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San Francisco Examiner

06/09/2003

Study: Many HIV patients use pot for mental health

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SAN MATEO -- Results coming out of the medical marijuana research project at the San Mateo Medical Center are making waves in the scientific community.

The first clinical trials, which ended in February, are still being analyzed. But psychologists were treated to some surprising data from an initial Medical Center survey of HIV patients at the American Psychiatric Association conference in May. **The study indicated that more HIV patients smoked marijuana for mental rather than physical reasons.**

"We expected to see people smoking marijuana to alleviate nausea, pain and to increase their appetite -- all the reasons that are commonly cited," said Diane Prentiss, a research epidemiologist with the Medical Center. "In this case, we were surprised that 57 percent say they smoked to relieve anxiety or depression."

To gather baseline information for use in clinical trials of medical marijuana, researchers at the San Mateo Medical Center surveyed 252 HIV patients. Of that number, 23 percent (58 patients) admitted to smoking marijuana in the last four weeks.

When asked for the main reasons they used the drug, most cited several reasons. Mental health issues topped the list. Curbing nausea and increasing appetite was the second, with 52 percent. Recreational use came in third with 33 percent. Only 28 percent said they smoked to alleviate pain.

The prevalence of the mental health issue is a significant finding that raises some interesting questions, said Dr. Dennis Israelski, chief of staff and chief research officer at the Medical Center.

"In terms of understanding the whole field, it is safe to say that there is a fair amount of self-medication that physicians are not aware of," he said. "It does speak to whether it's appropriate medication. Are physicians doing a good enough job when patients are using outside medication? Do we have better treatments for anxiety and depression? These are very important issues related to quality of life."

Mental health is especially important for HIV patients, Israelski said, pointing to studies showing that mental health impacts a patients' ability to adhere to the strict medical regimens used to combat the often-fatal disease.

Dr. Cheryl Koopman, an associate professor of psychiatry at Stanford, said that many of her colleagues were intrigued by the results of the Medical Center's study presented at the conference.

"There was a lot of interest. A number of clinicians in the room felt it was relevant to patients they are working with," she said. "Because of the illegality of marijuana there's a lack of research. We don't know if self-medication is systemic. It's another reason for large studies to be conducted in a scientifically rigorous way."

The San Mateo Medical Center's work with medical marijuana is the only publicly funded research of its kind in the country. "It is not an easy field to study," said Israelski. "People don't want to touch it for political reasons."

The Bush administration has come out strongly against any legalization of marijuana, even for medical purposes, claiming there is no research proving it has health benefits.

"It's a Catch-22," said Israelski. "If they make it tough to study, how do you get scientific evidence?"

The Medical Center has managed to complete one round of clinical trials studying medical marijuana and HIV patients, but Israelski is still negotiating for federal approval for two more studies. The AIDS researcher credits the political support at the county level -- particularly from Supervisor Mike Nevin and County Manager John Maltbie -- for the success of the project so far.

The first round of the Medical Center clinical trials focused on marijuana's affect on peripheral neuropathy, a severe debilitating leg pain associated with HIV.

For the next trials, the Medical Center research team wants to expand the study to include potential effects on nausea, gastrointestinal disorders and wasting syndromes associated with HIV. A third round of trials would study the drug's effects on cancer patients. These second and third trials are still awaiting federal approval.

Significant benefits to marijuana, marijuana-related or "cannabinoid" products may not be found, even if studies are conducted, Israelski said.

"I'm not a believer. I am approaching this as a scientist to see if there are merits, and then let the dust settle," he said. "I have no axe to grind, but we should be able to do the study."