Introduction: Women and Cannabis: Medicine, Science, and Sociology

The Journal of Cannabis Therapeutics: Studies in Endogenous, Herbal & Synthetic Cannabinoids is pleased to present its second special issue on the subject of Women and Cannabis: Medicine, Science, and Sociology. This topic is particularly appropriate on a couple of levels. Firstly, medical research has been remiss in addressing women's issues on a historical basis. Secondly, many gender-specific conditions, and female-predominant medical conditions are popularly treated with cannabis (Grinspoon and Bakalar 1997). These include dysmenorrhea, migraine (Russo 2001; Russo 1998), fibromyalgia, and a wide variety of autoimmune disorders such as rheumatoid arthritis (Malfait et al. 2000), and multiple sclerosis. The latter receives particular attention in this publication.

This survey begins with a historical review of cannabis in treatment of obstetrical and gynecological conditions. A surprising volume and depth of documentation is evident, which only now is subject to scientific investigation and verification. A "fertile field" for additional research is evident.

An Italian research team, Bari et al., examine the critical role that endocannabinoids play in fertilization mechanisms. The last decade has revealed numerous physiological roles in which this system plays a key part.

Ester Fride follows with another illustration, that of endocannabinoids and neonatal feeding. It would seem that without this necessary endocannabinoid stimulus, we might all starve to death just as life was commencing. The presence of trace concentrations of endocannabinoids in breast milk underline the importance of this system in physiological maintenance of life and homeostasis.

In order to achieve successful birth, pregnancy maintenance is a critical prerequisite. Wei-Ni Lin Curry examines the controversial treatment of

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hyperemesis gravidarum with cannabis in an "underground research study." Provocative questions and possibilities result.

What of the sequelae of maternal cannabis usage? Peter Fried reviews the large body of literature that has examined the progeny of such pregnancies and their possible effects on cognition in children.

How should we educate about clinical cannabis? Mary Lynn Mathre tells us from the perspective of an addiction treatment nurse specialist.

Melanie Dreher presents an anthropological and sociological study from Jamaica that supports the prospect that cannabis, itself labeled as a drug of abuse, might well serve to treat and prevent addiction to cocaine, an idea first proposed in the 19th century (Mattison 1891), but still causing notice in the 21st. In the lyrics to his 1981 song, "Champagne and Reefer," blues artist, Muddy Waters commented on the issue (Waters 1981):

I'm gonna get high Gonna get high just as sure as you know my name. Y'know I'm gonna get so high this morning It's going to be a crying shame. Well you know I'm gonna stick with my reefer Ain't gonna be messin' round with no cocaine.

Mila Jansen, an inventor and businesswoman from Holland, and Robbie Terris present the rationale behind the clinical use of cannabis as hashish, and the modern methods she has developed for its production.

Kirsten Müller-Vahl et al. review the effects of cannabis in the movement disorder, Tourette syndrome, and present a detailed case study where it seemed to be beneficial.

Clare Hodges comments on her affliction with multiple sclerosis, a cruel disease whose victims have been at the forefront of clinical cannabis claims. She documents her experience and those of other patients.

Denis Petro follows with a seminal review of the topic and the evidence to date that supports a role for cannabis in MS treatment.

We hope that this collection will advance the topic of women's medicine and at least promote the consideration of cannabis and cannabinoid treatment of recalcitrant clinical conditions.

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