

The cost of smoking your socks

By [Dr Helen Weber](#)

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World No Tobacco Day (31 May) is a good time to explore the long-term consequences associated with the use of marijuana. While it's now above board to [light up and get potty](#) in the privacy of your home, there are still myriad factors to consider, including implications for your health and your insurance premiums.



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Another alternative to regular smoking is vaping, which like cannabis, is often considered safer than smoking tobacco. But there are concerns that this habit could cost you a great deal in the long-term, especially as the more serious side effects of vaping are still being studied.

A recent [Colorado study](#) links cannabis consumption to extreme nausea (called cannabinoid hyperemesis syndrome), which is quite counterintuitive as it's known to be used medicinally to cope with intractable nausea in cancer patients on chemotherapy. There have also been reports of episodes of seizures related to vaping.

While the evidence in both cases is inconclusive, it does highlight just how little we know from a long-term health point of view. What we do know is alarming enough, especially the consequences for the brain and the side effects on mental health.

Cannabis

What you need to know from a health perspective:

Cannabis is proven to have short and long-term implications for

1. The brain, like short-term memory loss, impaired learning ability, compromised co-ordination, altered brain development in adolescents, and cognitive impairment with lower IQ.
2. It's also often associated with risky behaviours, like poor driving, altered judgement and risky sexual behaviour, which increases the risk of STDs, HIV/Aids, and Hepatitis B.
3. Mental health issues linked to paranoia and psychotic episodes and can even elicit schizophrenia in people predisposed to the condition, as a long-term side-effect.
4. It can lead to chronic bronchitis and chronic lung disease.
5. Socially it can lead to young people dropping out of school.

What you need to know from an insurance perspective:

A regular cannabis user will most likely be risk rated based on: frequency of use, history of any addiction and treatment thereof, use of a single substance in combination with other substances, age, occupation, the financial services products being applied for and existing medical conditions that may impact the use of the substance.

The risk rating that is calculated considers these factors in conjunction with clinical evidence and claims experience both nationally and internationally.

Effectively, you're classified as a smoker. Due to cannabis' link to the brain, psychosis, mental illness and risky behaviours, the insurance underwriting risk is deemed much higher.

Your premium is determined by how frequently you use the substance, how much you consume and whether you use other things alongside it.

Vaping

What you need to know from a health perspective

Between 2010 and 2019, the Food and Drug Administration (FDA) in the States received 35 reports of seizures linked to e-cigarette use. Epilepsy has become associated with vaping, but it's critical to note that many of the seizures occurred in people who had pre-existing epilepsy and/ or were additionally using other substances, so the results are inconclusive. Some vaping solutions do contain nicotine, which raises blood pressure and heart rate, which could potentially be related to seizures, but there's not enough evidence at this point.

What is proven is that nicotine has negative implications for the cardiovascular system and can lead to an elevation in liver enzymes, which makes it a metabolic risk. E-cigarettes can also contain carcinogen formaldehyde, which could increase cancer risk. There are also reports of traces of silicone in vaping 'juice', which increase the risk of lung disease.

What you need to know from an insurance perspective:

Given the health risks listed above, vapers are classified as smokers and are usually risk rated the same way. A vaper/ smoker is deemed more at risk of prolonged infection, so sickness cover is highly advisable.

More about the insurance side of cannabis and vaping: Although cannabis use has been decriminalised in South Africa, it still carries risk from a health perspective.

Cannabis users and/ or vapers need to declare to prospective insurers how frequently a substance is used, how much of it is used, and whether anything else is consumed alongside it – like alcohol. Even if you tried ‘smoking your socks’ once or twice experimentally in your 20s and haven’t done so since your insurer needs to know. If cannabis is being used medicinally, this also needs to be revealed, along with the condition requiring the treatment.

Unfortunately, cannabis is not well regulated – meaning that we can never be too sure whether the substance used is poor or what the actual quantities of measured chemicals within the substance are.

Reinsurers and insurers like Sanlam have always applied a scientific, rational and fair approach in underwriting substance use and this remains unchanged in the context of cannabis or any other substance.

We underwrite based on:

- Frequency of use,
- History of any addiction and treatment thereof,
- Use of a single substance in combination with other substances,
- A person’s age,
- Occupation,
- The financial services products being applied for and
- Existing medical conditions that may impact the use of the substance.

The risk rating that is calculated considers these factors in conjunction with clinical evidence and claims experience both nationally and internationally.

Any claim will be assessed on its own merits and general exclusions on substance use will still apply your specific plan.

This means that we have a ‘philosophy’ about smoking – cigarettes, e-cigarettes and cannabis – that we review and adapt over time as new evidence comes to the fore. This allows us to remain objective and open to new research. Right now, there’s lots of grey area. We don’t know enough about the long-term side effects of vaping, and there is an important distinction between recreational and medicinal use of cannabis and the long-term impact of both.

There is still further work being done as indicated in a recent presentation by Dr Sean Chetty from the University of Stellenbosch, about the medicinal use of cannabis in the area of pain management.

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