high-THC marijuana products heavily may get a condition called cannabinoid hyperemesis syndrome (CHS). CHS causes uncontrollable nausea, vomiting, and stomach pain. It's tough to know how common CHS is. Some people don't tell their doctors they use marijuana for fear of punishment. Also, not everyone seeks medical help when they have symptoms.

The prevalence of CHS may be increasing, but it is unclear. Legalization may have reduced the stigma around marijuana. This could lead to more people seeking help. They might also feel safer reporting their marijuana use without the fear of getting arrested. Many people claim hot baths or showers help with CHS symptoms, but we need more research on what treatments really work. People suffering from suspected CHS should seek medical help if their symptoms last, as losing too much water and nutrients can be harmful.²⁷

6. HOW POTENT ARE TODAY'S MARIJUANA PRODUCTS?

While the term *THC potency* is commonly used when discussing the strength of marijuana, the more accurate term is THC concentration, which refers to the amount of THC in cannabis.

Marijuana products today come from the same plant as the products of the past. Depending on how the plant might be cultivated, levels of THC and CBD might vary.

One benefit of marijuana legalization is that consumers in states with a regulated supply know the *THC concentration* of the products they are consuming. Consumers can choose products that contain the amounts of THC and CBD that they prefer. When access is regulated and controlled, as in states where medical and adult use of marijuana is legal, we see a wider variety of THC concentration within products. This includes marijuana with virtually no traces of THC, but high in cannabidiol (CBD), which is therapeutic but not psychoactive.

The method of ingestion can significantly influence marijuana's effects. For instance, marijuana-infused edibles often produce a stronger and longer-lasting high when compared to smoking. Understanding these differences allows individuals to take appropriate precautions to minimize the risk of unwanted effects such as anxiety, paranoia, or impaired thinking, especially for new users or those who take too much.

7. CAN YOU BECOME ADDICTED TO MARIJUANA AFTER USING IT FOR THE FIRST TIME?

No, you cannot become addicted to marijuana or any drug after using it only one time.²⁸ Most people who use marijuana do not develop an addiction. Also, rates of addiction among people who use marijuana are significantly lower compared to other drugs.²⁹ In 2023, it was estimated that 61.8 million people used a marijuana product in the past year, and less than a third met the criteria for a cannabis use disorder.³⁰ A person only meets the criteria for a substance use disorder if, over several months, they continue to use a drug repeatedly despite experiencing numerous harms and negative consequences.

8. HOW DOES MARIJUANA USE IMPACT MENTAL AND PHYSICAL HEALTH?

Studies show that marijuana can have positive and negative effects on mental health. Effects can depend on the person's underlying mental health conditions, their frame of mind, their current circumstances, and the types of products used.³¹ For individuals with certain mental health conditions, marijuana's effects vary.

There is no definitive evidence that marijuana causes some psychiatric disorders in otherwise healthy individuals. Some studies have found associations between certain psychiatric disorders and marijuana use. However, these studies often cannot tell whether people with underlying disorders were more likely to use marijuana to self-medicate.

Some users may experience short-term effects like panic, anxiety, or paranoia. These feelings typically fade once the drug's effects wear off. These effects can be prevented by using lower THC concentration products and not taking marijuana with other substances.

According to a review by the National Academies of Sciences, Engineering, and Medicine, the research suggests that marijuana does not cause depression, anxiety, or PTSD, but for those with bipolar disorder, frequent use may make symptoms worse.³²

Some evidence shows marijuana can improve airways and lung function when used over a short period.³³ However, regular marijuana smoking can harm lung tissue. This is due to the smoke containing some of the same chemicals as tobacco smoke. Long-term use may lead to respiratory problems such as chronic bronchitis and inflammation in the airways.

Marijuana can also increase heart rate and blood pressure right after use.³⁴ There is limited evidence that marijuana use affects cardiovascular health.³⁵ More research is needed to fully understand the impact of marijuana on lung and heart health. A limitation with available research is that many people who use marijuana also smoke tobacco.³⁶

9. WHAT ARE TREATMENT OPTIONS FOR PEOPLE WITH MARIJUANA USE DISORDER?

The most common treatment for marijuana use disorder is talk therapy. This includes methods like Cognitive Behavioral Therapy (CBT), Motivational Enhancement Therapy (MET), and Contingency Management (CM). For teenagers, Multidimensional Family Therapy (MDFT) is another effective option. Most people with marijuana use disorder can benefit from outpatient treatment only. Detox, inpatient rehabilitation, and residential treatment are typically not recommended for people with a primary marijuana use disorder. However, use of these services may be recommended if they also have another substance use disorder. Currently, there are no FDA-approved medications to treat marijuana use disorder.



10. WHAT ARE HARM REDUCTION STRATEGIES FOR PEOPLE WHO USE MARIJUANA?

There are ways to prevent dangerous situations while also enhancing marijuana's potential benefits. People can make educated decisions when they understand marijuana's effects and have information on dosing. Also, knowing about any resources available to handle potential difficult experiences can be helpful.

USE PRODUCTS WITH LOWER THC CONCENTRATIONS.

Using products with lower THC concentrations can be particularly beneficial, especially for new or occasional users. Lower THC concentrations reduce the risk of adverse marijuana effects such as anxiety, paranoia, or cognitive impairment. Lower THC concentrations also allow users to have a more controlled and predictable experience. This makes it easier to gauge personal tolerance and minimize the likelihood of overconsumption. Additionally, lower THC concentration products may be a safer option for individuals using marijuana for medical purposes, as they can provide therapeutic benefits while reducing the intensity of intoxicating effects. Other cannabinoids like CBD may also influence the adverse effects of marijuana and may reduce some of THC's negative effects.³⁷

CONSIDER THE PROS AND CONS OF DIFFERENT ROUTES OF CONSUMPTION.

Marijuana has several potential benefits if used with moderation. Marijuana may affect people differently based on their method of consumption. Varying levels of THC in marijuana products and the method of consumption impact the different risks and benefits.³⁸

Marijuana is usually consumed via inhalation, either smoking or vaporizing, which allows for a rapid onset of effects. This also allows the user to control their dosage and avoid overconsumption. However, smoking marijuana can expose users to other byproducts such as carcinogens that can adversely affect lung health. Vaping is seen as a less harmful alternative to smoking as it reduces exposure to harmful toxins. However, there are still safety concerns about vaping. Vaping may contain additional additives, and vape products often contain high concentrations of THC.

Secondhand marijuana smoke is the mixture of smoke from burning marijuana and what the smoker is exhaling. Secondhand marijuana smoke has the same or higher amounts of toxic chemicals found in tobacco smoke. People who smoke marijuana should do so in well-ventilated areas and be mindful of secondhand exposure for bystanders.

Consuming marijuana via infused edibles, in foods and beverages, and in oils and tinctures is another option. Marijuana-infused edibles can have a stronger intoxicating effect and last longer than smoking. While edibles eliminate lung risks associated with smoking, they come with a higher potential for accidental overconsumption. Delayed effects of edibles can take up to an hour after consumption to kick in. Users can mistakenly take more than intended, leading to adverse side effects. It's important to regulate dosage and remember that it can take up to one hour before a marijuana edible takes effect. Oils and tinctures are easier to calculate a precise dosage for, and can lead to a faster onset of effects compared to edibles. However, miscalculation of dosage can still pose a risk to users, especially new users.

AVOID USING MARIJUANA WITH ALCOHOL OR OTHER DRUGS.

Mixing marijuana with other drugs can lead to harmful effects or impairment. When taken with opioids, alcohol, or other downers, it can lead to sleepiness, sedation, and impaired decision-making. Mixing stimulant drugs with marijuana can raise your heart rate and blood pressure. It can also increase the risk of feeling anxious, panicked, or paranoid when taken with these drugs.

GO SLOW.

People should "go slow." Taking a little bit at a time can reduce the risk of adverse effects due to accidentally taking too much. In addition, it is important to go slow since it only takes a little bit of a product with a high concentration of THC to have a strong effect. If consuming an edible, it is also important to remember that effects may be delayed, so one should not consume more in the meantime.

II. WHAT ARE POLICIES TO HELP PEOPLE WHO USE MARIJUANA BE SAFER?

There are a range of policies that local, state, and federal governments can adopt to reduce the harms associated with marijuana use and criminalization—and to ensure that legalization protects health, advances equity, and prioritizes community well-being.

PRIORITIZING HEALTH:

- **Create protections for consumer health.** Marijuana products should be clearly labeled with their THC level and standard dose. CBD and hemp products should be held to the same quality control standards as marijuana.
- **Ensure people have access to accurate information about marijuana use, risks, and safer practices.**
- **Restrict youth access to marijuana.** Marijuana businesses must verify the age of all customers before a sale. If a business knowingly sells to minors, the government should revoke their license to operate.
- **Ensure medical marijuana access for those in need.** Marijuana provides relief for a variety of health conditions. People who need marijuana to treat or alleviate their health conditions should have affordable access.
- **Prioritize health and community investment.** Enforce regulations that protect public health, prevent over-commercialization, and invest tax revenues into communities harmed by prohibition.
- **Invest in addiction services.** A full range of addiction services—including counseling, medications, long-term treatment, and recovery housing—should be available to individuals. Personalized support reduces overdose risk and improves recovery chances.
- **Stop large companies from putting profits before people.** Large corporations undermine health reforms to increase their bottom-line and monopolize the market.

REDUCING THE HARMS OF CRIMINALIZATION OR PUNISHMENT:

- **No one should be arrested for marijuana.** At a minimum, marijuana possession should be decriminalized. Ideally, marijuana should be legal at the state and federal levels as a regulated, adult-only, age-restricted consumer product.
- **Clear records for all past marijuana arrests and convictions.** Ensure people with past marijuana convictions cannot be deported, denied access to benefits, or discriminated against. They should be able to participate in legal markets.
- **Restore benefits, rights, and opportunities for people who have been criminalized for marijuana,** and release anyone currently in prison for marijuana.
- **Reduce drug testing in employment, particularly where it is unrelated to safety-sensitive roles.**

END NOTES

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