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Dear Law Enforcement Friends:

Under the "medical" marijuana bill a young woman over 18 will be able to obtain marijuana if she has a "medical condition" that produces "severe nausea." (Section 3 of the bill). This can include pregnancy. Women often have severe nausea in their first trimester. Pregnancy is a medical condition.

Enclosed is a study showing the link between marijuana use in early pregnancy and childhood cancer. This is an example of how this well intended bill can have unintended and devastating consequences.

Of course, the bill could be amended to exclude pregnant women but there may be other consequences of marijuana use similar to this that are unknown. That is why we should stay with our normal FDA drug approval process. The FDA provides information on the risks of a drug in the package insert. Until we know more about marijuana it should not be approved as a medicine.

There is no package insert for smoked marijuana. This bill allows you to grow your own medicine and you decide the dose and purity. Smoking is a very poor way to deliver a drug. There is no way to calculate the dose of smoked marijuana because there is no way to determine how much is actually being inhaled. There is no way for a patient to determine the strength of marijuana necessary. In addition, the harmful chemicals and carcinogens that are byproducts of smoked marijuana create new health problems.

Please contact your legislators and ask them to vote no on Senate Bill 119 and Assembly Bill 804.

Maternal use of recreational drugs and neuroblastoma in offspring: a report from the Children's Oncology Group (United States).

Bluhm EC, Daniels J, Pollock BH, Olshan AF; Children's Oncology Group (United States).

Department of Epidemiology, University of North Carolina at Chapel Hill, CB #7435, Chapel Hill, NC 27599-7435, USA.

OBJECTIVE: To evaluate whether maternal use of recreational drugs around conception and pregnancy influences the risk of childhood neuroblastoma. **METHODS:** Self-reported use of recreational drugs from one month prior to pregnancy until diagnosis was assessed among mothers of 538 children with neuroblastoma (diagnosed 1992-1994 and identified through the Children's Cancer Group and Pediatric Oncology Group) and 504 age-matched controls (identified by random-digit dialing). Odds ratios (OR) and 95% confidence intervals (CI) were estimated using unconditional logistic regression, adjusting for age at diagnosis and household income. **RESULTS:** Maternal use of any illicit or recreational drug around pregnancy was associated with an increased risk of neuroblastoma in offspring (OR = 1.82, 95% CI: 1.13, 3.00), particularly use of marijuana in the first trimester of pregnancy (OR = 4.75, 95% CI: 1.55, 16.48). Marijuana use in the month before pregnancy did not increase risk. The effect of gestational marijuana exposure was strongest in subjects diagnosed before age one. Evaluation of recreational drugs other than marijuana was limited by infrequent use, and analyses of drug use by fathers were not carried out due to missing data. **CONCLUSIONS:** Maternal recreational drug use and marijuana use during pregnancy were associated with increased risk of neuroblastoma in offspring. Further examination of these drugs and the risk of childhood cancer is warranted.



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- [NCI Home](#)
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- [Clinical Trials](#)
- [Cancer Statistics](#)
- [Research & Funding](#)
- [News](#)
- [About NCI](#)

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Last Modified: 07/01/2008

> [General Information About Neuroblastoma](#)

[Stages of Neuroblastoma](#)

[Progressive/Recurrent Neuroblastoma](#)

[Treatment Option Overview](#)

[Treatment Options for Neuroblastoma](#)

[To Learn More About Neuroblastoma](#)

[Get More Information From NCI](#)

[Changes to This Summary \(07/01/2008\)](#)

[About PDQ](#)

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- [Print This Page](#)
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- [View Entire Document](#)
- [E-Mail This Document](#)

Quick Links

- [Director's Corner](#)
- [Dictionary of Cancer Terms](#)
- [NCI Drug Dictionary](#)
- [Funding Opportunities](#)
- [NCI Publications](#)
- [Advisory Boards and Groups](#)
- [Science Serving People](#)
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General Information About Neuroblastoma

Key Points for This Section

- **Neuroblastoma is a disease in which malignant (cancer) cells form in nerve tissue of the adrenal gland, neck, chest, or spinal cord.**
- Possible signs of neuroblastoma include bone pain and a lump in the abdomen, neck, or chest.
- Tests that examine many different body tissues and fluids are used to detect (find) and diagnose neuroblastoma.
- Certain factors affect prognosis (chance of recovery) and treatment options.

Neuroblastoma is a disease in which malignant (cancer) cells form in nerve tissue of the adrenal gland, neck, chest, or spinal cord.

Neuroblastoma often begins in the nerve tissue of the adrenal glands. There are two adrenal glands, one on top of each kidney in the back of the upper abdomen. The adrenal glands produce important hormones that help control heart rate, blood pressure, blood sugar, and the way the body reacts to stress. Neuroblastoma may also begin in the chest, in nerve tissue near the spine in the neck, or in the spinal cord.

Neuroblastoma most often begins during early childhood, usually in children younger than 5 years. It sometimes forms before birth but is usually found later, when the tumor begins to grow and cause symptoms. In rare cases, neuroblastoma may be found before birth by fetal ultrasound.

By the time neuroblastoma is diagnosed, the cancer has usually metastasized (spread), most often to the lymph nodes, bones, bone marrow, liver, and skin.

(See the [PDQ](#) summary on Neuroblastoma Screening for more information.)

Possible signs of neuroblastoma include bone pain and a lump in the abdomen, neck, or chest.

The most common symptoms of neuroblastoma are caused by the tumor pressing on nearby tissues as it grows or by cancer spreading to the bone. These and other symptoms may be caused by neuroblastoma. Other conditions may cause the same symptoms. A doctor should be consulted if any of the following problems occur:

- Lump in the abdomen, neck, or chest.
- Bulging eyes.
- Dark circles around the eyes ("black eyes").
- Bone pain.
- Swollen stomach and trouble breathing in infants.
- Painless, bluish lumps under the skin in infants.
- Weakness or paralysis (loss of ability to move a body part).

Less common signs of neuroblastoma include the following:

- Fever.
- Shortness of breath.
- Feeling tired.
- Easy bruising or bleeding.
- Petechiae (flat, pinpoint spots under the skin caused by bleeding).

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- High blood pressure
- Severe watery diarrhea.
- Jerky muscle movements
- Uncontrolled eye movement.
- Swelling of the legs, ankles, feet, or scrotum.

Tests that examine many different body tissues and fluids are used to detect (find) and diagnose neuroblastoma.

The following tests and procedures may be used:

- **Physical exam and history:** An exam of the body to check general signs of health, including checking for signs of disease, such as lumps or anything else that seems unusual. A history of the patient's health habits and past illnesses and treatments will also be taken.
- **Twenty-four-hour urine test:** A test in which urine is collected for 24 hours to measure the amounts of certain substances. An unusual (higher or lower than normal) amount of a substance can be a sign of disease in the organ or tissue that makes it. A higher than normal amount of the substances homovanillic acid (HMA) and vanillyl mandelic acid (VMA) may be a sign of neuroblastoma.
- **Blood chemistry studies:** A procedure in which a blood sample is checked to measure the amounts of certain substances released into the blood by organs and tissues in the body. An unusual (higher or lower than normal) amount of a substance can be a sign of disease in the organ or tissue that makes it. A higher than normal amount of the hormones dopamine and norepinephrine may be a sign of neuroblastoma.
- **Cytogenetic analysis:** A laboratory test in which cells in a sample of tissue are viewed under a microscope to look for certain changes in the chromosomes.
- **Bone marrow aspiration and biopsy:** The removal of bone marrow, blood, and a small piece of bone by inserting a hollow needle into the hipbone or breastbone. A pathologist views the bone marrow, blood, and bone under a microscope to look for signs of cancer.
- **Biopsy:** The removal of cells or tissues so they can be viewed under a microscope by a pathologist to check for signs of cancer.
- **X-ray:** An x-ray is a type of energy beam that can go through the body and onto film, making a picture of areas inside the body.
- **CT scan (CAT scan):** A procedure that makes a series of detailed pictures of areas inside the body, taken from different angles. The pictures are made by a computer linked to an x-ray machine. A dye may be injected into a vein or swallowed to help the organs or tissues show up more clearly. This procedure is also called computed tomography, computerized tomography, or computerized axial tomography.
- **Neurological exam:** A series of questions and tests to check the brain, spinal cord, and nerve function. The exam checks a person's mental status, coordination, and ability to walk normally, and how well the muscles, senses, and reflexes work. This may also be called a neuro exam or a neurologic exam.
- **Ultrasound exam:** A procedure in which high-energy sound waves (ultrasound) are bounced off internal tissues or organs and make echoes. The echoes form a picture of body tissues called a sonogram. The picture can be printed to be looked at later.
- **Immunohistochemistry study:** A laboratory test in which a substance such as an antibody, dye, or radioisotope is added to a sample of cancer tissue to test for certain antigens. This type of study is used to tell the difference between different types of cancer.

Certain factors affect prognosis (chance of recovery) and treatment options.

The prognosis (chance of recovery) and treatment options depend on the following:

- Age of the child when diagnosed.
- **Stage** of the cancer.
- Where the tumor is in the body.
- Tumor histology (the shape, function, and structure of the tumor cells).

Prognosis and treatment decisions for neuroblastoma are also affected by tumor biology, which includes:

- The patterns of the tumor cells.
- How different the tumor cells are from normal cells.
- How fast the tumor cells are growing.
- The number of chromosomes in the tumor cells.
- How many copies of the N-myc gene there are.

The tumor biology is said to be favorable or unfavorable, depending on these factors. A favorable tumor biology means there is a better chance of recovery.

[^ Back to Top](#)

[Next Section >](#)