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Collection Name		TURNER, CARLTON: FILES				Withdrawer		
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File F	Folder	[CHRON FILE - NON-ROUTINE CORRESPON	NDENC	E -	FOIA			
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1	MEMO	C. TURNER TO ED GRAY RE CULVER KIDD LETTER	1	1/27/198	2			
		THE ABOVE DOCUMENT IS PENDING REV E.O. 13233	VIEW II	N ACCORI	DANCE	WITH		
2	MEMO	C. TURNER TO ED GRAY RE DRUG SITUATION IN FLORIDA	3	1/12/198	2			
		THE ABOVE DOCUMENT IS PENDING REV E.O. 13233	VIEW I	N ACCORI	DANCE	WITH		
3	MEMO	C. TURNER TO ED GRAY RE DRAFT OF PROPOSED LETTER FOR PRESIDENT OF COLOMBIA	1	1/12/198	2	090310		
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4	MEMO	C. TURNER TO ED GRAY RE MEETING WITH DEPT, OF TRANSPORATION REAGARDING COAST GUARD	1	1/7/1982	2			
		THE ABOVE DOCUMENT IS PENDING REV E.O. 13233	VIEW II	N ACCORI	DANCE	WITH		
5	NOTES	NOTES FROM MEETING OF THE OVERSIGHT WORKING GROUP, OCTOBER 29, 1981	1	10/29/198	31			
/	/	THE ABOVE DOCUMENT IS PENDING REV E.O. 13233	VIEW I	I ACCORI	DANCE	WITH		

Freedom of Information Act - [5 U.S.C. 552(b)]

B-2 Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]

B-3 Release would violate a Federal statute [(b)(3) of the FOIA]

- B-4 Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA] B-6 Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA] B-7 Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]

- B-8 Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA] B-9 Release would disclose geological or geophysical information concerning wells [(b)(9) of the FOIA]

B-1 National security classified information [(b)(1) of the FOIA]

January 28,1983

119079 P. FG006-01 FG006-07

MEMORANDUM FOR THE RECORD

RE: CARLTON TURNER FILES

Jennifer Nelson of Dr. Turner's office sent these records to ORM recently.

The routine correspondence has been removed and filed in the alphabetical files.

The files are arranged in rough alphabetical order.

Enclosures filed in 6100. Oversize Attachments #----

January Memos

THE WHITE HOUSE

WASHINGTON

January 29, 1982

MEMORANDUM FOR CABINET COUNCIL WORKING GROUP MEMBERS

A Working Group on Drug Abuse Health Issues has been established under the Cabinet Council on Human Resources. This group will be concerned with prevention and education, detoxification, treatment and rehabilitation, and research. Establishment of another working group to address drug law enforcement and international cooperation is being evaluated.

The Working Group will play a key role in the preparation and implementation of the federal strategy for drug abuse prevention and control.

The White House Office of Policy Development is preparing a preliminary draft of the formal strategy. This draft is based on the major points of the President's program. A copy of my testimony before the Congress in November of 1981 is enclosed for your information.

It is important that your agency be actively involved in the consideration of this initial draft and in subsequent revisions. Far-reaching policy recommendations will be made by this group and reflected in the formal strategy. Therefore, it is necessary that your representative be one who serves at the policy level in your organization.

Please designate a person to serve on the Working Group and advise my office (456-6554) of the name of the designee by close of business on Wednesday, February 3, 1982.

The first meeting of the Working Group on Drug Abuse Health Issues under the Cabinet Council on Human Resources will be held on February 10, 1982 at 1:30 PM in room 330 of the Old Executive Office Building. At that meeting, a preliminary draft of selected chapters will be given to your representative and discussions will be held on how the group will function.

Dr. Carlton E. Turner Senior Policy Adviser

CABINET COUNCIL WORKING GROUP MEMBERS 1/7/82

Dr. Loran D. Archer Acting Director National Institute on Alcohol Abuse and Alcoholism Room 16-105 Parklawn Building 5600 Fishers Lane Rockville, Maryland 20857 Phone: 443-3885

Dr. Stewart Baker, M.D. Associate Director Mental Health and Behavioral Science Service (for Alcohol and Drug Dependents) Veterans Administration Central Office 116 A 3 810 Vermont Avenue, NW Washington, D.C. 20420 Phone: 389-5193

Dr. Manuel Gallardo Demand Reduction Consultant Office of Global Strategy and Support Bureau of International Narcotic Matters Room 7813 Department of State Washington, D.C. 20520 Phone: 632-7155

Dr. G. A. Keyworth, II Director OSTP/Science and Technology Adviser to the President 360 OEOB Washington, D.C. 20500 Phone: 456-7116

Mr. Robert W. Lewis Special Assistant to the Deputy Undersecretary Department of Education Room 4079 400 Maryland Avenue, SW Washington, D.C. 20202 Phone: 755-2655

Mr. Donald Mathes Senior Planning Officer Planning and Guidance Staff [Programs] International Communications Agency Room 704 1750 Pennsylvania Avenue Washington, D.C. 20547 Phone: 724-9198

If there are any changes please notify Lynne 456-6554 before the next meeting.

Dr. William Mayer Administrator ADAMHA Room 12105 Parklawn Building 5600 Fishers Lane Rockville, Maryland 20857 Phone: 443-4797

Dr. John F. Mazzuchi Staff Director OASD(HA)/ODAAP Pentagon 3D-171 Washington, D.C. 20301 Phone: 695-6800

Dr. Herbert Pardes Director National Institute of Mental Health Room 17-99 5600 Fishers Lane Rockville, Maryland 20857 Phone: 443-3673

Mr. Tom Pauken Director Action Room 500 806 Connecticut Avenue, NW Washington, D.C. 20525 Phone: 254-3120

Dr. William Pollin Director National Institute on Drug Abuse Room 10-05 5600 Fishers Lane Rockville, Maryland 20857 Phone: 443-6480

Dr. Patricia J. Sparks, M.D. MPH Medical Officer Officer of Occupational Medicine Directorate of Technical Support OSHA Department of Labor 200 Constitutiton Avenue, NW Washington, D.C. 20210 Phone: 523-7193

Mr. Andrew W. Swantak Special Assistant to the Deputy Secretary United States Department of Transportation Room 10-200 400 Seventh Street, SW Washington, D.C. 20590 Phone: 426-0237

THE WHITE HOUSE

WASHINGTON

January 28, 1982

FOR: RONALD B. FRANKUM

FROM: CARLTON E. TURNER

SUBJECT: Monthly Activities Report, January

I. Prepared Materials

Questions and Answers were prepared for the Presidents Press Conference

- II. New Initiatives
- 1 A Working Group on Drug Abuse Health Issues was organized and established under the Cabinet Council on Human Resources.
- 2 Met with people at Action to assist with the White House Briefing on Drug Use and Families sponsored by Action.

III. Activities Report

- 1 Drafted papers for United Nations Commission on Narcotic Drugs.
- 2 Drafted letter to President of Colombia regarding eradication of drugs.
- 3 In a memo on the Drug Situation in Florida, encouraged consideration be given to having the Vice President chair the South Florida Task Force to investigate/study the situation and efforts that could be undertaken in Florida to stop the drug flow into the U.S.
- 4 Met with several members of Congress.
- 5 Meetings were held with the Minister of Finance of India who is responsible for Drug affairs in his country.
- 6 Visited U.S. Customs service at Dulles Airport for familiarization with enforcement capabilities at that facility.
- 7 Meetings were held with Ken Krautter of Stop Drugs at the Source.
- 8 Meetings were held with the President and Vice President of the American Academy of Pediatrics.
- 9 Meetings were held with representatives of leading Pharmaceutical firms.

THE WHITE HOUSE

WASHINGTON

January 27, 1982

FOR: EDWIN GRAY FROM: CARLTON TURNER

SUBJECT: Senate Drug Enforcement Caucus/Paula Hawkins

Attached is a copy of a letter from Senator Hawkins regarding my addressing the first meeting of the caucus. Also attached is a list of the caucus membership and their staff contact.

cc: Ron Frankum Dan Leonard Dick Williams Alnited States Senate

WASHINGTON, D.C. 20510

JAN 25 AM

AULA HAWKINS

January 22, 1982

Dr. Carlton E. Turner Senior Policy Advisor for Drug Policy The White House Office of Policy Development The White House

20500

Washington, D.C. Dear Dr. Turner:

I want to join with your many supporters and friends in the United States Senate to express my admiration for your record of unselfish public service in the field of drug abuse.

As a follow-up to your conversation with John Dudinsky of my staff, I want to extend an invitation to you to address the first meeting of the Senate Drug Enforcement Caucus on February 23, 1982. The Caucus is an informal bipartisan forum of 22 United States Senators designed to share information and jointly seek solutions to the national problem of drug abuse.

Thank you for your kind attention to this invitation. The Senate Drug Enforcement Caucus looks forward to working closely with you during the second session of the 97th Congress. We would also be pleased to have Dan Leonard and Fred Colgan attend our first meeting.

Sincerely yours,

Paula Hawkins United States Senator

PH:jd/nc

The Senate Drug Enforcement Caucus

Chairman Paula Hawkins

Members	Staff Contact	Phone
Senator Bentsen (Tex.)	Steve Aguilar	4-5922
Senator Boschwitz (Minn.)	Barbara Thompson	4-5641
Senator Burdick (N. Dak.)	Ann Humphrey	4-1184
Senator Cochran (Miss.)	June Walton	4-3148
Senator D'Amato (N.Y.)	Pat Tierney Tanya Metaksa	4-8350 4-8350
Senator Denton (Ala.)	Karl Moor	4-6136
Senator Dole (Kans.)	Scott Richardson Ed Duckers	4-6521 4-6521
Senator East (N.C.)	Sam Francis	4-3911
Senator Garn (Utah)	Charmaine Hart	4-1334
Senator Grassley (Iowa)	Sara Thomasson	4-3744
Senator Hayakawa (Cal.)	Betty McKay George Brazier	4-3841 4-3841
Senator Heinz (Pa.)	Richard Bryer	4-6324
Senator Hollings (S.C.)	Ashley Thrift	4-6121
Senator Inouye (Hawaii)	Robbie Alm	4-3934
Senator Mattingly (Ga.)	Woody Woodworth	4-8048
Senator Mitchell (Maine)	Charlene Stubitts	4-5344
Senator Moynihan (N.Y.)	Debbie Alfred	4-4451
Senator Schmitt (N. Mex.)	Jennifer Salisbury	4-5521
Senator Spector (Pa.)	Kevin Mills	4-8178
Senator Symms (Idaho)	Ann Canfield	4-6142
Senator Thurmond (S.C.)	Duke Short	4-8248
Senate Drug Enforcement Caucus	Stu Sweet John Dudinsky	4-3041 4-3041

THE WHITE HOUSE

WASHINGTON

January 27, 1982

FOR: EDWIN GRAY FROM: CARLTON TURNER

SUBJECT: Stop Drugs at the Source/Culver Kidd Letter

Attached you will find a copy of a letter State Senator Culver Kidd of Georgia sent to me via Mr. Ken Krautter. My response to Senator Kidd is attached.

I plan to keep in contact with Mr. Krautter. They are in effect promoting elements of the President's drug program.

In my opinion, we cannot let the President sign Senator Kidd's letter. Mr. Krautter will be attempting to get the letter to the President via other sources, routes etc.

THE WHITE HOUSE

WASHINGTON

January 22, 1982

Dear Senator Kidd:

Mr. Ken Krautter delivered to me a letter you had sent to President Reagan. The President signed the "Response to the People from Executive Branches" on January 22, 1981 which acknowledged his support of the concept of eliminating drugs as close to the source as possible.

Progress has been made in other areas as well. The President has stated that he would pursue "a foreign policy that vigorously seeks to interdict and eradicate illicit drugs, wherever cultivated, processed or transported. This includes the responsible use of herbicides." The President has also stated that he would have "a border policy that would improve detection and interception of illegal and narcotic imports." This will include the use of available military resources for detection when necessary. Since the President made those comments in September, the Congress has responded by removing the restriction against using foreign assistance money to initiate eradication programs to destroy narcotic plants using herbicides.

Congress also granted an exception to Posse Comitatus. This exception will allow Military information to be shared with law enforcement agencies. Equipment and other resources can also be shared under this exception.

Let me reiterate my appreciation of your continuing support of efforts in reducing the supply of drugs available to our young people.

Sincerely,

Carlton E. Turner, Ph. D. Senior Policy Adviser for Drug Policy

The Honorable Culver Kidd Senator of the State of Georgia Atlanta, Georgia 30334 CULVER KIDD District 25 P. O. Box 370 Milledgeville, Georgia 31061



COMMITTEES:

Governmental Operations, Chairman Human Resources Rules

SUBCOMMITTEES:

Merit System Social Services and Vocational Rehabilitation

The State Senate

Atlanta, Georgia 30334

BY HAND

January 18, 1982

BY HAND

The Honorable Ronald Reagan President of the United States The White House Washington, D. C. 20500

Dear Mr. President:

This letter is to inform you that Mr. Ken Krautter has accepted the appointment of National Coordinator for the United States Stop Drugs at the Source Campaign and International Coordinator for the International Stop Drugs at the Source Agreement. Please request by signing below that your Cabinet members charged with the drug problem responsibility instruct their people to participate in the coordination of the petition campaign and the response.

Mr. President, your commitment has given us the necessary national leadership to set in motion the Stop Drugs at the Source process to keep harmful and illicit drugs away from our children. We thank you very much. Please sign below and forward a copy to the appropriate Cabinet members and also the appropriate members of your White House staff.

Sincerely yours,

Culver Kidd, Chairman Senate Stop Drugs at the Source Committee

The President of the United States

DATE

THE WHITE HOUSE

WASHINGTON

January 26, 1982

FOR: EDWIN GRAY

FROM: CARLTON TURNER

SUBJECT: High Times article "Reagan's Dope Adviser"

Attached is an article called "Reagan's Dope Adviser" from <u>High Times</u>, a pro-drug magazine. It was published in their February issue and is being distributed and sold as of last week. The information is scientific and was obtained in an interview granted in 1978. The picture on the front cover was taken in 1976 and the picture in the body of the article was purchased from Discover a popular science magazine.

Feed back on the article has been favorable. In fact the parents groups feel the article will help them and the President's program.





Cariton Turner

From pot farmer to dope czar: This is the secret dream of every Humboldt County cannabis cultivator. But last year it was achieved by a good old boy from the deep South, when Ronald Reagan reached out and plucked Dr. Carlton Turner from the sultry bayou bottomland of Louisiana and installed him as the White House special adviser on drugs. For ten years, ever since grad school, Carlton Turner occupied himself at the Ole Miss pot farm, raising marijuana for the use of heavily credentialed administrators of six-digit federal grants awarded by the National Institute on Drug Abuse. His main appearances outside of University, Mississippi, had been on behalf of the American Council on Marijuana and Other Psychoactive Drugs, Inc., a privately funded antigrass lobby on Capitol Hill on which Dr. Turner has served as top-billed scientific adviser since 1980. But last year, when the Reagan people wanted a compatible personality to preside over drugs-of-abuse issues, Dr. Turner was abruptly ensconced in the White House. Turner's area of expertise is strictly limited to the chemistry and botany of Cannabis sativa L. How could this have come to pass?

Well, consider James Watt, running the Department of the Interior, after a lifetime spent lobbying for the opening of wilderness areas for exploitation by the industrial interests Watt represents. The Reagan people like to appoint foxes to guard chicken coops, that's all. So Dr. Turner is the particular fox for our coop.

His main aim with the Ole Miss pot farm, as he candidly tells Ed Rosenthal, author of Marijuana Grower's Guide and a frequent contributor to HIGH TIMES, was always to find things in marijuana that would "enhance the economy of the state of Mississippi through the pharmaceutical industry." This took the form of isolating out of "this crude drug cannabis" the agent delta-9 tetrahydrocannabinol (THC), mainly, so that its most minute molecular



structure could be synthesized by commercial drug companies, who would modify it just enough so that it would be patentable for them, as Nabilone (Eli Lilly), levantradol (Pfizer) or whatnot. This crude drug kills mild pain, reduces inflammation, quells nausea, promotes drowsiness, and has over 20 other clearly identifiable pharmacological effects. It was Turner's mission at Ole Miss to help find which part of the plant did what, so that its various active principles could be counterfeited and merchandised eventually by the big drug companies.

The foxy part was keeping a lid on cannabis itself, while glorifying the various synthetic preparations. Thus Carlton Turner was never comfortable at all talking about marijuana, this crude drug. In fact, it makes Turner just exquisitely uncomfortable any time he has to address the issue of how his immaculate synthetics are always tainted by association with this crude herb. Carlton Turner before a flock of pharmaceuticals magnates at a banquet meeting of the American Council on Marijuana, 1980: "As a pure substance, single in nature, made synthetically in the laboratory, delta-9 THC doesn't know the Cannabis plant nor the crude drug, marijuana, exist."

Unhappily it does exist, as a naturally occurring organic entity, and therefore this pure, single delta-9 THC is unpatentable. This makes the pharmaceutical industry exceedingly nervous. Some suspect that the industry might even oppose a relaxation of legal restraints on marijuana just to cut down on competition with their glorious future THC homologues.

As for the evidence Dr. Turner cites to support his gloomy views on the crude herb itself, well, consider that he also cites The Decline and Fall of the Roman Empire (to sort of conjure up a vision of how jazz singers and their white-liberal groupies are eroding the general cultural fabric with this hallucinogen). Pharmacology is not Turner's long suit. The Heath brain-damage reports had already been amply discredited for biased methodology and foggy results even before Turner cited them in 1978. But NIDA by then had already published a Berkeley study showing that an ounce of grass yields precisely 1.5 times as many potential carcinogens as an ounce of tobacco; so that when you smoke a spliff the size of a Lucky,

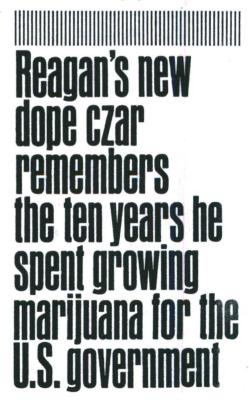
you're taking in a Lucky and a half's worth of potential carcinogens.

At the time the interview was conducted (1978), Dr. Turner was still running the federal pot farm. We sent Ed Rosenthal down to Ole Miss to lock horns with the good doctor about federal drug policy. Instead, the two of them chatted away about the potency of their plants.

When Rosenthal came away from Ole Miss, he voiced concern that the government was using as an expert a person so naive about drugs. With all the pot he has grown, Turner claims he has never gotten high. Never had a 'lude or dropped acid. Nothing. Rosenthal is convinced that based on personal experience and lifestyle, that he, not Turner, is qualified to run NIDA and the FDA.

HIGH TIMES: What is the relationship between you, the government, and the university?

TURNER: I am an employee of the Research



"Knowing that you can grow Cannabis anywhere, I think it would be impossible for the government to absolutely eradicate use."

Institute of Pharmaceutical Sciences [RIPS], which is located in the School of Pharmacy at the University of Mississippi. The research institute was created in 1964 by an enabling act of the state legislature. Our job is to enhance the economy of the state of Mississippi through the pharmaceutical industry. It is the only institute that I know of anywhere in the world that is funded as a line item from the state legislature, is housed in an academic department and is really dovetailed with academia. Each member of the university staff must do research, since RIPS has a mandate to enhance the state's economy through research.

As my own private research I have been involved in *Cannabis* since 1970. I am also involved in ethnic cosmetics as a pharmacognosist, which is a person interested in drugs of natural origin. I also have an academic title, which I don't have reason to use, and I'm the associate director of RIPS, which means I am responsible for funding and executing in-house research programs. This defines what is happening in Mississippi.

My relationship with the government is that I am strictly a contractor and a grant holder from NIDA. I have a protocol which I must execute and I must run this in the most economically feasible way to save tax dollars.

HIGH TIMES: What is the purpose of the current grant?

TURNER: The current grant is the separation of nitrogenous compounds from the *Cannabis* plant. It is funded by NIDA. The grant orginally was for twenty-one or twenty-two thousand dollars. We've found several nitrogenous compounds: hordenine, which is a beta-arylethyl amine. It's not unheard of in plants but we didn't expect to find it in *Cannabis*. Then we found two compounds of a totally different structural moiety. They're spermidine-type alkaloids, and it is the first time they were known to exist in higher plants. One of them is called cannabisativine and the other, hydrocannabisativine. These are interesting in the chemotaxonomy of the Cannabis plant.

Since I have a contract from NIDA, I say, if I'm going to talk about something that someone else has sponsored, the people who sponsor it ought to know who I'm talking to, and I have to be responsible for everything that I say. Not that they're going to tell me what I can say. I have never had anyone in the federal government say that you can't publish this or you can't say this. I have never had anyone at the school or RIPS say you can't do this, you can't do that. But I have always tried to be honest and tried to be considerate of other people's feelings, and tried to be scientific, instead of trying to be a promoter or a crusader.

HIGH TIMES: How did you get into working in this area?

TURNER: I got a degree in organic chemistry, as a synthetic organic chemist working on plant growth regulators, in 1970. In 1970 organic chemists were a dime a dozen. I took the only job I found available, that I was qualified for and was offered, and that was a postdoctoral research-associate position in the Department of Pharmacology in the School of Pharmacy at the University of Mississippi. I came here with the idea of spending one year learning something about marijuana and then going to law school.

In 1971 I was asked to assume the responsibility of the project, and I felt at that time as though I was the only one here that could. I accepted it, and it's been a rat race ever since.

HIGH TIMES: Have your feelings about marijuana changed since you started working with this program?

TURNER: I think my feelings about the crude drug marijuana have been broadened tremendously. In 1970 people said everything there is to know about marijuana is known. And how wrong they were. But as far as me being scientifically concerned, I have not changed that.

HIGH TIMES: What is the purpose of the program you are involved in?

TURNER: The purpose is to provide the National Institute on Drug Abuse [NIDA] with a standard grade of marijuana for research. When we say standard grade of marijuana, it is one that we know the content of within analytical limits. There are a total of sixtyone cannabinoids known, so there are many cannabinoids we know very little about as far as analytical methods are concerned. This doesn't mean that the batch we prepare today for a research purpose will be the same three years from now.

We give the best defined materials available to NIDA and the research community. Also this material is used by the U.N. narcotics laboratory, so it goes all over the world. We are primarily here for this part of our program. To execute and accomplish this, you must have a growing facility, some good analytical support facilities, isolationseparation facilities, and the ability to export and import to get variants from different geographical locations.

HIGH TIMES: In any given year do you provide more than one standard grade? TURNER: We have a Mexican variant which is our standard drug type. Mexican variant from location A is not the same as Mexican variant from location B, but the one we're using is the one that was selected in 1968 as the drug type. We've been extremely satisfied with it. We've grown the Mexican since 1968 and we haven't seen the deterioration of potency that people talk about. The drug type is the one that all the INDs are operating under. When you talk about Mexican, there's only one variant that has an IND. HIGH TIMES: An IND?

TURNER: An IND is an investigative new drug application.

HIGH TIMES: How does this variant rate in THC content?

TURNER: Delta-9 THC content is something that you can't put your finger on. You can go out and take a sample and analyze it and say, this is Mexican, it has 2.1 percent THC. That tells you the analysis of one cannabinoid out of a total of sixty-one, out of a total of roughly three hundred sixty-odd chemicals in the plant. We can produce a good drug, marijuana, from this Mexican variant. It is as good as you will get without going through a great deal of sophisticated agricultural procedures.

HIGH TIMES: People often say that different varieties of *Cannabis* give different highs: speedy, work oriented, laid back. Would you say that the interaction of these different cannabinoids relates in some way to this?

TURNER: You've got to take into consideration the interaction of the cannabinoids. We know that cannabidiol (CBD) antagonizes and cannabinol potentiates some of the effects of delta-9. We don't know what kind of effect cannabichromene has on delta-9 but all potent drug types contain it and rarely if ever contain any CBD. These are just four cannabinoids we're talking about. The research that has been done is primarily on delta-9 or delta-8 or some of the synthetic cannabinoids, so you've got to go back and look at the plant material, this crude drug marijuana is not a plant, it is a crude drug from the *Cannabis* plant.

If we take this crude drug and roll it into a joint, the amount of the drug quality or the amount of the cannabinoids coming through the smokestream will depend on the compactness, porosity of the paper, humidity of the material, the particle size and puff volume. These are the five main variables. So, as you get a different joint, you have a different ratio of these cannabinoids. When you subject that to the pyrolysis process, you have a much different ratio.

I would expect the different marijuanas to give different highs. I would expect to go out to a single *Cannabis* plant, select a sample at eight in the morning, process it into marijuana; if I go out at ten to the same plant, I'll get another marijuana. And I would expect those two to give you a different-grade high.

You see, the cannabinoids are a unique class of compounds in nature, and they are very hard to work with. I think we're probably the only people that have done a lot of extractions to see what are the conditions in which you get the most cannabinoids out of the plant. Analytically, you have to be very careful about using an internal standard and response factors. The response factor is how much you actually see coming through the detector in regard to what you really put in. People assume cannabinoids have a response factor of one. That's not the case. The concentration of the cannabinoids varies, and the response factors will vary slightly. This is the reason you're going to see a great dichotomy in the literature. HIGH TIMES: When you test, what part of the plants do you use?

TURNER: We use the leaf part.

HIGH TIMES: Do you use the bud? Do you grow sinsemilla?

TURNER: No. When you run it through a cigarette machine the tiny-sized particle is going to be kicked right out. So you've got to get a leaf that is large enough to go through a cigarette machine, that is large enough to be sliced where you can make a good particle size out of it with the bracts still in there.

HIGH TIMES: Then if your material tests at, let's say arbitrarily, 2 percent THC, then actually the flowering buds might actually test at 3, 4 or 5 percent THC.

TURNER: Some cigarettes analyzed up to 2.68, and that's after it's been processed into a cigarette.

HIGH TIMES: When do you harvest?

TURNER: We harvest the plant when it reaches the state that it has the cannabinoids that we desire for our research program, regardless of whether it's twelve weeks old or whether it's twenty weeks old. We don't wait until it comes into flower because when you're growing in a large garden area, you can't cut all the males out. When you've got over five acres, there are going to be some of them. That flower, that little flowering top, which are leaves, are not going to do a darn thing as far as making a cigarette.

HIGH TIMES: Can high quality marijuana be grown anywhere in the United States? TURNER: Sure. The South African material has been grown in South Africa, Mississippi and Norway—above the Arctic Circle—and the data is so close that if I looked at it and did not know that it was done independent of each other, I'd say someone was gilding the lily.

HIGH TIMES: Do you use any special fertilizers?

TURNER: We have a soil sample done and find out what area of our garden grows best, and then we try to mimic that.

HIGH TIMES: Do you do any pruning? TURNER: No.

HIGH TIMES: Have you ever tried to simulate either climatic or soil conditions from exotic areas?

TURNER: No. That is totally outside the realm of what I'm interested in, outside what the [NIDA] program could afford to find.

HIGH TIMES: Do you think altitude has anything to do with THC content?

TURNER: We are in the process of publishing a paper based on altitude. Ideally you should take the same seed and plant them in different geographical locations, and analyze them over a long period of time and look at the total profile. But what the botanist did is he made collections at a certain time of the year, with the idea that these samples had been unmolested by man for a long time, and that this should give us some idea of what, over a period of time, the altitude variation would give us.

HIGH TIMES: What time would you harvest?

TURNER: Very early in the morning. It follows a cyclic pattern. You are going to have to do an analysis over a period of weeks to find out exactly.

HIGH TIMES: Do you feel that THC generates and regenerates over a twenty-fourhour cycle?

TURNER: I don't know. I don't think anyone knows. There is a fluctuation with time,

just like our biorhythms change. These cannabinoids change with time. I don't know where they go but this indicates that the plant is using these in some sort of metabolic way. I don't really know how to explain it.

HIGH TIMES: Over a twenty-four-hour period, you'll get a different analysis of a particular leaf, and it will go up during the dark hours and during the light hours it will go down?

TURNER: That's an indication, but it's not absolutely an innate fact. You may run four or five days where the fluctuation will be significant, but the baseline data will be the same, where the next week the baseline data may go up, and the fluctuation may. not be as much. You cannot say absolutely during the dark hours this is going to happen, or absolutely during the day hours it's going to happen. It depends a lot on the variants: the chemical makeup of the plant regarding the cannabinoids; and on what the plant needs, if we assume that the cannabinoids are being metabolized by the plant. I can't say categorically that they are, can't say that they aren't.

HIGH TIMES: What do you think the puppose of the cannabinoids are to the plant? TURNER: I don't know.

HIGH TIMES: Is anybody doing research on that, or are there any theories on it?

TURNER: There are many theories that it is a protective coating; it is also some protection from predators according to some people; but as far as knowing with a great deal of fact to back you up, no one really knows. HIGH TIMES: Would a hemp-type Cannabis plant ever be resiny even though it contains mostly CBD?

TURNER: Resin is by definition the waterinsoluble components of the plant. The most resinous plants that I have seen have been grown from the Czechoslovakian and from Lebanese seed. They exude resin. However, the THC content is extremely low. Hash coming from Morocco and the Czech material has a lot more CBD than it does THC. Yet you will find more resin in

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these two plants at our facility than we've seen in any other plant. The Mexican material is a very potent drug type, but you don't see resin on the buds. You have to rub them in your hands real tight and crush them to get the resin on your fingers.

HIGH TIMES: I saw some Afghani this year that had an almost skunklike odor, and it was very resinous. You mentioned Lebanese and Moroccan, and I mentioned Afghani. All of those are plants from around the thirtieth latitude.

TURNER: The Afghan, Moroccan, Lebanese, Pakistani, many of the Indians, and the Nepalese usually have more CBD than dèlta-9.

HIGH TIMES: I think that's why all of those plants traditionally have been concentrated into hashish.

TURNER: They would make very bad marijuana.

HIGH TIMES: Although Afghani I have tried has been potent as well as tasty.

TURNER: This is an anomaly.

HIGH TIMES: How does THC get one high? TURNER: I don't know.

HIGH TIMES: Do you have any ideas along those lines?

TURNER: We know that the 11-hydroxyl metabolite is an active psychotropic-type compound. We also know that the hydroxylated compounds on the side chain without the hydroxyl in the 11 position, using the delta-9 nomenclature, also get you high. But what chemical mechanism it triggers in the brain to cause that, we don't know. And our knowledge of brain chemistry is in the embryonic stage.

HIGH TIMES: Do you know what constituent of marijuana causes the munchies? TURNER: No. I've heard the munchies mentioned, but not having firsthand experience, and not really being concerned about the munchies, that's all I know about it. HIGH TIMES: There definitely is something in marijuana that causes smokers, especially inexperienced ones, to get a craving for food. TURNER: If that's the case, we ought to see a lot of fat marijuana smokers, because they ought to eat a lot. I don't see a lot of fat marijuana smokers around.

But if you take into consideration that you're dealing with an awful lot of compounds in the *Cannabis* plant that have a strong affinity for brain cells and for the fat cells and the various proteins in the body, then these compounds get from the bloodstream into the brain, you would expect anything to happen according to what side of the brain they come into, how they are stored in the brain, and how they are handled in the brain.

HIGH TIMES: What do you think the future of marijuana will be in America?

TURNER. I'll be happy to give you a scientific opinion based strictly on the facts as I know them. If you look at what is in the literature today related to marijuana, you don't have a very optimistic future. That doesn't mean the illicit market is going to go out of business. But let's forget about the il-



"I know we don't have enough data to say that marijuana is an innocuous drug."

licit marketeers and look at this crude drug, marijuana, and put blinders on, and just say we're going to go down the middle of the road and see what we know about this crude drug.

First of all, there are over six thousand papers in the literature. Now of the six thousand papers, most do not deal with marijuana. They deal with synthetic cannabinoids. However, certain individuals, organizations, agencies, et cetera, have tried to extrapolate the data and say that the cannabinoids are the same as marijuana. And there's a lot of misinformation about marijuana in these six thousand. In these six thousand papers I can support any conceivable idea you may come up with of what marijuana will do or what cannabinoids will do. Let's now forget about the cannabinoids and run back to the crude drug, marijuana.

The second thing is that marijuana has to meet certain guidelines to get on the market. You have to go through an IND and then an NDA [new drug application]. Only one variant of marijuana, that is, the Mexican variant, is even in the IND stages.

Another problem that I see, or another possibility, is what about the Delaney Amendment? Nobody has bothered to investigate the Delaney Amendment. Look at the cyclamates. In the late '60s one article says that cyclamates cause bladder cancer in animals. Three hundred papers since then have not been able to duplicate that, and yet cyclamates are still not on the market. We know that there are more cancercausing agents in the smoke of one marijuana cigarette than there is in one tobacco cigarette. The smoke from one marijuana cigarette when painted on laboratory animals will cause cancer, so there's a statutory bar against Cannabis by the Delaney Amendment.

The next thing is you must have shelf-life stability on any drug before it goes to market. But the cannabinoids change over a period of time. And as these cannabinoids change, the quality of the drug changes. Now I'm not saying you can't make a plus or minus criteria, but this is an inherent problem which must be solved before you can ever bring anything on the market.

The future of marijuana as a crude drug I see as very, very bleak. I'm not saying that some of the compounds of the *Cannabis* plant, their homologues or their analogues, may not be used by society. In its medical applications to disease states, I wouldn't say that at all.

HIGH TIMES: The question is, even with all the laws such as the Delaney Amendment, if Congress decides that it does not want the loss of Cannabis, it can just pass a law saying Cannabis can be grown for home cultivation or for commercial use, or whatever; and since Congress makes the laws, it has the power to change them.

TURNER: That I would not disagree with. HIGH TIMES: Do you think it will be decriminalized on a state-to-state basis?

TURNER: I think there's de facto decriminalization in most states. I have guarreled with the word decriminalization; I think it's a bad choice of words because, to the average person, it means that you remove the criminal penalties. But in effect you're not removing the criminal penalties. Most of the state laws that I'm familiar with have reduced the penalty on the low end and raised the penalties for the smugglers or the big-time operators. I personally feel that reducing the penalty for the kid with one joint has not been a bad idea, and I was for it in Mississippi. But I was also for the guy dealing in hundreds of pounds to go to jail.

HIGH TIMES: What about the home gardener cultivating for his or her own personal use?

TURNER: The home gardener is an individual within himself or within themselves. How they handle it is up to each state; I'm not trying to make policies or make decisions. I'm just saying that, knowing what I know about that crude drug, I would hate to see it ever happen, that we have home growing of Cannabis to produce the crude drug, marijuana. I'm afraid they will go from marijuana to liquid hash, and a combination of more things. As you apply physical, chemical or heat methods to process the Cannabis plant, you alter the chemical constituents, so the data on marijuana is not the data on delta-9, is not the data on hashish. So I have a terrible fear as a scientist on what would happen there.

HIGH TIMES: In California the buds may go for a hundred dollars an ounce and the leaves for a hundred a pound. Those leaves may contain one-third to one-half the THC grown on the plant. It's only a matter of time before people start using it either as a ghee, or in cookies, or something like that. TURNER: When you take it orally you've got a different drug than when you smoke it; you have metabolism occurring in two places, the lung and the liver. The metabolites in the lung are much more potent psychomimetic agents than the metabolites in the liver. This is one of the reasons people can get a much higher high on smoking a small amount than eating a much larger amount, and these affect the body differently.

I'm fearful of the increasing potency, of the concentration of the cannabinoids in continued on page 64

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interview: CARLTON TURNER continued from page 39

the tissues of the body. These things bother me as a scientist. But each individual has to make up his own mind what he wants to do. I don't believe the government should say, here it is, available to everybody, use it as they want to. But I don't really know what the proper position is right now. I know we don't have enough data to say that marijuana is an innocuous drug.

HIGH TIMES: But we have to look at it from a societal level, too.

TURNER: You have to take it from the total scientific spectrum. In science you can't cut one layer out. You have to look at it in context to what it is doing to the human organism and what it is doing to society. My point is very basic. It is not an innocuous drug.

Look at tobacco. We know if we smoke x amount of tobacco cigarettes a day, the chances of us getting lung cancer are x percent increased over the guy who never touches a cigarette. But I'll challenge you or anyone else to find me any sociological data, or any other kind of data, prior to World War II, that would link tobacco smoke with bronchial carcinoma. It did not exist. And now look at the people dying of lung cancer.

We know that *Cannabis* smoke contains as many carcinogenic compounds, more, than a cigarette. We know that in our society people smoke several joints a day. We also know that as they grow for their own use, they're going to get more potent material because of the tolerance, so there are some intrinsic problems. I do not want to say that sociological studies are not significant. But when you do sociological studies, you've got to do studies on the basis of how the people in our community use it, not how they do it in Jamaica or how they do it somewhere else.

HIGH TIMES: What are the long-term effects of occasional and heavy marijuana use?

TURNER: I don't think anyone knows in the society in which we are operating today. HIGH TIMES: What do you think of Reese Jones's experiments, where he's giving people tremendous doses of THC which don't really correspond to what's happening? TURNER: Can you say that?

HIGH TIMES: Yes. I have experience with the underground culture, and he's talking about much more than the heaviest smoker that I've ever seen. Even when I've known people dealing in hash oil, they don't use as much as he's giving his people.

TURNER: You don't know what's in hash oil until you analyze it. I've seen hash oil go from very small amounts of THC to up to 40 percent THC.

And the other thing is, a lot of scientists have been criticized for the dosage they are giving. But there is a tremendous problem here. Smoking is the worst possible way to continued on page 70

LADY continued from page 48

hooker who had seemed beautiful in the saloon light, but turned out to be a heavy user of facial creams. He didn't object to a girl using creams in private, but felt she had an obligation to take them off when she was out and around. She said she knew of some great stuff just over the bridge in Brooklyn. Towns drove and drove and when he asked her if they were there yet, she said it was just a little bit farther. He felt he might as well be driving to Chicago. When they finally got the coke, she described herself, with some pride, as a "nose freak"-as though Towns would be thrilled to hear this. Then she got rid of most of the coke in the car, beneath a streetlamp, leaving Towns with just a few grains. He felt it would be the right thing on his part to smack her around a little for her behavior. but he was worried about friends of hers running out of a nearby building with kitchen knives. So he let it pass. Besides, there had been something attractively illicit about snorting the drug with a heavily creamed hooker deep in the bowels of Brooklyn. And it was strong, too, even if there wasn't much of it. He would have something to say to his friends about "Brooklyn coke" and how it could tear your head off if you didn't watch it. So instead of smacking her around, he took her on a long, silent drive back to Manhattan where he let her out.

In the beginning, Towns and his friends would fool themselves into thinking that the nighttime get-togethers were for the purpose of having some dinner. Midway through a Chinese meal, one of them would casually ask if the others felt like going after some coke. But after a while, they dropped all pretense, skipping the dinners and diving right into the business of getting at the drug. Towns soon discovered that he was throwing over entire evenings to phone calls, long waits, nervous foot-tapping and great outbursts of relief when their man finally showed up with the prize. He wasn't sure if he felt the tension legitimately or if he was just playing at it. There weren't too many things in life he liked to do more than once in exactly the same way and he figured out that he was having the same kind of evening over and over. So one night he simply stopped, probably too cruelly and abruptly, the way he stopped most things. He decided to get a whole bunch of coke and have it just for himself. He invited the dealer with the collapsing face up to his apartment and told him to bring along an entire ounce. It was a very exciting and significant call for him to make, and he rated it right up there with such decisions as moving out on his wife and signing up for a preposterously expensive apartment. Both had worked out. As soon as he called the dealer, he became afraid of some vague unnameable violence. His way of handling it was to strip down to his waist and greet the dealer

bare-chested. Towns had a strong body and this maneuver would indicate that he was loose and could take care of things, even stripped down that way and obviously having no weapons concealed in the folds of his clothing. The dealer didn't notice any of this. He swept right in and began to carry on about some new moistureproof bottles he had found for the coke. If you closed them after snorts, no moisture would get in and the drug would not cake up. He was terribly proud of the bottles and told Towns to hang on to them; when they were empty, he would come by with refills. After he had left. Towns sunk back on a leather chair and didn't even try any of the coke. He just lit a cigar and richly enjoyed having bottles of it up there on the thirtieth floor with him. The idea fell into his head that if you had a lot of it, you were relieved of the pressure of always having to get it and as a result you didn't take that much. But he got onto himself in a second and knew it wasn't going to work out that way. He'd take more. The next time he saw his friends they tried to start up the coke-hunting apparatus and he excused himself by saying, "I don't think I'm in the mood for any tonight." He felt very sorry for them; they would have to go to all that trouble for just a little packet of it that would be sniffed up in an evening. Somehow they sensed he had a whole bunch of coke of his own and were snappish with him, but they stopped that quickly because they weren't that way. The stylish fellow's eyes began darting all over the place and Towns sensed he was making plans to lay in a giant supply of his own. He would be all right. But the film cutter's head drooped and when he was alone with Towns he admitted for the first time that even though he had a massive number of kids, he hated his wife. The evenings of hunting down coke had been terribly important to him. He said he always knew Towns was afraid to get close to people and amazingly he started to cry for a few seconds. At that moment, Towns would have taken him up to the apartment and given him half of the huge amount of coke. It was a close call, and the next day he was thrilled that he hadn't. As to Towns's inability to stay close to people, the fellow probably had him dead to rights. He had gone with a girl for three years and then brutally chopped off the affair, practically overnight. When it came to girls, if there was going to be any chopping off, he wanted to be the one to do it. Once it had been the other way. He saw himself as a man who had gotten off to a shaky start, then patched himself together and now had tough scar tissue the seams. Chopping...getting at chopped off... what he hoped for in life was to work his way back to some middle path.

Meanwhile, he had all that coke and a whole new style of evening set up. He would spread some of the drug on a dark surface, a pretzel box, as a matter of fact, *continued on page 98*

INTERVIEW: CARLTON TURNER

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get a dosage form of any drug into the organism.

One researcher will tell his people, "Smoke this, you'll get a pleasant high." [He will] never quantitate the blood, never know how much is getting in, because until recently you couldn't do that. Another researcher will say, "I want you to smoke this in toto, because that's the only way I know you're getting what you get." Well, a 2 percent cigarette, one gram, will contain twenty milligrams. When both of those researchers publish their data (and you can get anything you want published on marijuana-you may have to look around to find a guy that wants to make a quick buck, you may never get it published in a scientific journal, but you can get it published), it's quoted as law, and it's very difficult to change the opinion once it gets in print. A guy that says, "Smoke it, you get a pleasant high," is not going to find the same change in respiration rate, blood pressure or pulse rate, if there is a change, than the person who makes them smoke all of it. The lay, and even the scientific, community then says one of these guys is wrong. In reality both are correct according to their methodologies, but you have to take into account which methodology is correct.

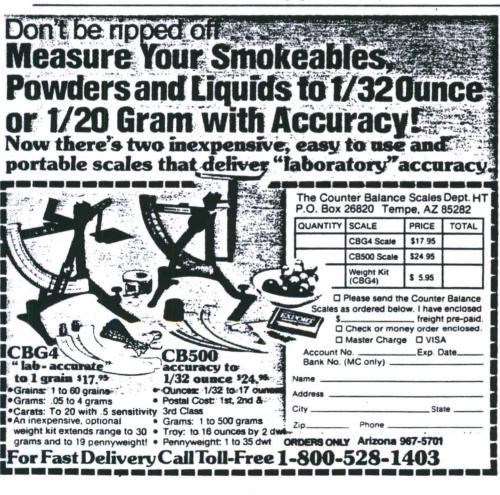
Until I see the data, and until I see how it



"I don't believe countries would continue putting money into certain funds controlled to study drugs if they planned to legalize them."

happens...I have seen a lot of people that have been getting tremendous criticism off their dosage range; when I looked at the data, they were all getting very small amounts.

HIGH TIMES: What do you feel are the dangers of marijuana as compared to alcohol? TURNER: There is a very different profile when you look at alcohol and *Cannabis*. The body can handle alcohol quite rapidly. About one ounce per hour for the average person. And in a few hours, it's totally removed from the system. But the cannabinoids have a long staying power. For example, if you give a naive subject one joint, after a period of fifty-six hours there is going to be at least a half of the cannabinoids still in the system, and after a period of eight days you can still find the cannabinoids.



The cannabinoids are totally insoluble, but they are infinitely soluble in the lipid proteins of the body. Which means they are stored in every major organ including the brain. This means that after a long period of time there's going to be a residual amount of delta-9 and other cannabinoids.

If you only smoke one joint, and you don't smoke any more for a while, it gives your body an opportunity to sort of purge the system. But if you keep loading that system up, with three or four joints a day, one has to be concerned, knowing that the cannabinoids are stored in the brain and other places, over the long-term effects—not over the subtle differences of ninety days, that is ridiculous, but if it is done every day. So my concern is basically over the long haul. HIGH TIMES: Is somebody who has smoked for twenty years going to have so much in their system that they are never going to get rid of it?

TURNER: No one really knows. We're participating in a long-term study. I have a deepseated fear for long-term use.

HIGH TIMES: Does a nursing mother transfer the cannabinoids through the milk? TURNER: There's a paper that was in the *Journal of Toxicology* which shows that there are a lot of problems. Your milk has a lot of lipid protein-type material and a lot of fat, and if the cannabinoids were to be stored, this would be one place. If a young lady is smoking a lot of grass and she is nursing a baby, it's probably going to have cannabinoids in the system.

People say that marijuana causes birth defects. There has been no really good documentation of birth defects using marijuana, but there have been documents of embryocidal effects, which means that the embryo was reabsorbed. This indicates that the cannabinoids do interfere with the reproductive systems of the body. It is now looking very strongly that it is more acute in the male than in the female. You see some testicular degeneration with CBD. CBD is one of the most abundant cannabinoids, particularly in hashish and some forms of marijuana. So as these cannabinoids are brought and stored in the body and the child is going through a normal development, there is more than an average chance of problems over the long haul.

HIGH TIMES: Do experienced marijuana smokers metabolize *Cannabis* in a different way than inexperienced smokers?

TURNER: They have a lot of enzymes in the system that can handle it. I don't think anyone has isolated the enzymes that are responsible.

HIGH TIMES: Have long-term changes been noted in the brain synapses of marijuana users?

TURNER: Drs. Dick Gary and Bob Heath in New Orleans did some work on the monkey brain, and in every animal that had *Cannabis* or delta-9, they saw some problems in the synapses and in the brain. That is pretty hard evidence, and if that were a drug on the market, it would be pulled off immediately. There are also some changes with chronic smoke in the electrocardiogram.

HIGH TIMES: Do you think that marijuana changes motivation?

TURNER: Some people say that the amotivational syndrome is only a syndrome with those people doing the research. But if you talk with the people that work with *Cannabis*, marijuana, the cannabinoids, they will tell you that everything is dose dependent, as with any drug. I think it has a lot to do with the biochemistry and maturity of the person involved and a lot of other things. HIGH TIMES: Do you think that the govern-

ment can enforce the marijuana laws? TURNER: Enforcement of the laws is some-

thing that society wants one day and something society does not want the next day. It will be extremely difficult to enforce the laws of this country on the use of *Cannabis*. On the other hand, if the penalties were so severe that the use would not be worth the consequences if you were caught, you would reduce it. But as an objective individual, and knowing that you can grow *Cannabis* anywhere, I think it would be impossible for the government to absolutely eradicate the use of *Cannabis* in this society. I don't think it can be done.

HIGH TIMES: If the penalties become so severe, considering that we have a representative society of some sort, I think that kind of law would alienate society as a whole from the government.

TURNER: An excellent example of that is Germany before World War II. Every power that Hitler had was given him by the legislative body. And everybody says Hitler was a dictator.

HIGH TIMES: I think our experience is different from the German experience.

TURNER: Well, regardless of the political implications, if it were the death penalty, whether you or I agreed with it, I think that both you and I agree that there's no way that some of the people we know who use it would even touch it with a ten-foot pole.

HIGH TIMES: I think that marijuana is one of America's secret weapons in our conflict with the Soviet Union. This could be one of the main things changing Soviet society, changing the Soviet government.

TURNER: Well, if it would change the Soviet government, it's changing our society, too. HIGH TIMES: It certainly is. How do you think it's changing our society?

TURNER: The value system of any society is based upon the learning pattern. What you're saying is that we're changing that learning pattern. We're basing our values somewhere else. I think that's where the sociologists have got to come out of the closet and get on with the job of finding out what's happening to our society.

Just as our society in the South has changed, I think any society's going to change, and change for change's sake happens sometimes. We hope it doesn't happen. We hope that we have a better society due to change. But if we study history, and we look at what's happening to our society,



"Knowing what I know about that crude drug, I would hate to see home growing of Cannabis to produce marijuana."

we ought to have some second thoughts. If you study Gibbon's *History of the World* [sic], it scares you if you look at what's happening to our society today.

HIGH TIMES: If individual states passed laws decriminalizing or legalizing marijuana, or its cultivation, do you think the DEA would stand still?

TURNER: I don't know. You'd have to ask someone in the DEA. But I don't see how the government could stand by and watch an international treaty, the FDA guidelines and the laws of the country be totally neglected. It would be a precedent-setting thing that would open the door for any drug to go on the market without proper testing, because only one variant of *Cannabis* is in the IND.

What if the federal government were to

say, we're going to make *Cannabis* available to everybody. Then suppose ten or fifteen years down the road we had a tremendous increase in neurological problems with young people and they traced that back to *Cannabis* in the brain? The same people that are pushing for these drugs to be on the market today would then be in their fifties or sixties, and they would be raising more hell with the government because their daughters or their grandsons have neurological problems and it's the government's fault.

HIGH TIMES: Do you think that any of the government's programs are effectively informing people about marijuana or keeping people from using it?

TURNER: It's a difficult task insomuch as preconceived ideas abound in the area of marijuana. Because if you're using it, whether it does you any harm or not, if it's a subtle amount that you can't observe daily, you're not going to see it and you're going to say nothing's wrong with this drug, and don't try to educate me about it, because I know more than you. And I've talked to kids sometimes, not with scare tactics, but just talked to them, and I've had kids say, have you ever tried it? I have no desire or need to try it. [They say] "Well, then don't talk to me about marijuana." The very classical comeback is, how many male obstetricians have you seen that have had a baby? continued on next page



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INTERVIEW: CARLTON TURNER continued from preceding page

This gives you the attitude about marijuana.

As an organic chemist and pharmacologist, I have learned to have a great deal of respect for chemicals and what they can do with the body, and I never had any reason nor any desire to smoke a joint. I've always wanted to keep my mind clear. I enjoy nature, people, working and doing things with my hands, and when you get into an intoxicated level, whether with alcohol, *Cannabis* or any other drug, that you are no longer in total control, then things happen to you that later on you may not want to have happen to you.

HIGH TIMES: Do you think that we're going to find in four, five or ten years that preadolescents and adolescents who used marijuana have had deleterious effects from its use during the formative years?

TURNER: If you take the biological data on marijuana now, you have got to be concerned about such.

HIGH TIMES: What are the long-term effects of use of marijuana by preadolescents and adolescents?

TURNER: I can't say what the long-term effects will be. We can only look at what the scientific data has indicated and extrapolate. It is going to have a change. Whether that change is going to show up in the second or third generations you can't say, but it will



"Suppose ten or fifteen years down the road we had a tremendous increase in neurological problems, and they traced that back to Cannabis in the brain?"

have a change.

HIGH TIMES: How do you think that the government's attitude toward *Cannabis* has changed over the past three or four years? TURNER: I think as the trends go to much more potent material, you're going to find a hardening of the attitude on the federal level, and some of the manipulation of the news media by the promarijuana people have turned the other people totally against them. The overzealous attitude of the prodrug people backfired and I think we're going to see a hardening at the federal level. HIGH TIMES: What do you think is going to happen in Colombia?

TURNER: Colombia has for many years in the past been making more money on the export of *Cannabis* products than it has on

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coffee. And in developing countries, there is a different political climate. But it is going to be extremely difficult to convince these governments to do away with *Cannabis*. If our government tried to help the Colombian government, I don't know how people would react.

HIGH TIMES. I've heard two things: they're going to legalize or start spraying. Two conflicting opinions, both from so-called informed sources. I've also heard that Jamaica was planning to start legalizing.

TURNER: I don't believe that Jamaica will legalize it. I don't believe there is any politician in the world today that could stand the heat from the other government agencies in the world if they did. And I don't believe the countries of the world would continue putting money into certain funds that are controlled to study drugs if they planned to legalize them.

HIGH TIMES: What do you feel the cost of marijuana is to society, in terms of people who use it, and in terms of law enforcement?

TURNER: I don't have any idea how many people smoke grass in the country today. I've seen estimates from nine to twenty-five million. But I don't know if that figure is valid statistically.

I think that some of the costs that I have seen have been grossly inflated. There is a baseline cost of police protection, regardless of whether they are chasing crooks, sitting on their butts, fighting fires or whatever. That's a basic cost.

HIGH TIMES: How do you think that Cannabis will be used pharmacologically?

TURNER: There are possibilities for certain individual cannabinoids. There are some drawbacks. It affects the central nervous system. Secondly, you have a tolerance built up to them.

Some products that may come to the marketplace will not have a name even remotely associated with marijuana or *Cannabis*, but the idea for the synthesis of these products will have originated from NIDA's total marijuana program. One that comes to mind now is Nabilone, which Lilly has been promoting, but that's not to say there aren't others around. But it's hard for me to conceive of delta-9, with the side effects that it has, ever being on the market. I believe there will be a product on the market that has structural similarities.

HIGH TIMES: Is there anything else that you would like to say?

TURNER: I hope that you come up with something legitimate within itself, and that we give the people an opportunity to see both sides. I keep trying to reiterate: I have tried not to be anti or pro, but to look at the scientific facts. And I can back those facts up. And I would like for the people to be aware of all the volume of literature, and not be caught defending their position on a single paper. \Box

For a complete transcript of the interview, send \$10 check or money order to Ed Rosenthal, 2000 Center Street, Berkeley, CA 94704. THE WHITE HOUSE

WASHINGTON

January 26, 1982

FOR: EDWIN GRAY

FROM: CARLTON TURNER

SUBJECT: 25% Positive Urine Test for Marijuana Use/Military

I spoke with Dr. John Johns office (Deputy Assistant Secretary of Defense for Drug and Alcohol Abuse) about this issue. The 25% represents an average thoughout the military.

Let me emphasize that the 25% positive urine test for marijuana was not obtained from a universal testing of all military personnel. Ed, a 25% positive test for heavy marijuana use was found among those individuals referred to the Lab as possible drug users by their commanders.

THE WHITE HOUSE

WASHINGTON

January 26, 1982

FOR: EDWIN GRAY

FROM: CARLTON TURNER

24

SUBJECT: Military trip to Europe (1/28/82 - 2/5/82)

This trip is to assess the nature of the drug problem in the Armed Forces in Europe and includes visits with senior commanders of European command and the Army, Navy and Air Force component commanders. They have requested that I give the keynote address at a conference designed to revitalize the Air Force Counterpush program (a comprehensive drug program designed to prevent, deter, detect drug abuse among Air Force personnel in Europe). This visit will provide first hand information on which to base future congressional testimony, policy and program decisions. Department of Defense drug abuse personnel consider my trip essential.

The military has agreed to finance flights to Frankfort, Germany and return and provide for five days of per diem. The trip will begin the evening of January 28, 1982 and I will return the evening of February 5th. Three days of per diem would be financed by OPD.

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THE WHITE HOUSE

WASHINGTON

January 26, 1982

FOR: EDWIN GRAY

FROM: CARLTON TURNER

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SUBJECT: Senate Request for Testimony of Drug Abuse Prevention

This is to inform you that I have been invited to testify before the Senate Sub-Committee on Alcoholism and Drug Abuse of the Committee on Labor and Human Resources. The subject of my testimony will be the Administration's plan for Drug Abuse Prevention and Education, if you approve my participation. ORRIN G. HATCH, UTAH, CHAIRMAN

ROBERT T. STAFFORD, VT. DAN QUAYLE, IND. PAULA HAWKINS, FLA. DON NICKLES, OKLA. LOWELL P. WEICKER, JR., CONN. GORDON J. HUMPHREY, N.H. JEREMIAH DENTON, ALA. JOHN P. EAST, N.C. EDWARD M. KENNEDY, MASS, HARRISON A. WILLIAMS, JR., N.J. JENNINGS RANDOLPH, W. VA. CLAIBORNE PELL, R.I. THOMAS F. EAGLETON, MO. DONALD W. RIEGLE, JR., MICH. HOWARD M. METZENBAUM, OHIO

Anited States Senate

COMMITTEE ON LABOR AND HUMAN RESOURCES WASHINGTON, D.C. 20510

This ! Scheduly 1

ROBERT P. HUNTER, CHIEF COUNSEL AND STAFF DIRECTOR RITA ANN PFEIFFER, CHIEF CLERK LAWRENCE C. HOROWITZ, M.D., MINORITY STAFF DIRECTOR

JAN 25 A.M.

January 22, 1982

Dr. Carlton Turner Senior Policy Advisor Office of Policy Development The White House Washington, D.C. 20500

Dear Dr. Turner:

This is to formally invite your participation in a hearing to consider the alcohol and drug abuse prevention activities of the federal government, with a particular focus on the prevention activities of ACTION, the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism. The hearing will be held at 10:00 a.m., on February 24, in Room 4232 of the Dirksen Senate Office Building.

The Subcommittee would appreciate information on the current plans for a federal prevention policy, including the involvement of federal agencies, state agencies, and voluntary groups.

As is customary, the Subcommittee will need 50 copies of your prepared testimony. We would appreciate receiving at least 20 copies of this testimony by the close of business on Friday, February 19. Your written testimony should be limited to 5-10 minutes with a question period to follow. Any further correspondence with my office should be addressed to 6205 Dirksen Senate Office Building, Washington, D.C. 20510. Should you have any additional questions regarding the upcoming hearing, please feel free to contact me or Nancy Wolicki, Staff Director of the Subcommittee, at 202-224-5630.

Thank you for your cooperation in our hearing. I look forward to meeting with you.

Sincerely.

Gordon J. Humphrey, USS, Chairman Subcommittee on Alcoholism and Drug Abuse

GJH/nwc

THE WHITE HOUSE

WASHINGTON

January 20, 1982

FOR:

FROM:

LARRY SPEAKS PRESS OFFICE CARLTON TURNER OFFICE OF POLICY DEVELOPMENT

SUBJECT: Request for Tape Recording of a Speech by President Reagan

On September 28, President Reagan delivered a speech before the International Association of Chiefs of Police in New Orleans, Louisiana.

That speech set out the broad framework for the Administration's Drug Abuse Prevention and Control Program.

As you know, I am responsible for implementing the President's drug program. I would like to have a copy of the tape recording of the President's New Orleans Speech for use in a slide show for the White House Conference on Drug Use and the Family on March 22, 1982.

Thank you. I am attaching a written copy of the speech for your information.

THE WHITE HOUSE

WASHINGTON

January 12, 1982

FOR:

FROM:

EDWIN J. GRAY

SUBJECT: Drug Situation in Florida

In view of the Drug situation in Florida and in response to the group of concerned citizens from Miami, who visited with Ed Meese, I have certain suggestions.

Most of the suggestions are feasible and some are similar to the ten proposals put forth by the greater Miami Chamber of Commerce. They could be put in place on short notice and would have a visible impact for the Florida area as well as for the Southeast area. This list is not all inclusive. In this connection, I am under the impression that the Vice President has a speaking engagement in Florida in February. Would it be possible for the Vice President to take two or three people with him and spend some extra time studying these and additional efforts that could be undertaken in Florida to stop the flow of drugs into the U.S. and curtail the violence in that area? The Vice President is a natural since many issues which cause us problems are regulatory.

The Vice President on his return could then present his proposals to the President. The President and his Advisers would then make the decision on how the Florida initiatives could best be handled. Additionally, the Vice President's presence on a study group would raise the citizens' of Florida concern about their own problem and show this Administration's concern about the drug issue. Additionally, I believe it will support those in Florida who have been pushing hard for additional initiatives and at the same time prevent the drug issue (absence of visable initiatives in Florida and the Southeast) from becoming a campaign against this Administration in 1982.

The following is a list of possible initiatives in Florida:

- Expedite timely appointment of six Assistants U. S. Attorney to fill vacancies now in existence in the United States Attorney's Office, Southern District of Florida (See #4 of attached Miami Action Plan).

- Simultaneously assign one additional experienced Assistant United States Attorney to assist in <u>exclusively</u> handling forfeiture cases in the Southern District of Florida. We spend thousands of dollars each month on storage and repairs (See #4 of attached Miami Action Plan). - Through the Attorney General, have a Highest Priority assigned to all significant narcotics cases processed in the United States Attorney's Office/Southern District, Florida.

-When and if appropriate increase the number of available federal judges either by a temporary recall of qualified willing members of the Federal Bench or by transferring when appropriate other federal judges into the Florida area (See #5 of attached Miami Action Plan).

- Toward the end of getting more judges available for narcotic cases endorse, if appropriate, immediate congressional action for passage of U.S. Judgeship Bill HR 2645 (See #5 of Attached Miami Action Plan).

- Assign more IRS, CUSTOMS, DEA and other agents to launch more money laundering schemes and currency violations schemes in the Florida area such as operation Greenback, etc.

- Through the Secretary of State give a priority to cooperative working relationships with the drug producing nations of South America (Colombia, Bolivia, Peru and Jamaica) so as to more effectively reduce drug importations into the United States and to extradite drug fugitives from those countries to the United States.

- Through the Secretary of State give a priority to cooperative agreements with Colombia which would result in the Colombian Government eradicating <u>Cannabis</u> and coca within its borders. Also, a letter has been sent to the White House from State for consideration: President to communicate to President of Colombia (See #3 of attached Miami Action Plan).

- Through the Secretary of Transportation, direct that a minimum of two Coast Guard cutters (not patrol or utility vessels) be permanently assigned to drug interdiction duty and to be immediately dispatched to the choke points. These cutters could be moved when and if drug traffickers move their sea routes East or West. I would love five Coast Guard cutters but believe two is all we can get (See #2 of attached Miani Action Plan).

-Through the Secretary of Defense, assign more effective United States Naval sea/air interdiction efforts in the Caribbean area. We are talking about training missions and on-going surveillance missions that could be coordinated with the Coast Guard/Customs/Drug Enforcement Administration's interdiction efforts in that area (See #1 of attached Miami Action Plan).

- Through the Secretary of Defense urge the scheduling of increased and timely military maneuvers and excercises within the continental United States where Drug smuggling activities are known to occur (See #1 of attached Miami Action Plan).

- Through the Secretary of Defense direct more training missions of AWACS type aircraft in the Caribbean (See #1 of attached Miami Action Plan).

- Through the Secretary of Defense direct the Air Force to initiate changes in their intercept codes to locate planes that are typical drug smugglers. This would mean changes in altitude and speed in which the computer picks up incoming aircraft (See #1 of attached Miami Action Plan).

- Strongly encourage the States in the Southeast, and Florida in particular, via the Governor and the Congressional and State representatives in each state to initiate eradication of domestically produced narcotic plants i.e. Cannabis (marijuana).

- Urge the Governors of the Southeast, and in particular Florida, to have their Air National Guard consider the Caribbean area for training excercises. This will give an enhanced visibility as well as provide additional surveillance which could be used to aid drug interdiction.

- Make permanent the increased number of Customs Agents assigned to the Florida area. We have placed 100 extra Custom Patrol Officers (CPO) in Florida since last summer (See #8 of attached Miami Action Plan).

Ed, there are other options available. These are only some options that could be put together very quickly and would have a significant impact on the problem. I see no problems because they are right and it is what we need. Additionally, of the ten original items that were not discussed we should support #9 and perhaps #7 and I am not certain #6 is feasible.

Ed, this memo was started on January 10, 1982 before I knew of the meeting on the January 19, at 3:15 p.m. Many agencies are working on the Miami Proposal for this meeting.

See Attached a Memo to me from Dan, and copy of States letter. This is the letter I told you about.

THE WHITE HOUSE

WASHINGTON

January 12, 1982

FOR: EDWIN GRAY

FROM: CARLTON TURNER

SUBJECT: Draft of Proposed Letter for President to send to President of Colombia

A draft letter for the President to send to the President of Colombia is being forwarded from State to the White House for consideration. The letter explains the repeal of the Percy Amendment and that Foreign Assistance money can now be used in cooperative programs to eradicate narcotic plants.

Eradication of narcotic plants is a key issue in the International section of the President's Drug program.

During the holidays, I discussed the draft with Mr. Jim Jenkins, Mr. Mike Guhin of NSC and with OMB.

Ed, if the Colombians start a program, State has money to initiate the program but more money may be needed in FY 83 or FY 84. Or, a change in State's priorities, above the Bureau of International Narcotic level, may be required. I support the concept of the letter. Eradication is needed and it is cost effective. The political climate in Colombia has changed and they may be willing to start a program.

THE WHITE HOUSE

WASHINGTON

January 12, 1982

FOR: BOB CARLSON

FROM: CARLTON TURNER

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SUBJECT: Members of the Working Group on Drug Abuse Health Issues under the Cabinet Council on Human Resources

Attached is a list of the individuals nominated to be members of the Working Group on Drug Abuse Health Issues under the Cabinet Council on Human Resources. The list is complete except for the nomination from Justice. They have not given us a name as of 5:00 p.m., January 12, 1982.

CC:

Edwin J. Gray Ronald B. Frankum Michael M. Uhlmann Daniel F. Leonard

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THE WHITE HOUSE

WASHINGTON

January 7, 1982

FOR: EDWIN GRAY

FROM: CARLTON TURNER

SUBJECT: Meeting with Department of Transportation regarding Coast Guard January 5, 1982

The central point of the meeting was that any budget cuts would result in a reduction of the drug interdiction program. We cannot in my opinion, accept this. There must be a change in the Coast Guard's priorities.

We must also accept the fact that a change in priority will probably result in pressure from members of the Merchant Marine and Fisheries committee.

THE WHITE HOUSE

WASHINGTON

January 4, 1982

FOR:

FROM:

RONALD B. FRANKUM CARLTON E. TURNER

SUBJECT: Monthly Activities Report, December

During December efforts were concentrated on the formation of a working group under the Human Resources Cabinet Council and development of the Federal Drug Strategy. The established working group will evaluate the areas of drug research, treatment and rehabilitation along with prevention.

Several organizations were visited in order to promote the President's drug policy. The American Council on Marijuana, National Association of State Alcohol and Drug Abuse Directors and National Association on Drug Abuse Problems, Inc. are examples.

Two treatment facilities, Phoenix House in New York and Second Genesis in Alexandria, were visited in order to understand various approaches to treatment.

Several meetings with Defense personnel regarding gathering of intelligence for use by non-military agencies and ways to reduce drugs coming on bases through the U.S. Mail.

Internationally, I met with Betty Gough of the International Narcotic Control Board and discussed the United Nation's and the United States' drug program. Several meetings were held with Assistant Secretary of State for International Narcotic Matters, Don DiCarlo, regarding eradication of narcotic plants.

A decision was reached to publish the NICC report as a 1980 report.

The review of projected goals for September to December revealed most were accomplished. A memo will follow describing our progress.

A brief write up of the Drug Policy was prepared for ACTION to publish in their Journal. Much work was spent with ACTION and the First Lady's Staff getting the ACTION sponsored White House Conference on Drug Education set up for February 1982. THE WHITE HOUSE

WASHINGTON

January 4, 1982

MEMORANDUM FOR OVERSIGHT WORKING GROUP MEMBERS

Chron File

FROM:

CARLTON E. TURNER SENIOR POLICY ADVISER

SUBJECT: Schedule of Oversight Working Group Meetings

The Oversight Working Group meetings will be held the second Wednesday of every month from 10:30 am to 12:30 noon. The monthly reports and agenda items will be due the first Wednesday of every month before the close of working day (6:00 pm) to facilitate proper organization of the meetings. If your agenda items are not in by the close of the work day they will not be included in the agenda.

The meeting for January 13, 1982 at 10:30 a.m. will be held in Room 248 of the Old Executive Office Building.

Enclosed are notes from past meetings.

NOTES FROM MEETING OF THE OVERSIGHT WORKING GROUP October 29, 1981

Alcohol, Tobacco and Firearms (ATF) will be abolished. Timing is still uncertain.

Florida initiatives were discussed. In this regard, Customs felt that the cost of the Navy plane may not be worth the price. The Coast Guard is covering the passages 28% of the time but effort cannot continue at this level.

Customs will be putting more people in Florida.

Coast Guard is getting some support from the Navy - without paying.

DOJ was asked to get the U.S. Attorney situation in Florida clarified and to get as much help as possible. Also, the possibility of priority changes in cases was discussed.

The NICC report was discussed.

DEA requested help with paying for aircraft from DOD. The White House office agreed to look into the matter and do what is needed if possible.

All members expressed concern over budgets.

NOTES FROM THE MEETING OF THE OVERSIGHT WORKING GROUP December 2, 1981

A package was distributed to all members outlining what will be needed, thus far, from member agencies for the strategy and announcing the formation of a Working Group on Drug Abuse Health Issues under the Cabinet Council on Human Resources.

Future meetings of the group will be held on the second Wednesday of each month instead of the first Wednesday. Agenda items plus monthly summaries (one page, single spaced, please) from each agency should arrive at this office no later than COB of the first Wednesday of the month.

Problems with the NICC report were discussed. The discussion concerned the reliability of the numbers when the basis for calculation is in question. For example, INM and DEA disagreed about whether to count one or two crops. DEA calculates two crops while INM says that the Columbians are counting one. In addition, the potency of Columbian marijuana caused some concern. A single analysis can only be used to describe a single sample and not all samples.

The White House drug policy advisers offered to be of assistance to agencies in the area of budgets or jurisdictional issues. Such help will require that agencies share information with the advisers in a timely manner and that a mutually supportive relationship evolve.

As part of the ATF/Secret Service re-organization, personnel reassignments are being made to three major crime counties in Florida.

Customs is moving 96 land patrol officers to Miami. They expect the move to be completed by January 20 or as soon as the administrative and practical problems in relocation are resolved.

DOJ is moving to increase the number of Assistant U.S. D.A.'s in South Florida. (A written report will be sent detailing the numbers and locations of assignments.) DOJ believes that Operation Greenback will not only continue, but will be more active. They expressed some concern over the future of the Bank Secrecy Act's provisions in the face of court challenges. NIDA discussed the current status of new therapeutic drugs. LAMM is the furthest along. NIDA has applied to the FDA for the NDA for LAMM and expects the drug to be available in clinics within 18 months. With LAMM, a patients will visit clinics three times a week instead of daily.

Some antagonist drugs cause patient discomfort (they antagonize endogenous chemicals that the brain manufactures) and present problems for drug treatment. However, buprenorphine is both an agonist and an antagonist and seems to hold much promise for drug treatment. It is already used as an analgesic in Europe. The drug is well-received by addicts and seems to neutralize drug craving as well as stopping withdrawl symptoms.

The problems with data were briefly discussed. Dr. Pollin has suggested that the White House Office head a group that would be responsible for drawing up statements and conclusions based on trend and other data. This would help get at the problem of the same data being used in different and sometimes contradictory ways by different agencies and drug abuse experts.

DOD discussed the RIA techniques to be used to screen drug abusers in the military. But, not yet for general disciplinary purposes. Courts have allowed evidence of urine testing in court maritials so there may be a way to use this new test in the same way. There are implementation problems because some want to use the test to discipline and others want to use the test to get soldiers into treatment. There is evidence of sailors manipulating the screening system to avoid sea duty.

The media found out about Custom's "Thunderbolt" operation and it will be ended at the end of the month. They made 37 plane siezures.

Drug trafficking activities seem to be quiet at the moment, say Coast Guard, Customs and DEA. They speculate that the big dealers are waiting for this year's crop to be ready for market - around January or Fedruary. Last year's crop (evidently of inferior quality) is not being marketed.

INM said that Columbian crop seizures are way up and that there is room for negotiation to get an eradication program going. There is a new crop of coca bush being cultivated in Columbia in a relatively low area. This would be a good opportunity to eradicate as the area does not yet have a vested economic interest in this particular growing area. The young coca bush is relatively easy to pull out of the ground. The Columbians are asking for assistance and we should not miss this opportunity to make a positive response.

12/2/81

INM also added that the fact that we sent an Ambassador (Mr. Core) to Bolivia did not condone that country's continued involvement in drug cultivation and trafficking. Bolivia has asked for an entire rural development program of crop substitution before they stop drug cultivation.

Congressional hearings, held on the 18th and 19th of November were discussed. The members were reminded that close and trusting communication is vital in order that the President is not embarrassed.

NIDA suggested that before any agency go to testify, there be a meeting with the White House drug policy advisers to discuss what the agency will say. This would get at the problem of lack of coordination in policy statements.

A list of agencies for possible inclusion in the new drug abuse health issues working group is attached.

CT said that when he meets with the representatives of the Human Resources Cabinet Council, he will inform them of the request for information that was contained in material distributed to Oversight Committee members. Our desire is to keep line authority informed and this should be sufficient.

Possible Representation of Working Group

- * Office of the Science Adviser White House
- * National Institute on Drug Abuse
- * National Institute on Alcohol Abuse and Alcoholism
- * National Institute on Mental Health
- * National Institutes of Health
- * ACTION
- * Veteran's Administration
- * Department of Education
- * Department of Labor
- * Department of State Bureau of International Narcotic Matters
- * International Communications Agency

Possible Representation of Working Group continued

- Department of Transportation National Highway Traffic Safety Administration
- * Department of Justice Narcotic and Dangerous Drugs Division
- * Department of Defense DAS for Drug & Alcohol Abuse