



Physicians and the war on drugs: The case for legalization

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The massive bureaucratic endeavor to interdict the enormous importation and marketing of recreational substances is not only futile and extravagant, but has no justification as a protective measure. This article provides clear inferential evidence to demonstrate that outlawed narcotics are less dangerous than their legal counterparts, a fact of which the public is largely unaware.

Although decriminalization would significantly benefit society, the only prospect of achieving that objective is via organized medicine. Both adversaries in the “drug war” would be disenfranchised by decriminalization and have huge resources to oppose any legislation that might conclude the “war.” This article is intended to initiate the profession’s potential role in that objective.

Drug war a fraud

When examined carefully, it becomes apparent that the war on drugs is a monumental fraud. The medical profession is in a pivotal position to expose the deception, and we have neglected our moral and social responsibility to exercise this role.

The government’s effort to obliterate these drugs is based on a false premise. Its demonstrable failure was totally predictable, and the war’s cost to society is enormous and growing. And, if the outlawed drugs were to be used legally, everyone would benefit, except for criminals, the lawyers, and the bureaucracies of the Drug Enforcement Administration (DEA), the Federal Bureau of Investigation (FBI), and the prison system. Those statements may seem extravagant, so let’s examine them.

Deception

The public, the judiciary, law enforcement agencies, and perhaps a major segment of our profession have been deceived into subscribing to a mind set that cocaine, heroin, and marijuana are toxic

and demonic substances so dangerous that society must be rigidly protected from them. Yes, it is true that they may have detrimental or even lethal consequences if indulged in abusively or inappropriately. But it is equally true that those same consequences are applicable to alcohol, nicotine, caffeine, sunshine, guns, airplanes, automobiles, boats, and a host of other potentially dangerous elements in our environment. The public is provided with some protection through educational measures and regulations on their use, but no one has suggested that any of these other ubiquitous hazards be outlawed. Why not? What is the evidence to justify making some possibly dangerous materials illegal and not others? Folklore, propaganda, and legends are abundantly applied to substantiate the government’s decisions about these serious measures, but there are simply no conclusive studies to justify these actions.

Even if heroin and cocaine were proven harmful (marijuana probably isn’t) the only hope for curtailing their detrimental consequences is not by prohibition but rather through a realistic acceptance of their presence, efforts to monitor purity and strength, and controlled distribution through licensing, as we do with alcohol and pharmaceuticals.

Our responsibility

It should be our profession’s responsibility to help the public understand the actual and comparative hazards of illegal substances so they can address the issue rationally. Pathologists should be more outspoken about their knowledge that with perhaps a few rare exceptions these “drugs”—which have been widely used for centuries—have never been identified with a serious or fatal disease process. Certainly the same cannot be said about tobacco, alcohol, or even caffeine, which account for hundreds of thousands of deaths per year.

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The relatively few deaths caused by these outlawed substances are solely attributable to contamination from their unhygienic use or to overdosing from misusing an unrecognized or high concentration of the intoxicant (comparable to quaffing a stiff Martini innocently made with 95 percent alcohol instead of the 40 percent you are used to), but not from any inherent toxic properties of the substances themselves.

The “demonizers” have focused the public’s attention on the small minority of abusers whose conspicuous behavior and disabling complications have serious consequences, while conveniently ignoring the millions of drug users who are leading normal, unimpaired, productive lives, as are the majority of those millions who indulge in alcoholic beverages. Although specific numbers are lacking to prove the widespread use, common sense tells us that the relatively few but conspicuous “junkies” could consume only a tiny fraction of the enormous drug trade, the bulk of which must be going to a huge population of unrecognized users who are showing no harm or impediment from the drugs. These users are at risk only because the substances are illegal and uncontrolled. Their alleged harm is legendary but never documented other than publicizing lurid images of the severely addicted. Why has our profession been so silent about this important misinformation?

Addiction issue

Addiction has been an excuse for alarm about these drugs, but that issue too is misleading. Addictions to various substances and activities are numerous. Each has a different degree of addictive severity and individuals differ in their susceptibility to a given compulsion. And, certainly addiction is not limited to illegal drugs. Much of the world’s population is firmly addicted to caffeine in the form of coffee and tea. Tobacco is known to be more addictive than heroin, and marijuana is minimally addictive, if at all. Why should heroin and cocaine addicts be treated with less tolerance, understanding, and support than we provide to cigarette, alcohol, chocolate, and gambling addicts? Our profession should play a larger role in clarifying this paradox and helping the public recognize that the illegal substances are not as addictive as many legal substances. The entrenched impression to the contrary will be difficult to dis-

pel and will need the authority of our profession to accomplish it.

Futile, costly efforts

Even if the contention that the drugs are harmless were to be erroneous, it is nevertheless obvious that the war against them has been a miserable failure, as any sensible historian could have predicted. Prohibition has never worked, as we learned in the futile attempt to enforce the 18th Amendment (1919) and the Volstead Act (1920), which outlawed alcohol. Economic forces dictate that any product that has a large demand will inevitably be supplied. It simply cannot be prevented, as this failed effort has proven once again. The futility of the interdiction effort is epitomized by the fact that illegal drugs are readily available even in most prisons. Highly publicized “drug busts” (even those that yield literally tons of a substance) represent only a tiny fraction of the huge market, which continues to operate with little or no evidence of slowing down. And, of course, the war (which both sides would hate to see end) provides a huge bonanza for the enforcement system, for the legal system, for the prison system, and especially for the drug marketers who are bleeding hundreds of billions of untaxed dollars out of our economy.

The monetary cost of this futile exercise is enormous, and its consequences to society are a national disgrace. The annual financial expenditure is difficult to ascertain, but let’s look at the extent to which it is easily evident in the public record: In fiscal 1998-99 the DEA spent more than \$1.4 billion on the drug war, not including: (a) the \$285 million spent on prosecuting narcotics cases by the 94 U.S. Attorney Offices; (b) the \$749 million spent on drug enforcement by the FBI; (c) the costs of the Coast Guard and other federal agencies involved in enforcement (not separately itemized); (d) the budgets of state and local enforcement agencies; and (e) the legal defense costs, some of which are sustained by public defenders. The biggest item is the horrendous cost of incarcerating the large number (but a small percentage of) traffickers who are caught, prosecuted, and convicted. The Justice Policy Institute estimates that in March 2000 more than one million nonviolent offenders were incarcerated chiefly for drug charges at a cost of more than \$23.7 billion for the entire year. Moreover,

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these data do not take into account the cost of superimposed theft crime to which addicts are driven by the necessity to pay inflated “street” prices for their drugs.

Added to the actual costs are significant lost revenues. The market for illegal drugs in the U.S. is estimated to be between \$200 billion and \$300 billion, almost none of which has been subject to either income tax or sales tax. It is too complex to factor the tax brackets of various suppliers and distributors and the sales taxes of different states, but it is fair to say that a legal market would yield several billion tax dollars to society’s profit.

Added to the huge monetary costs of the war is the untold destruction of the otherwise productive lives of those individuals in prison for an infraction whose harm to society is no greater and perhaps less than that of those who purvey liquor and cigarettes. Our current prison population of more than two million people—now the world’s largest number of incarcerated individuals—is becoming predominantly composed of those men and women arrested for drug-related offenses.

Advantages of legalization

To those individuals who have espoused the “party line” that legalization would result in an increased drug usage it should be pointed out: (1) that the present marketplace for illegal drugs is so huge and so ubiquitous that there is little evidence of restraint resulting from prohibition—indeed, it is now easier in many places for children to obtain illegal drugs than to buy beer; (2) that the criminal “pushers” of illegal drugs are continuously expanding their market by getting kids “hooked,” whereas legal distributors would be required to keep drugs away from children and would ultimately reduce total consumption by putting the criminal marketers out of business; (3) that legal drugs are subject to regulatory controls on distribution, labeling, purity, and advertising, which would eliminate the contamination and overdosing associated with the currently outlawed drugs; and (4) that if only a fraction of the more than \$20 billion enforcement effort were transferred to public education, we could expect to see drug usage follow the recent dramatic pattern of declining consumption of tobacco and alcohol. Education works; prohibition doesn’t.

The depth of prejudice and the impact of misin-

formation on this sensitive issue is so great that the only hope of reversing it is with an authoritative body taking a stand and promoting that position. A small but a significant start has been made by the Drug Policy Foundation, supported by philanthropist George Soros and other groups of concerned citizens. But these efforts have been and will remain ineffectual against the enormous resources of the drug enforcement bureaucracy and the drug cartels of organized crime, both of which would vigorously oppose any attempts at decriminalization. The only realistic possibility of mounting a successful campaign to disseminate the truth lies in the moral, intellectual, and numerical strength of the medical profession. With our initiative to dispel the misleading information, we can expect to be joined by other professions and perhaps even by the judiciary. Both our profession and the public need to be more aware of the National Coalition for Drug Policy Change, which encompasses several hundred individuals, including 95 public officials, 142 physicians, and 82 attorneys. There is also growing outspoken support from prominent individuals such as Milton Friedman and Joseph McNamara of the Hoover Institute, former U.S. Secretary of State George Schultz, and Governor Gary E. Johnson of New Mexico.

As physicians, we must start the process by persuading all of our professional organizations to remove their blinders and declare a position that will change the attitude of the public and our legislators! It will not be without powerful opposition from the richly funded drug cartels and enforcement agencies, but it will be a great service to society. □

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