Written evidence from Mr Peter Simmons

I am an individual with much experience and knowledge on this subject. I have both personal experience and a wide-ranging reading of literature on it from which to draw. Peter Simmons

General

1) The UK’s policy on drugs is causing more harms than previously, and has been illogical and unworkable for decades since the moral panic set in. Drugs are a health issue not a judicial one.

2) A rational approach is needed freed from emotional confusion and moral judgements, which have informed UK drugs policy since the 60s. The Government's own science advisory committee on drugs has twice advised a changed approach and been sacked for doing so. This shows that science has not been the guiding force of policy, but emotional, even hysterical, overreaction.

3) It would have been better to have started decades ago, but we are here, and must cope with what the 'war on drugs' has achieved; an increase of harms, and an endless supply of profits for criminals, plus novel drugs created by underpr:d chemists coming onto the market, more dangerous than traditionally used drugs. So we need a strategy which reduces harms, while combating illegal supply of these novel drugs as well as others which cause harms. Continuing the present illogical doctrinaire policy isn't an option.

4) There is no easy one-size-fits-all solution, the problem is too complex, drugs are all different and any change in legal status will take time to work through and have desired effects, criminal supply of anything currently profitable will not cease immediately. But there will be a gradual switch of addicts to legal supply and treatment, which has to be established on what already exists. There is an inability to understand that heroin addicts want and need heroin not a substitute, and in order to be successful all addicts have to find it attractive. There aren't many of them who are happy with their lot and don't want to lose the addiction. Financial and social benefits will slowly emerge; reduction in petty thefts, robberies and shop lifting driven by addicts short term need for cash. These crimes won't disappear, being assoicated as much with deprivation as addiction, but will reduce.

5) Currently there is a global shortage of opiates for pain. Yet in Afghanistan huge amounts are produced and sold to terrorists which feeds the global black market trade. If the Afghan government bought the opium and traded it to pharmaceutical companies to make all the painkillers modern medicine depends so heavily on, it would attack illegal supplies at source at the same time as removing addicts from the demand side. Burning fields of poppy when many people are suffering post-operative pain without relief is indecent. Ourselling the Taliban with Western funding for a crop we need seems such an obvious solution, but troops burning fields is preferred by the media of course.

Non-harmful cannabis and the body's own endocannabinoid system

6) Cannabinoids are able to elicit their natural balancing effects by interacting with the endocannabinoid system (ECS). It consists of a series of receptors that are configured to accept cannabinoids – including endocannabinoids that are synthesized by the body, and phytocannabinoids that are found in plants like hemp. The ECS, responsible for regulating an array of physiological processes that are instrumental in maintaining health, was discovered less than 30 years ago. While there’s evidence that cannabinoids have been used for their medicinal properties since the Stone Age, it wasn’t until the mid-1990s that scientists began to understand how they encourage healing and homeostasis.

7) Cannabis should, before anything else is done, be removed from all drugs regulations, and made entirely free of the law. It is medicinal and has no proven harms, no one has ever died or been injured by cannabis, though many have tried to show a link and some have lied. Professor Robin Murray, a long time researcher into links between cannabis and schizophrenia, and especially regarding the alleged increased danger of so-called 'skunk' [which is a massively misunderstood term], has now agreed that there is no link and has called for legalisation of cannabis. I pointed out to him years ago that the fact that while cannabis use had spiraled over sixty years, and skunk was popular with the population sectors he was working with, schizophrenia rates have remained totally stable since records began, and science is now discovering the disease is genetically linked. Even with genetically vulnerable people with a family history of schizophrenia, using cannabis does not cause its early appearance and there are signs it may even reduce its effects for some,
since one cannabinoid, CBD, is an anti-psychotic. Many young men starting to show symptoms of schizophrenia are thought to self medicate with cannabis.

8) The experience of users, and countless former users over the centuries, have provided plenty of evidence this is not a harmful substance, yet it was placed by the government in the most harmful category! Non-addictive, benign, and found by many to be a preferred way to relax and frequently as a medicine to combat one of the range of conditions it treats. There is no reason why someone in chronic pain shouldn’t also be made to feel comfortable and happy as well as pain free. Only an anti-pleasure puritan could object. Countries which have legalised cannabis have not only found no increase in use, but a slight decrease, indicating that some users do so simply because it’s rebellious & illegal. There has been a decrease in hard drug abuse as well, indicating that legal supply of cannabis substitutes for risky multdrug use.

9) Cannabis is now recognised by millions as an effective medicine with no side-effects. Hundreds of thousands are benefiting from prescribed cannabis products with massive improvement in their lives. Children with epilepsy are just one part which has received some attention in the media, but no one should assume that is all it can do. The wide range of conditions treatable with cannabis is growing constantly as real research is conducted. I am personally aware of the value of one of the 114 cannabinoids, CBD, as I use it for easing chronic back and neck pain, allowing me to take less prescribed opiates, and saving the NHS money. It also treats my glaucoma, is showing huge promise as a topical treatment for skin cancer. I have personally used it to treat a dark brown mole-like lump that suddenly appeared, which went in a few days of rubbing in CBD oil.

10) Cannabis could be expanded into a range of effective treatments for older people, the largest user group of the NHS, many of whose health issues are eminently treatable with cannabis; it is an anti psychotic so useful for treatment of mental problems, anxiety, insomnia, chronic pain, restless legs syndrome & depression, just the more obvious. It also treats MS, another age-related condition. The NHS could save many millions on expensive pharmaceuticals, many of which require drugs to tackle the side effects. Old people often leave GP surgeries with a carrier bag of pharmaceuticals.

11) Cannabis, unlike alcohol, has never killed anyone. It doesn't lead to violence, wife beating, child abuse, dangerous driving or accidents, all of which are associated with alcohol. 80% of all police time is spent coping with alcohol and its effects on society. We somehow manage without society collapsing, yet are apprehensive of a plant that humans have used throughout our evolution as both medicine and social and personal relaxant. Surely it is time to put this period of ignorance and bigotry behind us and replace cannabis in the place it deserves to be and once was; benefiting humanity.

12) In living memory, cannabis was an ingredient in cough syrups, throat medicines etc., and in Victorian times was the most used ingredient in many medicines. The British Army's report long ago into the use of Hemp in an overseas territory, Egypt, concluded it posed no danger to either individuals or society and no action should be taken. It was followed decades later by Baroness Wooton, whose Wootton Report on Cannabis (dated 1968 and published in January 1969) came to the same conclusion and recommended unconditional legalisation. We appear to have gone far backwards in understanding over the decades, still more since the endocannabinoid system was discovered. It really is time for the government to catch up to modern scientific knowledge, admit mistakes of the past and act appropriately. We will soon be the only modern Western country holding on to the myth of cannabis, along with Indonesia and other places where ignorance is matched with brutality and lack of democracy and justice.

The UK Government response to the recent petition to legalise cannabis said:

‘Substantial scientific evidence shows cannabis is a harmful drug that can damage human health. There are no plans to legalise cannabis as it would not address the harm to individuals and communities.’

13) A most astonishing statement of disinformation. Where is this 'Substantial scientific evidence”? Any 'surveys' that are the usual way of spreading disinformation like this have been well and truly dismissed by science. Yet still ignorance rules Britain, and we continue to suffer lazy slow-thinking politicians and vested interests. It has not escaped the public's notice that certain leading members of the government have substantial financial interest in delaying legalisation as long as possible. How can they claim it damages human health when the reverse is demonstrably true? How could it when our own bodies manufacture cannabinoids? This is the voice of ignorance.

Ways forward
14) Due to past ignorance of the good supplied by cannabis there is still a tendency for government to want to keep control, to attempt to regulate and police with bureaucracy and laws. This should be resisted along with belief in the harms now discounted by science. Cannabis should be treated as a useful crop for any farmer to grow; either the fibre variety of hemp, or the medicinal varieties aimed at specific conditions by skilled plant breeders and geneticists. Investors are already funding enterprises or considering them, as the cannabis industry worldwide adapts and creates something new. While there will be major producers of medicines and medical additives, and herbalist suppliers of recreational herbal cannabis, it should be treated like alcohol, and home growing should be legal just as home brewing wine and beer is. Small rural businesses could supply town pharmacies or shops, imported cannabis could be replaced with home grown product keeping more money in the country. People growing a few plants to make an oil or butter extraction from leaves, will further reduce costs to the NHS, and reduce the need for purchasing imports from countries more advanced in taking advantage of the opportunities.

15) Already millions are benefiting from legal medicine that works. UK citizens are allowed just CBD, and even this is now being questioned by bigots, still making things up such as CBD can cause unwanted mental effects. As a user I can discount this entirely, there is no noticeable effect from CBD, except pain disappears almost instantly. Even expecting some effect, I was astonished at the rapidity and effectiveness of just a couple of drops of oil. Even a couple of drops of THC would cause no mental effects; the oil is at most 30% CBD oil in plain hemp seed oil. Two drops represents less than two mg of CBD, a tiny amount. It's medical effects are because it is adding to the endocannabinoids, topping them up as it were, so doesn't have to be an effective dosage as if an entirely new chemical.

Heroin

16) The major addictive drug is heroin, illegal supplies of which are still freely available apparently despite all the law does. Criminals depend on addicts who have no choice whether to buy or not, whatever the price and quality, and many minor crimes are directly linked to addicts' need to get enough money together to buy what their body needs to stop the suffering. To condemn such people because they became addicted, often when too young to be able to reason rationally or know the dangers, is brutal and uncaring, as well as being the driver of addiction. Removing addicts from the marketplace and prescribing under controlled conditions and costing them nothing, removes the profit for crime, and without profit, criminals move to something that will work for them, and heroin would slowly become unavailable.

17) This was the case in the late sixties, and it worked, far fewer became addicted as a result of addicts buying from the black market and selling to others to make enough to afford their medicine for free. This has been lately changed to addicts of methadone, who became addicted to 'spare' methadone which addicts had been given as a solution, sold on so they could buy the real thing. Methadone has no 'high' associated with it but it quells the pains of withdrawal from heroin. The downside is it is ten times more addictive, and this has shown in the increase in methadone addiction. This also was all known back in the sixties, but the war on drugs obliterated all knowledge and replaced it with just say no, the stupidest phrase ever spoken, showing no understanding of addiction or the young. Many addicts are hurting emotionally and became addicted in an attempt to dull the pain. They have been added to by those who became addicted when young in ignorance, collateral damage victims of the war on drugs and more recently to prescribed opiates for pain.

Cocaine

18) The second most popular drug, especially among the richer members of society, is cocaine, and while not addictive like heroin, is massively habit forming for those with the money, simply because it makes them feel like Superman, and euphoria can be addictive. The best way to tackle this is to legalise with controls, so that cocaine can [once again] be marketed in a variety of ways which will limit the amount and concentration, providing stimulus with less harms than uncontrolled illegal use. It is still a drug that is far less dangerous than alcohol, which our society lives with, albeit with huge cost to police time. social damage and many deaths. I feel sure with the right attitude cocaine could be handled in the same way as a consumer product like Kendal Mint Cake when stamina and determination are needed. This is, after all, how native Colombians where it is grown as part of their culture have used it for thousands of years.

19) There are increasing numbers of addicts of opiates made so by prescribed medicines. This has got to massive proportions in the US where overprescribing adds to it, but already of concern in the UK. This should be tackled at source, with advice to doctors on prescribing opiates over long periods of time without oversight of the patient. When cannabis is fully exploited for its medicinal qualities, hopefully much of this opiate use will be substituted with cannabis which contains analgesic as well as anti-inflammatory cannabinoids. There needs to be a sea change in attitude first though. With only 'specialist' doctors able to
prescribe cannabis with severe limits despite its proven safety, rather than it being a common resort by GPs for minor aches and pains, and for more serious, chronic pain for which opiates are presently prescribed, the assumed dangers of this beneficial herb are still open to confusion and paranoia; probably largely because of the disinformation that has marked this issue for decades.

20) Our society has managed with little difficulty in the past and into the present, to cope with addictive drugs such as coffee (caffein), chocolate (methylxanthines, biogenic amines, and cannabinoid-like fatty acids). Probably the most influential compound in chocolate is, phenethylamine. This chemical, which occurs in chocolate in small quantities, stimulates the nervous system and triggers the release of pleasurable opium-like compounds known as endorphins. Phenethylamine also potentiates the activity of dopamine, a neurochemical directly associated with sexual arousal and pleasure, and yet we sell it in shops with no warnings, and make confectionary with only tiny amounts in. Although chocolate is fast becoming the number one choice of substance for use at house and electronic nights and chocolate has been popularised in Europe for snorting as a recreational drug in place of cocaine.

Previous 'legal highs' and other novel substances

21) All the novel substitutes created to avoid the law on harmless cannabis have shown to be highly dangerous, with spice, the principal one responsible for deaths and violence in prisons and elsewhere. These have been created by a criminal black market to fill a void created by government intransigence. The war on drugs has been a war on people and especially sick people, and many have suffered as a result of this blinkered ignorant attitude. The truth is now understood by most people – a recent Facebook poll of opinion on cannabis had 96% in favour of legalisation, and just 6% in favour of no change. Attempts to continue the ignorance, such as in certain tabloids, are met with blanket opposition, with few agreeing, and they are clearly ignorant and biased and not in possession of anything but hysterical fantasies which a few still cling to. It's like a different world to the one where Canada legalised medicinal cannabis 18 years ago, and has recently legalised recreational use. Canadians and most Americans can now benefit from prescribed cannabis, while we are told by a totally ignorant new Home Secretary that he intends to change nothing.

22) It's highly probable these no longer legal 'legal highs' will lose attraction once cannabis is legal, because they are inadequate substitutes for cannabis; a plant which mimics our own endocannabinoid system. If cannabis was eventually on sale in prison shops as tobacco still is, prisons would be quieter, more peaceful and creative places which might stand some chance of rehabilitating some prisoners. At least there won't be avoidable deaths from substitutes like Spice.

MDMA aka Ecstasy

23) Intelligent people learn from mistakes. One just has to be adult enough to admit mistakes and move on. MDMA has been shown by science to be safe, yet disinformation still surrounds it, the principal being that frenetic exercise needs water replacement so drink masses of water. But overdosing with water in panic has been the killer of MDMA users, as evidence by the Leah Betts case, where she had water forced into her by parents in panic trying to save their daughter. This argues for full information to be given, instead of the hysterical government attitude that prevails. Considering the hundreds of thousands of young people who have taken MDMA with no ill effects, this is one worthy of regulation on purity and dose with an official stamp that users can rely on. Those acting to reduce harms in real life have been testing and warning users with facts for years. This is the adult way of managing it.

Psychedelics

24) These interesting chemicals are now increasingly being experimented with by science which is finding they are very effective in combating mental diseases like depression. There is a limited illegal use of the principal ones now, LSD and Psilocibin, which are both proving beneficial in lab testing. Since some are available growing in the wild, they should all be legalised and remain unregulated. There is little risk to recreational users, many of whom I read are ‘micro-dosing’ – taking very small amounts that barely have effects other than ability to concentrate the mind creatively. Since full-blown ‘trips’ on LSD need only 100milligrams, a fraction of this couldn't possibly be of any concern.

Conclusion

The W.H.O. has now called on all national governments to legalise cannabis and exploit its medicinal potential. Is Britain to be the very last hanging on to ridiculous policies which have always been unjustified
and which don't work, while the PMs husband makes profits from cannabis medicine and the Drug Secretary's husband profits from his company British Sugar growing thousands of acres of cannabis for export to countries for medical use? The hypocrisy is startling & diminishes trust in government & politics.

Too many politicians react without thinking to an issue they assume will lose them votes. If they even had a toe in the real world outside the Westminster bubble, they would understand that calling for legalisation wins votes, because even non users with a bit of knowledge know it isn't harmful and are aware of the harm this law does. While I don't expect politicians to lead, I do expect them to act as our representatives rather than our betters, and do what the majority of the population is now demanding; some rational common sense. There is no longer any excuse for ignorance or business as usual. It was the US which started this witch hunt for commercial reasons and then forced it on the world with dishonest and racist campaigns. They are now legalising as fast as they can, all states not already having done so are planning legalising at least medicinal use.

Now with the usually implacable W.H.O. Saying to do it, how can this government continue in denial?

Addendum

Common conditions treatable with cannabis

Arthritis, Cancer, Chronic pain, Crohn's Disease, Epilepsy, Fibromyalgia, Glaucoma, HIV/AIDS, MS, Nausea.

Other conditions showing promise with cannabis treatments

ADHD, Alcoholism, Alzheimer's Disease, Anxiety, Arthritis, Asthma, Autism
Bipolar Disorder
Cancer, Cerebral Palsy, Chronic Inflammation, Chronic Pain, Chronic Renal Failure, Cirrhosis, Constipation, Crohn's Disease, Cystic Fibrosis,
Diabetes, Diverticulitis
eczema, Epilepsy
Fibromyalgia
Gastritis, Gastroparesis, Glaucoma
High Blood Pressure, HIV/AIDS
Insomnia
Lupus, Lymphoma
Major Depression, Migraines. Multiple Sclerosis, Muscle Spasms, Muscular Dystrophy
Obsessive Compulsive Disorder (OCD), Opiate Dependency
Panic Disorder, Parkinson's Disease, Polycystic Ovary Syndrome, Post Concussion Syndrome, Post-Traumatic Stress Disorder (PTSD)
Rheumatoid Arthritis
Schizophrenia, Seizures, Severe Headaches, Sinusitis, Sleep Apnea, Spinal Stenosis
Tension Headaches, Temporomandibular Joint Disorder (TMJ), Traumatic Brain Injury
Ulcerative Colitis
Vomiting
Weight Loss

Sources

https://echoconnection.org/discovery-endocannabinoid-system/
https://www.leafscience.com/2017/03/17/the-endocannabinoid-system-a-beginners-guide/
http://www.medicalcannabis.com/Cannabis-Science/endocannabinoid-system/
https://www.marijuanabreak.com/endocannabinoid-system
https://www.clear-uk.org/

Countries already legalised

Uruguay, Canada, Australia, the United States (but only in 420 card states, the Netherlands, Colombia and Czech Republic have amended their laws to allow consumption for medical purposes at the very least.