

Press Release

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SAFE Glen Cove Coalition: Potential Risks of Delta-8 and Delta 10 THC

Since the legalization of marijuana, a proliferation of signs for delta-8 THC, delta-10 THC and CBD, or cannabidiol can be seen at gas stations, convenience stores, vape shops and online. Many people are left to determine which of these compounds are legal, whether it is safe to consume them and which of their supposed medicinal benefits hold up to scientific scrutiny. Immunological researchers maintain the rapid proliferation of cannabis products makes clear the need for the public to better understand what these compounds are derived from and what their true benefits and potential risks may be. While some research indicates promise in these products for medical applications, concerns about the fact that there are still many unknowns about their safety and their psychoactive properties remain a topic of scientific debate and research.

The differences between marijuana and hemp:

Cannabis sativa is the most common type of cannabis plant, has more than 100 compounds called cannabinoids.

- The most well-studied cannabinoids extracted from the cannabis plant include delta-9-tetrahydrocannabinol, or delta-9 THC, which is psychoactive. A psychoactive compound is one that affects how the brain functions, thereby altering mood, awareness, thoughts, feelings or behavior. Delta-9 THC is the main cannabinoid responsible for the high associated with marijuana. CBD, in contrast, is non-psychoactive.
- Marijuana and hemp are two different varieties of the cannabis plant. In the U.S., federal regulations stipulate that cannabis plants containing greater than 0.3% delta-9 THC should be classified as marijuana, while plants containing less should be classified as hemp. The marijuana grown today has high levels – from 10% to 30% – of delta-9 THC, while hemp plants contain 5% to 15% CBD.

In 2018, the Food and Drug Administration approved the use of CBD extracted from the cannabis plant to treat epilepsy. In addition to being a source of CBD, hemp plants can be used

commercially to develop a variety of other products such as textiles, paper, medicine, food, animal feed, biofuel, biodegradable plastic and construction material. Recognizing the potential broad applications of hemp, when Congress passed the Agriculture Improvement Act, called the Farm Bill, in 2018, it removed hemp from the category of controlled substances. This made it legal to grow hemp. When hemp-derived CBD saturated the market after passage of the Farm Bill, CBD manufacturers began to derive other forms of cannabinoids which led to the emergence of delta-8 and delta-10 THC whose minor differences cause them to exert different levels of psychoactive effects.

The properties of delta-9 THC:

- Delta-9 THC was one of the first forms of cannabinoid to be isolated from the cannabis plant in 1964. The highly psychoactive property of delta-9 THC is based on its ability to activate certain cannabinoid receptors, called CB1, in the brain. The receptor, CB1, is like a lock that can be opened only by a specific key – in this case, delta-9 THC – allowing the latter to affect certain cell functions.
- Delta-9 THC mimics the cannabinoids, called endocannabinoids, that our bodies naturally produce. Because delta-9 THC emulates the actions of endocannabinoids, it also affects the same brain functions they regulate, such as appetite, learning, memory, anxiety, depression, pain, sleep, mood, body temperature and immune responses.

The FDA approved delta-9 THC in 1985 to treat chemotherapy-induced nausea and vomiting in cancer patients and, in 1992, to stimulate appetite in HIV/AIDS patients.

The National Academy of Sciences has reported that cannabis is effective in alleviating chronic pain in adults and for improving muscle stiffness in patients with multiple sclerosis, an autoimmune disease. That report also suggested that cannabis may help sleep outcomes and fibromyalgia, a medical condition in which patients complain of fatigue and pain throughout the body. In fact, a combination of delta-9 THC and CBD has been used to treat muscle stiffness and spasms in multiple sclerosis. This medicine, called Sativex, is approved in many countries but not yet in the U.S.

There are no published clinical studies thus far on whether delta-8 THC can be used to treat the clinical disorders such as chemotherapy-induced nausea or appetite stimulation in HIV/AIDS that are responsive to delta-9 THC. The sale of delta-8 THC, especially in states where marijuana is illegal, has become highly controversial. Federal agencies consider all compounds isolated from marijuana or synthetic forms, similar to THC, Schedule I controlled substances, which means they currently have no accepted medical use and have considerable potential for abuse.

Additionally, researchers do not yet know much about delta-10 THC or any medicinal effects. Delta-10 THC is also derived from hemp CBD. People have anecdotally reported feeling euphoric and more focused after consuming delta-10 THC. Also, anecdotally, people who consume delta-10 THC say that it causes less of a high than delta-8 THC.

Additional research is required to determine the medical benefits, if any, of these substances. Researchers at the National Institute of Drug Abuse urge the public to take this fact into consideration when considering its use.

The National Institute on Drug Abuse (NIDA) is a component of the National Institutes of Health, U.S. Department of Health and Human Services. NIDA supports most of the world's research on the health aspects of drug use and addiction. The Institute carries out a large variety of programs to inform policy, improve practice, and advance addiction science. For more information about NIDA and its programs, visit www.nida.nih.gov.

The SAFE Glen Cove Coalition is concerned about marijuana use and its consequences on the health and development of youth. To learn more about the SAFE Glen Cove Coalition please follow us on www.facebook.com/safeglencovecoalition or visit SAFE's website to learn more about marijuana use at www.safeglencove.org.