

# [***Marijuana Reclassification Puts Politics and Profits Ahead of Public Health | Opinion***](https://advance.lexis.com/api/document?collection=news&id=urn:contentItem:6BXX-K391-DY68-1155-00000-00&context=1516831)

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**Highlight:** The first major change to federal marijuana laws may be on the horizon now that it has been leaked the Biden administration intends to reschedule marijuana.

**Body**

The first major change to federal marijuana laws may be on the horizon now that it has been leaked the Biden administration intends to reschedule marijuana from Schedule I to Schedule III.

Will this "seismic shift," as some media outlets have called it, legalize marijuana? What about let people out of prison? Or at least expunge records or pardon past offenders?

The answer to all of these questions is an unequivocal "no."

So what is this shift all about? Sadly, it has more to do with election-year ***politics*** than science or reason.

Many Americans are hearing about a drug's "schedule" for the first time. There are five Schedules, or classifications of controlled substances. Marijuana has been in Schedule I, the most restrictive tier, meaning it has a high potential for abuse and no accepted medical benefit. Indeed, marijuana is not an approved medical product in and of itself (though there are derivatives of the drug that have been synthesized into a doseable medication, and thus are not Schedule I). That is why so many of us scratched our heads when [*FDA*](https://www.newsweek.com/topic/fda?utm_source=Synacor&utm_medium=Attnet&utm_campaign=Partnerships) recommended the new classification of Schedule III. As a whole plant, consumed in joints and vapes, the FDA [*has not approved marijuana*](https://www.fda.gov/news-events/public-health-focus/fda-regulation-cannabis-and-cannabis-derived-products-including-cannabidiol-cbd) for the treatment of any disease or condition.

Marijuana consists of hundreds of unique cannabinoids. THC is the cannabinoid that produces a "high." Beyond this, the marijuana plant has been bred into countless strains. Typically, FDA-approved medicines contain isolated ingredients with precise dosages, which are produced in a controlled setting. While people know what they're getting when they take, for example, anabolic steroids (which are also in Schedule III), no two marijuana plants are the same.

Marijuana, as a smokable plant, is not medicine. The American Psychiatric Association, in its [*position statement*](https://www.psychiatry.org/getattachment/12aa44f8-016e-4f8c-8b92-d3fb11a7155f/Position-Cannabis-as-Medicine.pdf) opposing the use of marijuana as medicine, noted, "no medication approved by the FDA is smoked." When marijuana's schedule was last reviewed, in 2016, the Obama administration determined that it belongs in Schedule I.

As a result, the Biden administration had to jump through hoops to find a creative way to reschedule marijuana. Drug reviews have long used a five-factor test that considers adequate safety studies and acceptance of the drug by qualified experts, including medical associations like the American Psychiatric Association. Instead, to get the answer it wanted, the FDA created a new two-factor test that looked at whether licensed health care practitioners prescribe marijuana (e.g., in state-level medical marijuana programs) and whether there is "some credible scientific support for at least one" medical condition (e.g., pain). This arbitrary two-part test had never been used to review or approve any other drugs.

If marijuana had been held to the same standard as other drugs, there would be no recommendation for its rescheduling. And, given this exception, it would not be surprising to see investors who want to sell psychedelics, cocaine, and other drugs circumvent the process in the same way by using ballot measures, as marijuana has now done.

Surgeon General Dr. Vivek Murthy has [*said*](https://www.finance.senate.gov/imo/media/doc/protecting_youth_mental_health_part_ian_advisory_and_call_to_action.pdf), "public policy is outpacing the science when it comes to marijuana." He recognizes the inherent risks of marijuana and its commercialization. This change invites profit-driven industries––ranging from the marijuana industry to the tobacco, alcohol, and pharmaceutical industries––to invest billions to capture a share of the soon-to-be national marijuana market. We will likely never know what Dr. Murthy thought of this decision, likely because neither he nor the White House drug czar, another medical doctor, Rahul Gupta, were kept out of the formal rescheduling process.

But some celebrated this decision nonetheless. Companies that sell Schedule III drugs are thrilled since profits will likely bloom. With profits come more kid-friendly products, and more very highly potent products—like 99 percent concentrates. Research has consistently found that marijuana increases the risk of psychosis by five-fold. Don't say we didn't warn you.

A rule of thumb in the public health field is that as the availability and use of any substance goes up, a corresponding increase in misuse will follow. In the case of marijuana, this means we will see an increase in marijuana-involved traffic fatalities, emergency department visits, calls to poison control centers, and cannabis use disorder, among other harms. We've already seen dynamic play out with the state-level legalization of marijuana, as well as with tobacco.

That doesn't mean we want to see people arrested or incarcerated for marijuana. We can find a sensible middle ground that says marijuana should neither be criminalized nor promoted or commercialized. But with this new decision, more Americans will wrongly think marijuana is harmless.

Rather than prioritizing the voices and concerns of public health, the Biden administration chose to listen to those who stand to make a profit. Like its recent move to call off the ban on menthol cigarettes, the Biden administration is playing election-year ***politics*** with public health.

*Dr. Kevin Sabet is a former three-time White House drug policy advisor and the president of Smart Approaches to Marijuana (SAM).*

*The views expressed in this article are the writer's own.*

[*Link to Image*](https://d.newsweek.com/en/full/2387417/cannabis.jpg)

**Graphic**

Cannabis

Justin Sullivan/Getty Images

SAN ANSELMO, CALIFORNIA - APRIL 30: In this photo illustration, dried cannabis flowers are displayed on April 30, 2024 in San Anselmo, California. The U.S. Drug Enforcement Administration (DEA) announced plans to reclassify marijuana as a less dangerous drug and designate it a Schedule III controlled substance instead of a Schedule I drug where it is currently listed.

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