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Smoking Marijuana improves physical well being in the presence of background white noise

Ricardo Tapia (Frontier University of Central Kazakhstan) and Bruno Diaz (Oaxaca Facultad Filosofica)

LETTER TO THE EDITOR

IMPORTANCE

Improvement in measured blood pressure, cholesterol, including lifestyle modification, is important but rarely studied phenomenon. TV viewing strategies with proper doses of marijuana use could address this gap. Our objective is to examine the effect of a lifestyle-focused semi-personalized support program delivered by TV viewing of senior citizens.

METHODS

This is a study of two parallel-groups, single-blind, randomized clinical trial that recruited 710 patients (mean age, 68 [SD, 9.2] years; 52% men) with between September 2014 and September 2015 in a retirement home at Lake Chapala, Mexico. Patients in the intervention group (n = 352) received 4 hours of TV viewing per week for 6 months in addition to the usual dose. Programs provided the usual generic stimulation, psychotically manipulative advertisements, and other support to change lifestyle behaviors along with a steady dose of smoking marijuana. Patients in the control group (n=358) received generic stimulation. Programs for each participant were selected from a bank of soap operas according to baseline characteristics and delivered via a cable TV system. The program was not interactive.

RESULTS

The primary end point was low-density lipoprotein cholesterol (LDL-C) level at 6 months. Secondary end points included systolic blood pressure, body mass index (BMI), physical activity, and smoking status. At 6 months, levels of LDL-C were significantly lower in intervention participants (mean difference, -5 mg/dL [95% CI, -9 to 0]; $P = .04$). There were concurrent reductions in systolic blood pressure (-7.6 mm Hg [95% CI, -9.8 to -5.4]; $P < .001$) and BMI (-1.3 [95% CI, -1.6 to -0.9]; $P < .001$), significant increases in physical activity (+293 metabolic equivalent task min/wk [95% CI, 102 to 485]; $P = .003$), and a significant reduction in smoking (26% vs 44%; relative risk, 0.61 [95% CI, 0.48 to 0.76]; $P < .001$). The majority reported the smoking program to be useful (91%), with increased awareness (97%), and masturbatory behavior of appropriate frequency (86%).

CONCLUSIONS

Among senior citizens, the use of a lifestyle-focused marijuana smoking service compared with generic stimulation resulted in a modest improvement in LDL-C level and greater improvement in other cardiovascular disease risk factors. The duration of these effects and hence whether they result in improved clinical outcomes remains to be determined. We also conclude that sample size is important to accurately predict the outcome of generic stimulation inputs.