

MENTAL HEALTH

Centre, (accounting for a wide-range of other factors that could affect development) found that people who began using in adolescence, by the time they turned 25, were three times more likely than their non-using peers to drop out of high school or university, seven times more likely to attempt suicide, 18 times more likely to be cannabis-dependent and eight times more likely to go on to use other drugs.

Professor Patrick McGorry, psychiatrist at the University of Melbourne and a former Australian of the Year for his services to youth mental health, has seen that cannabis can have particularly serious effects on the mental health of vulnerable people. One of the major factors of vulnerability is youth.

An Australian research study conducted on siblings in the '80s found that adolescents that start using cannabis at 15 or younger are twice as likely to develop a psychotic disorder than their non-using peers. McGorry explains this level of risk as being much the same as smoking will increase the risk of having a heart attack.

After the age of 15, daily use is more clearly implicated. *The Lancet Psychiatry* journal published a study recently indicating that daily use of cannabis will raise the risk to three-fold in contrast to those who have never used the drug.

There may be a physical reason why the adolescent brain is more vulnerable as found last year by researchers at Swinburne University in Melbourne. In adolescence, parts of the brain are pruned and there are consequent changes in neural connectivity. This latest study shows that adolescents who have used cannabis even just once or twice have larger grey matter than those who haven't, indicating that this process of pruning has been interrupted. A link was also found between these changes in grey matter and effects on those individuals' reasoning and anxiety levels. Research is ongoing.

Other than age, some individuals are simply more vulnerable than others to the drug's adverse effects. A report produced by McGorry and his team at the University of Melbourne, led by author Meredith McHugh, found that if people suffered a panic attack or other warning signs which worsened when using cannabis, they were more vulnerable to the risk of a future episode of psychosis or other long-term mental illness.

Factors such as serious childhood adversity, symptoms of anxiety, depression or panic attacks will also place a person in the vulnerable category for a future mental health disorder. Garry McDonald, the well-known Australian actor and comedian, has publicly stated that cannabis was responsible for inducing his first panic attack, triggering his long battle with anxiety.

It is pretty clear that if young people are particularly vulnerable to such devastating impacts, early intervention should be a priority. McGorry, who was the founder of the nationwide youth mental health service, Headspace, and is an executive director of Orygen Youth Health, promotes an early interventionist approach as the key to prevention of psychosis where a person is showing early signs of developing a mental health disorder.

"This young person might withdraw and change in personality, become less engaged in activities, their self-care will drop off, they might start behaving strangely, or discuss odd beliefs or question motives," explains Baigent.

Yet Stephen, of Walkerville, father of Louise, 22, knows how hard it is to effect



change if the person doesn't want to. Louise began smoking cannabis when she was 14 or 15. She is from a privileged background with all the opportunities that go with that, but she faced some personal challenges with her parents' divorce when she was very young and her mother's second marriage breakdown when she was an adolescent. Louise used cannabis when she was sad, which made her feel good for a short time, but the downside was bad.

She was soon dependent on the drug to make her feel better. A school prefect and a straight A student, she began running away from home, dropping out of school at 15. Stephen and his ex-wife tried many times to sit her down with health professionals who would advise her to stop using drugs. She would be admitted for detox but as soon as she was out, she would be back using.

She still smokes cannabis when she can afford it and has also taken drugs such as ice, that are cheaper and more accessible, with even greater impacts on her health and stability. The family can no longer live with her erratic and aggressive behaviour. She has spent periods of her life homeless but Stephen is thankful that, for now, she has a roof over her head with the assistance of government housing.

He has long since stopped paying for her power bills or anything at all as she would rather spend the money funding her drug habit. Stephen organised for Louise to attend rehabilitation several years ago when he thought she was making progress but she refused to go.

"She would rather self-destruct than get help," he says. "I don't know what the answer is. I'd like to put her on an island somewhere away from everyone ... I think one day the cops will knock on my door and say that something has happened. I feel totally powerless."

Katrina, of Medindie, mother of Matthew, aged 21, is living with the same fears. Matthew began smoking cannabis daily at 14. Although sensitive and perhaps less robust than Katrina's other children, Matthew was a popular, high-achieving student who, like Adam, enjoyed sport. She noticed some changes to his personality at the time but she and her husband thought it was a teenage boy thing.

"We thought he would grow out of it but, in hindsight, when they start young, they never grow out of it."

Matthew soon lost all motivation, losing interest in sport, social life and studying.

By the time he reached the end of Year 12, "a kid that should have been sitting on an ATAR in the 80s or 90s, got a 56," says Katrina.

He, too, tried methamphetamine and ecstasy but was able to stop them at least, with the help of his then girlfriend. Cannabis, though, remains a constant.

His parents, just like Louise's, tried to get him into a rehabilitation centre in Adelaide. The health authorities there told them that they don't accept adolescents unless they have hit rock-bottom.

Katrina was shocked but Baigent explains: "What I think we health professionals really mean by saying that, is that something needs to happen to help them form their own resolve. For some people, things turning really sour can make them see it for themselves and, for others, finding a new meaning in life, a new relationship or maybe suffering psychotic symptoms every time you use the drug is what it will take."

Matthew is not there yet but Katrina, who feels she has tried every other approach to motivate him to change, is now using tough love in the hope he reaches this point.

Thrown out of home, he will be allowed back on one condition – that he agrees to accept help from mental health services to assist him to stop using cannabis.

In Adam's case, it was jealousy of his peers that was enough to trigger his own resolve.

"I always knew there were things I wanted to do," he says. "I always knew that I wasn't where I could have been and that I wasn't in a good place. I was taking drugs to mask that, which is the whole point."

He knew he was over the pull of drugs when, later that year, he was invited along to a ski trip and, with his parents' support, he went.

"That was big for me. I wasn't going to be able to clean my house for a week, I wouldn't be able to go home when I wanted to but I didn't feel at all anxious, just excited," Adam says. "It was the best holiday I've ever been on."

That same year, Adam started work at a restaurant serving as front of house staff where he met the woman who is now his life partner. She encouraged him to do a TAFE course in business studies and when one of the big four banks was recruiting, he got the job. He now works full-time for them as their collection manager.

Newly engaged, he enjoys the work, has been overseas twice, and has more money than he's ever had. He is not tempted to try drugs again even when he has a bad day. These days watching a DVD is enough to relax him. He knows that he lost years of his life where he might have otherwise got his university degree and a higher paying job.

But he is fatalistic. He feels lucky to be a survivor. He feels lucky to have had supportive parents who have allowed him to stay at home in a safe environment, knowing how difficult it was for them to see what he was doing and not being able to stop it. In retrospect though, he thinks they were probably too kind to him.

So, what would Adam say to his own children about trying cannabis?

"I won't tolerate it," he says. "You can try it once, you can try stuff. Kids do. But I'll know when things are changing and I'll come down on you like a tonne of bricks."

WHERE TO GET HELP: Your GP; Headspace, a youth mental health service provider; in a crisis, other than the Mental Health Emergency line on 13 14 65, you can also call Lifeline on 13 11 14. For information about depression or anxiety, call BeyondBlue on 1300 224 636 .