

Husband's marijuana use is an addiction, wife fears

Q. My husband is a fairly successful 60-year-old attorney who has been smoking marijuana since he was in college. Though you hear that this drug often reduces motivation, it did not prevent him from attaining a partnership position at a fine law firm. He used it only on weekends until the last few years, but now it's multiple times per day, both alone and with some of his old boomer buddies.

I don't really mind if he is stoned when working in our garden or playing poker with his friends, but when with me he goes into himself and becomes more distant from me, such that I feel alone in the evenings, even though he is there. When we're in a social situation (such as a recent multi-couple ski lodge event, or a cruise we took in June), he becomes "adventurous," sometimes leaving me wondering where he is, or flirting with other women, or boring people with long, self-involved tales — all things he wouldn't do when not high.

Sometimes I think, "He's entitled to do what he wants at this age, and it isn't so bad." Other times, I get angry, resenting that I have a different husband from the one I signed on for, and I worry that in some way, his drug use will undermine his career and our plans. Do I consider him addicted or just enjoying himself?

A. Marijuana, like no other substance, tends to create these situations of vagueness and ambiguity, partly because the negative consequences of use are usually so much less tangible and frightening than they are for, say, alcohol, cocaine or heroin. Negative consequences are not only a key part of a diagnosis of substance dependence, but are the primary source of motivation for change.

Now that possession of less than an ounce does not carry criminal penalties in Massachusetts, even potential legal effects are less negative. Because of the fuzziness of this picture, daily users may be less likely to see a problem, and often their family members may find themselves in the position of uncertainty that you describe.

It sounds as if there is at least one problematic consequence of your husband's relationship with marijuana — it has diminished your experience of closeness and connection in the marriage. It also sounds as if it exacerbates a tendency toward narcissistic behaviors with others, such as those you describe in social situations.

The impact of his marijuana use on the quality of his legal work during recent years is an unknown, and might be less noticeable at his stage of career than if he were a young associate. Some stud-

ies suggest that the weakening of memory and new learning that we all may face with aging is exacerbated by chronic exposure to THC, the active ingredient in marijuana. Older adults (even though we do understand that "60 is the new 40") may also be concerned about potential effects on cardiovascular, respiratory and immunologic systems (although research in these areas is not yet considered conclusive.)

In seeking whether to consider someone "addicted," in addition to the issue of continued use despite negative consequences, other questions to ask would be:

- How central (consuming of time, energy, etc) has this behavior become in the person's life with a corresponding reduction in other interests?
- How able is he to sustain limited substance without creeping back up to increased amount and frequency?
- How comfortably can he function without the substance?

Ultimately, *your* task is to assess your own feelings and needs, decide what you can live with (including your husband's apparent unconcern with the impact of his marijuana use on you), and consider what your life would be like if you separated from him. (Although the prospect of separation may grab his attention, threatening or commencing separation as a ploy to influence him is rarely helpful in the long

run; it should only be raised if you are serious about it for your own reasons.)

While no one can give you a simple answer to your dilemma, there are counselors and support groups that may be helpful in reaching your own conclusions. You might begin the process by coming in to discuss the situation in more detail with one of the LCL clinicians (as always, with confidentiality and at no cost). ■

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(617) 896-5323
mschultz@thewarrengroup.com