

**Position Statement in response to the White Paper issued by the Government of Malta, March 2021 entitled: "TOWARDS THE STRENGTHENING OF THE LEGAL FRAMEWORK ON THE RESPONSIBLE USE OF CANNABIS"**

*Approved by the Maltese Association of Psychiatry Executive Council on Monday 10<sup>th</sup> May 2021*

*Endorsed by*

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Malta College of Pathologists (MCPATH)  
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Maltese Association of Radiologists and Nuclear Medicine Physicians (MARNMP)  
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The **Maltese Association of Psychiatry** (MAP) is the national authority on psychiatric matters. A non-profit Voluntary Organisation established in 2013 the MAP is committed to set standards and promote the highest quality of psychiatric care for individuals suffering from mental health problems and support their careers. In order to do so, it promotes the continuous professional development and the highest level of professional competence of psychiatrists in Malta.

We, at the MAP believe in a holistic multidisciplinary approach to care for those suffering from mental health problems. Thus, we uphold collaboration with professional and patient associations on both national and international levels in order to further these objectives. Furthermore, we serve as a public voice in issues related to mental health.

MAP supports the decriminalization of cannabis and applauds the commitment of the government to direct persons with cannabis use disorder to treatment services rather than the criminal justice system. The Drug Dependence (Treatment not Imprisonment) Act is an example of this commitment.

Cannabis is the most commonly used illicit substance among Maltese youth. The European Monitoring Centre for Drugs and Drug Addiction (EMCDDA)'s 2019 Report and the EMCDDA's European School Survey Project on Alcohol and other Drugs (ESPAD, 2019) report cannabis as the most frequently used, most frequently seized and the most accessible drug locally.

**The MAP recognizes and highlights the following EVIDENCE-BASED knowledge:**

- The human brain undergoes a maturational process which starts in-utero and continues during both childhood and adolescence. This includes the reorganization, refinements and functional improvements of the brain. This is driven by changes in brain grey matter (GM) due to synaptic pruning (elimination of underutilized or unnecessary neural connections), and white matter (WM) due to myelination.
- These changes continue at least until the mid-20s and thus brain maturation is vulnerable during this time to stressors/insults.
- The endocannabinoid system plays a role in this brain maturation and thus exogenous cannabinoids from cannabis can affect this process directly in a negative way.
- Regular cannabis use in youth and young adults can affect aspects of cognition, including attention, memory, processing speed, visuospatial functioning and overall intelligence. Worse performance is related to earlier adolescent onset of use. Abstinence following regular use may improve some, but not all, of these cognitive domains.
- Early and regular use increases the risk of developing a primary psychotic illness in those individuals who are vulnerable. Vulnerability factors are not currently clear, but may include factors such as childhood trauma and genetics. In those young adults who have developed psychosis, continued cannabis use worsens long-term symptom and functional outcomes.
- Cannabis may increase the risk of depression and early regular use is associated with younger age of onset of symptoms of psychosis and of bipolar disorder.

- Cannabis with high tetrahydrocannabinol (THC) content (high potency) can result in significantly worse mental health and cognitive outcomes, including worsening of panic disorder and other anxiety disorders.
- Early age of use of cannabis increases the potential for adult dependence to cannabis.
- Cannabis may be associated with increased progression to other illicit drug use in the context of particular factors (e.g., high frequency and early age of use).
- Perinatal cannabis exposure (PCE) may have adverse effects on cognitive development, behavior and academic achievement in offspring due to the effects of cannabis on the fetal endocannabinoid system modulating neurodevelopment. PCE has been hypothesized to potentially compromise the brain so that a “second hit” (postnatal stressors/ environmental triggers) precipitates the emergence of these abnormalities.

**In light of the above MAP has the following recommendations:**

- Since regular cannabis use is associated with increased risk of schizophrenia, and may also negatively interact with depression, bipolar mood disorder and anxiety disorders due to its biological effects on brain maturation, and since mental disorders frequently start before the age of 25, age of access to cannabis should not be prior to age 25, with restrictions on quantity and THC potency. The White Paper recommendation of decriminalization of up to possession of 7 grams cannabis is vague and needs to be elaborated to describe percentage THC content.
- Local research reported that the mean age for admission to Mount Carmel Hospital for psychosis and testing positive for cannabis was 24.6 years, compared to those admitted to hospital for psychosis during the same year with a negative urine test for cannabis (44.63 years,  $p < 0.001$ ) (Grech, Camilleri, Taylor-East; 2012). The authors concluded that cannabis use can precipitate an earlier onset of a psychotic illness.
- Significant support is needed for public health education and resources targeting children, adolescents, young adults, and expectant mothers, in collaboration with mental health stakeholder groups. This should promote well-being and direct people to different forms of recreational activities such as sports and performing arts. There is good evidence to support the immediate and medium to long term anti-anxiety/depression effect following even one session of moderate to intense exercise.
- MAP suggests that equal or more energy is invested by the government in the mental wellbeing of the nation. Any educational campaign needs to be evidence based and aimed primarily towards prevention of cannabis use for recreational purposes. Indeed an educational campaign promoting well-being (*Mens sana in corpore sano*) of citizens should be implemented. Sports, performance arts and activities in natural spaces provide excellent opportunities for experiencing physical and mental well-being. There are many studies which report the positive effect on mood, resilience to stress and self-esteem which comes from practicing regular exercise and being a part of an ingroup that practice a sports or performing art. Access to such sports and performing arts should be made a public health priority given that both are positive coping strategies with beneficial effects on both physical and mental health of the nation, indirectly reducing the demand of taxes on the health system.

- Significant support of further biological and local psychosocial research is needed to better understand the impact of cannabis and its legalization on mental health. As such, the MAP supports the setting up of a dedicated Cannabis Authority. Such an entity needs to be established prior to any new legislation. Studies regarding the potential impact of any proposed legislative changes need to happen before, not after, implementation of laws. Furthermore, caution needs to be applied when understanding data from overseas, as these may not always apply within our local cultural context.
- Expand support for prevention, early identification and cannabis cessation treatments (i.e., using change-based treatment models including harm reduction strategies) within the framework of mental health and addictions. MAP recommends a hypothetical tax is attached from the earnings associated with this proposed legislation, towards the mental health services.
- Prudent consideration of advertising and marketing guidelines with clear markings of THC and cannabidiol content, as well as consistent public health warning messaging, including regarding potential adverse consequences of the use of cannabis during pregnancy, are needed. Enforcement needs to be detailed and elaborated upon.
- MAP suggests that provisions are put in place to address the needs of families with cannabis users. Evidence for regular use of cannabis includes – a cognitive decline, increased rates of school dropouts, employment failures, and increase in criminal behaviors. All these need to be taken into consideration and provided for by this paper.
- Irrespective of the source of procurement, the use of cannabis can lead to impairment, which may adversely impact the performance of individuals at work. It is recognized that the timing and duration of cannabis impairment is variable and that more research is needed in this regard. However, it is prudent to state that it is not advisable to operate motor vehicles or heavy equipment, or engage in other safety-sensitive tasks for 24 hours following cannabis consumption, or for longer if impairment persists. In light of potential legislative changes, it is recommended that employers update relevant workplace drug and alcohol policies to address the use of cannabis and the mitigation of occupational risk. What position will be taken about people in professional and responsible positions being intoxicated during the course of their duties: doctors including surgeons, nursing staff, police officers, members of parliament, judiciary, drivers of public transport vehicles, divers, pilots, sea captains, among others? This decision will need to take into account that

cannabis derivatives are detectable in a person's system for up to several weeks following use.

- Education and training on the risks of cannabis use as well as the recognition of impairment, and the treatment options available to employees with substance use issues, for both employers and employees, is advisable. More research is needed to adequately study cannabis-related impairment, including methods for the detection of impairment as well as the further implications of the legalization of cannabis on the individual, the workplace, and on human resources policies and practices.

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