

ART AND CULTURE

From **Cancer** to **Cannabis**

An Interview on the Nature of Pain with Jimena Ortega

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Jimena is a Mexican sociologist who, at the cusp of age thirty, was diagnosed with breast cancer. Two years later, we are publishing this interview on her personal experience with consuming cannabis as palliative care during her cancer treatment. Our publication of this dialogue aims to mitigate the stigma around marijuana use in the medical field. At the same time, through this testimony, we seek to contribute to qualitative research on the subjective experience of pain and suffering.

Today, cannabis consumption in North America is at a historic juncture, with the opening of legal regulations leading to the expansion of medicinal and recreational cannabis consumption. Nonetheless, there is still little research on its medicinal use for cancer treatment. We are also at a moment of heightened societal awareness around the impacts of cancer treatment, with more and more people taking critical positions in the face of the global hegemony of the pharmaceutical industry. Let us now directly approach Jimena's lived experience:

Rubén (r): Jimena, can you share how you got to know CBD (cannabidiol)?

Jimena (j): Before I was diagnosed, I had noticed that marijuana was being used to mitigate cancer symptoms. The first time I encountered this was many years ago, in a tragic movie starring Susan Sarandon and Julia Roberts. In one scene, the character whom Susan Sarandon plays smokes a joint because she has cancer and is in a lot of pain. She has terminal cancer and isn't getting treatment, but marijuana alleviates her pain. That was the first time I saw someone smoking marijuana. I was ten years old.

You know, some people argue that marijuana should be legalized because of its medical benefits: it helps with anorexia treatment, bulimia . . . tons of things, including cancer pain. That was all I knew: that cancer caused pain.

Sometime after I was diagnosed, the oncologist confirmed that I would need chemotherapy. She said, "officially, I can't tell you this, because it's not legal, but if you can get some CBD drops, do it, because they'll help a lot. The patients I've monitored who've used marijuana in some format or other have seen improvements in their appetites as well as with their pain and nausea."

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I've never liked taking pills or pain killers, but, listening to the experiences that the oncologist shared with me, I thought, "if I'm already going to be poisoning myself with chemotherapy — because there's no other solution — then I'll try something else, too." That's how I came upon THC (tetrahydrocannabinol), though it's hard to find in Mexico, as is pure CBD oil, because extracting the CBD is complicated and requires very specific care.

r: What was your experience taking CBD like?

j: Honestly, I feel like it did help, or I'd like to think that it helped — but up to a certain point, because there was a time when . . . Since I got diagnosed very early on, cancer never made me feel ill; my tumor never hurt or anything. What was really tough was what I had to do to get rid of the cancer: the surgery and the chemotherapy. That's when I realized that the cancer itself wasn't what was getting to me.

It was the chemotherapy that made me suffer: the vomiting, the nausea, losing my appetite, the shit taste in my mouth, the incontrollable thirst (and not being able to drink water because it tasted horrible), the pain in my bones . . . I tried ibuprofen but it didn't help, because I must have had all sorts of hormonal imbalances and strange disorders affecting my body — I could no longer sleep. I also took prednisone (a corticosteroid), and that crap would cause me horrible energy spikes. No matter how tired I was, I'd wake up at 3:00 a. m. and not know what to do, so I'd clean my apartment.

When I took the drops, my dose was one in the morning, two in the afternoon, and three at night. That would keep me stable and, if I was constant, with the three night drops, I could get proper sleep and the pain would go away. Plus, the chemotherapy kills all your cells. It makes them swell, and what THC does is take down the swelling, so that would counter the effect, to an extent. Of course, my dose was quite low, so I wouldn't feel high. I always felt stable.

r: How did you manage to get CBD?

j: At first, I hesitated, because I got it from a hippie in the Roma borough of Mexico City who said her focus was on studying the cannabinoid system and all that stuff. I'm not saying that's not real, it's just that I think we should always question things, especially since there isn't a lot of research around cannabis. Unfortunately, most of the things you hear as a patient, as someone who is sick, are purely anecdotal.



I'm not against using medicinal plants or THC, but we have such little information that there's no standardized rigor — meaning there's no regulation either. As a sociologist, you know that. Science of any kind is different from common sense and from any other kind of collective wisdom because of the rigor and systematization upon which scientific knowl-

edge is built. I think that's the case with the study of marijuana. There's still very little, which doesn't mean it isn't serious, but there still isn't a sound way of sharing knowledge on it — it's different from the way you know that if your head hurts, you should take an aspirin. But it helped me. If it was a placebo, it helped, and if it wasn't, it also helped.

r: How did you know how many drops you were supposed to take?

j: The woman who sold the CBD to me makes her own oil. It all comes from a mini-laboratory, and she told me that she has a lot of oncology clients to whom she recommends microdoses so that they don't end up high. If I wanted to stay stable and not have any symptoms, or at least mitigate them, then she recommended taking microdoses. She asked me how much I weighed, my height, and how often I went to chemo-

therapy. And that's when she recommended one, two, and three drops. I had to take the drops sublingually. I also had marihuana that I could smoke and cannabis butter at home, but smoking would only make me fall asleep.

When I got those energy spikes and that terrible insomnia, the pain, and the nausea, not even three drops were enough, so I'd make myself a tea and go to sleep, but even then, I never felt high. I would even have trouble waking up the next day, since I'd be in a state of complete relaxation. That's how it was for the first few cycles, so for about three months. After



that, I found that if I had four or five drops, I'd get super high. And yes, at first it was fine. I'd have a good time, I'd have fun, but after the third cycle — each cycle lasted twenty-one days — I'd feel okay for the first three days, but after the fourth day, the nausea, vomiting, migraines, bone pain, thirst, and bodily pains would hit me. It got to a point that, even if I only took the two drops in the afternoon, I'd feel high — probably because I was already so poisoned from the chemotherapy. But it wasn't a good high, I mean, it wasn't fun. I'd truly feel bad because it was too much intoxication at once.

Between the third and fourth cycle, I started consuming fewer and fewer drops because I'd feel very sick. It was a major sense of unease — really bad. By the time I got to the fourth, fifth, and sixth cycles, my white blood-cell count dropped so much that it fell below the minimum. At that point, you become more prone to infection, so I'd get sick to my stomach all the time, because chemo also destroys your stomach. I'd get horrible colds and would get infections regularly. After the fourth cycle, the oncologist prescribed filgrastim, which stimulates white blood cells but also makes your bones hurt. It was unbearable. I was prescribed a psychiatric medication, pregabalin, but neither that medication nor the ibuprofen did what THC did for me for the last three cycles, when I had to get filgrastim shots.

And I think that the problem with these kinds of alternatives isn't that they don't work, but that there are legal voids, taboos, and that the degree of systematization of knowledge on how to use THC and CBD is very low. That's why the oncologist couldn't prescribe them even though they had worked for her other patients. So, I tried them just to keep myself from getting even more poisoned, but I think that, in the end, it's just another kind of intoxication, but I didn't want to be taking pill after pill.

r: What's your stance on these kinds of alternatives?

j: I'm usually very categorical about that kind of thing. I trust in science. Even so, except for when it comes to cancer, I try not to take any medication, because there are always major side effects. For example, I try not to take antibiotics or pain killers, unless I'm in an extreme situation and there's no other option. The first thing I did when I was diagnosed was to read everything I could get my hands on. Fortunately, I have a lot of doctor friends who guided me and explained things to me. They were the ones who told me that it's not a good idea to take a lot of medication, because it's very strong. I

bought a book on the history of cancer, a huge tome that I still haven't finished but that helped me a lot when it came to understanding cancer at the cellular and psychological level. It's a wonder, when you can understand what it is, more or less, and when you realize that the solutions weren't just pulled out of a hat. There are reasons behind them, and they aren't plain and simple, but complex and highly specialized.

r: Beyond wanting to get informed, what did cancer mean to you?

j: It's very hard to say. Sometimes you have a preconception about what an illness is and how it makes you feel pain, but I never felt sick from it, I mean, the tumor never hurt. So, I don't know if it was the cancer, but now I think that, as an illness, the experience of cancer encompasses a lot of other experiences that probably go beyond just feeling sick. It wasn't just that I had to deal with the bureaucracy of the Mexican Social Security Institute (IMSS), even though everything was fine in the end. Having cancer also meant that I had to go through surgery, with blood tests and check-ups with the oncologist every three weeks. It also meant that I would feel sick from all the chemotherapy. Now, I'm not cured: even though I'm free of cancer, that doesn't mean that I don't have it, or that I'm not an ill person. Cancer made me rethink my conceptions of health and illness—because I'm ill. The fact that it hasn't manifested again is a different matter.

To have cancer was also to witness my body changing. I'm almost thirty-two years old but I feel a lot older. I feel like it made me age, and that's something that upsets me and makes me very sad.

r: What experience has this process left you with?

j: Cancer didn't change my life. I think that, because I am who I am, I acted the way I did and was able to get through the chemo. I was able to keep going to treatment week after week. Because I am who I am, I have taken the medication every day and every night. I think that, because I am who I am, I got through that part of cancer the way I did. Of course I had my doubts, of course I cursed, of course I was sad, overwhelmed, wanting to throw in the towel, but even so, I said, "screw it, I'll keep going." It didn't change my life. I don't think I'm a different person. I'm the same person I've always been. It was my nature that made me get through everything I had to get through, and that's that. **NMM**