

More older Americans using cannabis, underscoring need for research

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The U.S. Substance Abuse and Mental Health Services Administration has reported that cannabis use by persons over age 50 has outpaced recent growth observed across all other age groups. In 2000, about one percent of Americans over 50 had used it within the past year; by 2012, that number had risen to 3.9 percent.

Now, a team of researchers at the University of Iowa has analyzed the divergent pathways of [cannabis](#) use among the older adult population to demonstrate how attitudes, laws, and individual health needs can shape these paths.

"Some older persons have responded to changing social and legal environments, and are increasingly likely to take cannabis recreationally," said lead author Brian Kaskie, PhD, a professor at the University of Iowa College of Public Health. "Other older persons are experiencing age-related health care needs and some take cannabis for symptom management, as recommended by a medical doctor."

The majority of Americans over 50 who used cannabis in the past year indicate they have done so less than once every ten days, and one-quarter said they used it less than five times during the past year. More than nine out of 10 reported having no emotional or functional problems. Older users also were statistically more likely to have started taking cannabis before the age of 30, with many starting before the age of 18.

Kaskie and his colleagues consider how cannabis use among [older adults](#)

is being influenced variably by social attitudes, state laws, and individual characteristics such as health needs and prescription drug use, and rely on previous data analyses as well as original data collected from eight state medical cannabis programs to chart the different paths older adults are taking.

The article also focuses on the misuse and abuse of cannabis. It then explores two other prominent public health issues—the misuse of prescription medications and the under-treatment of pain at the end of life—and considers how cannabis substitution may be a viable policy alternative to combating these problems. As of 2016, 21 states have approved the use of medical cannabis for such age-related diagnosable conditions as glaucoma, cachexia, nausea, neurologic diseases, neuropathic pain, and conditions associated with cancer.

Yet, the authors argue that many critical [public health](#) policy questions cannot be answered largely because there is a pervasive lack of reliable and representative information being collected about cannabis and [older persons](#). They conclude by recommending a state-wide or national survey—that accounts for how changing legal, medical, and other norms have impacted older adults' attitudes and behaviors about taking cannabis—to help advance the public policy conversation.

More information: "The increasing use of cannabis among older Americans: A public health crisis or viable policy alternative?" *The Gerontologist* (2017). [DOI: 10.1093/geront/gnw166](https://doi.org/10.1093/geront/gnw166)

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