

Editorial

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Drinking, driving and a bit of cannabis

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Introduction

Adolescents and young adults who drive vehicles under the influence of cannabis (marijuana, pot), which is also often combined with alcohol are at increased risk (two-times) of motor vehicle accidents leading to potential death and injury. Those who consume cannabis without other drugs also place themselves at increased risk for motor vehicle crashes, as people driving under cannabis influence may experience distortion of on-coming vehicle headlights resulting in motor vehicle crashes (1).

Marijuana is typically smoked as a joint, but can be taken orally in various foods, teas or capsules, which may be used as “medicinal” marijuana. It can be prepared in food for oral consumption, as in brownies, cookies, or spaghetti. Various forms for oral consumption are found in different countries. For example, in eastern Iran, there is a special solid “pie” called *Majoon Birjandi*, which is consumed by adolescents to reach a cannabis-induced euphoria (1).

Drinking and driving

Motor vehicle accidents are the leading cause of death among adolescents and young adults in the United States (2). While the prevalence of drinking and driving among high school students aged 16–19 years has declined by 54%, from 22.3% in 1991 to 10.3% in 2011 (2), the prevalence of weekend nighttime driving under the influence of marijuana among adolescent drivers has increased by 48%, from 8.6% in 2007 to 12.6% in 2013–2014 (2).

Drinking, driving and cannabis

The Centers for Disease Control and Prevention (CDC) reported (2) on driving under the influence of alcohol,

marijuana, and alcohol and marijuana combined among persons aged 16–25 years, using data from the Substance Abuse and Mental Health Services Administration (SAMHSA) National Survey on Drug Use and Health (NSDUH) from 2002 to 2014.

Over the 2002–2014 period, the prevalence of driving under the influence of alcohol alone and alcohol and marijuana combined significantly declined among persons aged 16–20 years and 21–25 years. Data from 2014 showed that underage (<21 years) drinking and driving did occur at the age of 16 years and that percentages of persons who report driving under the influence of alcohol increased as age increased, peaking at around the minimum legal drinking age (21 years) (2).

In 2014, the reported prevalence of driving under the influence of alcohol alone was greater than that of marijuana alone or alcohol and marijuana combined, when stratified by sex, age group, and race/ethnicity (2). During the study period 2002–2014, the reported prevalence of driving under the influence of alcohol alone among adolescents aged 16–20 years and 21–25 years declined from 16.2% to 6.6% and from 29.1% to 18.1%. Driving under the influence of alcohol and marijuana combined among persons aged 16–20 years and 21–25 years declined from 2.3% to 1.4% and 3.1% to 1.9%.

Conclusions

This report (2) gave us some good news, but even though we observed a decline in reported driving under the influence of alcohol alone and alcohol and marijuana combined from 2002 to 2014, the data also showed that 60% of adolescents aged 18–25 years used alcohol during the past month, 38% engaged in binge drinking and 20% had used marijuana.

So it seems that public health efforts, laws and law enforcement have had some effect, but there is still a lot of work to be done in constant information and awareness efforts to keep preventing motor vehicle accidents in this age group.

References

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