



## Drug Free Australia Position Statement

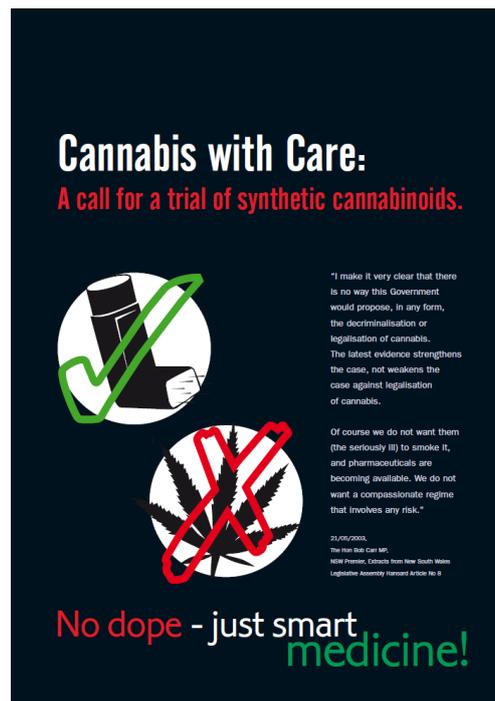
### Our position always based on the science

Drug Free Australia, since its inception, has always maintained a commitment to evidence-based drug policy, based on the best scientific studies available. We have always sought to distinguish between junk science and rigorously conducted research studies, seeing randomised double-blind controlled studies as the gold standard, but also recognising that this type of study cannot always be delivered within the drug policy arena.

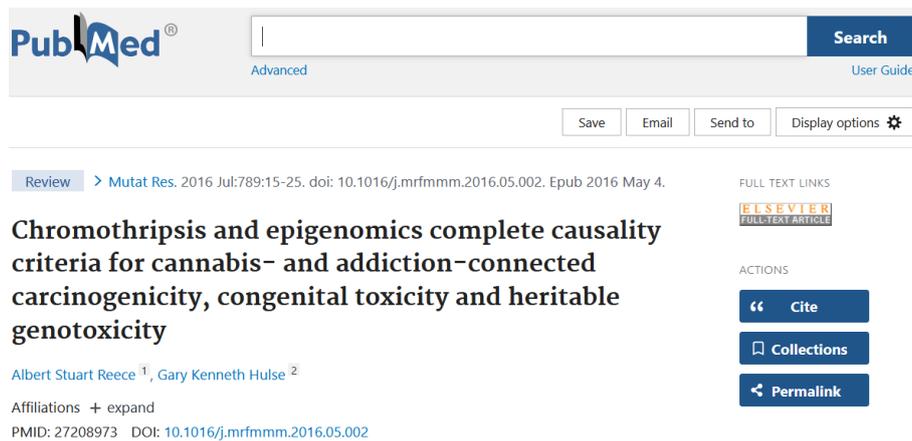
### Our position from 2003 to 2022 – supportive of medical cannabis

In 2003, our position on medicinal cannabis was advised by the majority of Drug Free Australia Fellows, drug policy experts from around the world, many of whom were PhDs in medically-related fields.

The position we took at that time accorded well with the US Institute of Medicine's position that cannabis has a number of medical indications for which it is marginally useful, so long as smoking is not the chosen delivery system. And so in August of 2003 we published a 12 page document called Cannabis with Care (cover below). This was distributed back then to all Australian politicians.



In 2016, one of the 20+ Drug Free Australia Fellows, Dr Stuart Reece, who was part of the team that first articulated worldwide the mechanism by which cannabis was causing cancers, aging, and birth defects, a phenomenon known for decades from in vitro studies but not yet backed by population studies, advised that we may need to change our position on medicinal cannabis. To that end we awaited the results of the major population studies which began to flow in 2019.



The screenshot shows the PubMed interface. At the top left is the PubMed logo. A search bar is on the right with a 'Search' button. Below the search bar are buttons for 'Save', 'Email', 'Send to', and 'Display options'. The main content area shows a 'Review' link, the journal 'Mutat Res. 2016 Jul;789:15-25. doi: 10.1016/j.mrfmmm.2016.05.002. Epub 2016 May 4.', and the article title: 'Chromothripsis and epigenomics complete causality criteria for cannabis- and addiction-connected carcinogenicity, congenital toxicity and heritable genotoxicity'. The authors are listed as 'Albert Stuart Reece<sup>1</sup>, Gary Kenneth Hulse<sup>2</sup>'. Below the authors are links for 'Affiliations + expand', 'PMID: 27208973', and 'DOI: 10.1016/j.mrfmmm.2016.05.002'. On the right side, there are 'FULL TEXT LINKS' with a 'ELSEVIER FULL-TEXT ARTICLE' button, and 'ACTIONS' with buttons for 'Cite', 'Collections', and 'Permalink'.

## Our current position – no longer support medicinal cannabis (with one exception)

As a result of the overwhelming evidence of the cannabis population studies from the US and Europe, Drug Free Australia has, since 2022, changed its position on medicinal cannabis for reasons listed below.

The fully cited evidence backing the statements below can be found in our 23 page publication at <https://drugfree.org.au/wp-content/uploads/2025/09/Cannabis-and-Hemp-Scientific-Review-2.1.pdf>

The statements below are from the above document's Executive Summary:

Research has established over a period of **50 years** that cannabis is genotoxic, mutagenic, oncogenic and teratogenic, meaning that **cannabis destroys genetic information in the cell, causing mutations which then cause cancers and birth defects.**

In 2021 and 2022, vast population studies for the entire US and also for 14 countries in Europe have demonstrated what in vitro and animal study research had already demonstrated, **that cancers, including childhood cancers, and birth defects had strongly elevated levels in those US States or European countries which have high cannabis use due to cannabis legalisation/liberalisation regimes.**

**Cannabis is causal in 33 cancers as compared to tobacco which causes 14.** Regulatory agencies would withdraw pharmaceutical drugs with this profile, and medicinal cannabis needs to be withdrawn, perhaps excepting children with epileptic-like seizures.

The **methodology** for these studies has been recorded in one of the world's top scientific journals, **Nature - Scientific Reports**. **The same researchers are published in Cience and NEJM.**

Recent population studies have demonstrated that **cannabis is contributing significantly to the autism epidemic and increases in serious mental illnesses.**

The studies demonstrate that birth defects are caused by the parental use of cannabis by both mother and father. This is due to **cannabis use literally shattering chromosomes**, where the body's DNA repair mechanisms sometimes fail, causing mutations. These mutations are passed on to future generations, with cannabis significantly degrading the human genome.

A recent phenomenon, which reprises the **Thalidomide** birth defects of 50 years ago, where babies are **born without limbs**, correlates strongly to areas where cannabis has been fed to farm animals and become part of the human food change. This again establishes the teratogenic nature of cannabis.

Research in 2022 also demonstrated that cannabis **prematurely ages** users by an accelerated 30%.

Older research has demonstrated that cannabis causes **30% of new psychosis/schizophrenia diagnoses in London, and 50% in Amsterdam.** It has also been shown to be causal in violence and homicide.

Despite public misunderstanding, medicinal cannabis carries all of the harms of recreational cannabis use - cancers, birth defects, aging, psychosis etc.

Cannabidiol (**CBD**) is the **most cancer-causing** of the cannabinoids in cannabis, **causing 12 of 27 cancers** identified in an early population study. It is also the major cannabinoid that is causal for autism and some other birth defects.

CBD can be converted in laboratories **into Delta-8-THC**, which is as psychactive and as dangerous as Delta-9-THC.

CBD can still contain small quantities of THC which due to the long half-life of the substance, can accumulate in the body. **CBD thereby does not exempt users from the dangers of THC.**

**Hemp seed food ingredients** also will have small quantities of THC which, because of the amounts consumed, **can deliver THC amounts in excess of limits set by specific US States.**