

CANNABIS USE IN ADULTS OVER 50

Overview

Cannabis legalization is occurring across the country, with 24 states and D.C. legalizing adult-use cannabis and 38 states and D.C. legalizing medical cannabis use. With this change in policy, cannabis use among older adults is rising. This trend raises important public health concerns as older adult use of cannabis can pose unique health risks.

This factsheet will review data regarding rising cannabis use among older adults, as well as explore:

- Unique health risks associated with cannabis use in older adults; and
- Why cannabis use among older adults may be rising.

Rising Cannabis Use

Nationally, the rate of cannabis use among older adults has increased over the last decade. While there is no set definition of older adults, the most expansive definition includes adults 50 years of age and older. According to a poll by the University of Michigan's¹ National Poll on Healthy Aging, 12% of adults aged 50 and up reported current cannabis use. Additionally, a 2025 study from New York University's Center for Drug Use and HIV/HCV Research (CDUHR) found that in 2023, 7% of U.S. adults aged 65 and over reported cannabis use in the past month.² This number was 4.8% in 2021. This represents a 45% increase in current cannabis use among adults 65 years of age and older from 2021 to 2023.

In Maryland, current cannabis use among adults 65 and over rose from 2.3% in 2018 to 6.6% in 2024.³ Among adults 55 and over, the rate of current cannabis use rose from 5.6% in 2018 to 8.0% in 2024.⁴ This represents an increase of 187% of current cannabis use in adults over 65 and a 42% increase among adults over 55. Older adults also make up a significant portion of the medical cannabis patient population in Maryland. Adults 56 and older account for 40.7% of the medical cannabis patient population and individuals 66 and older account for 20.6% of the medical cannabis patient population.⁵

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Health Risks

As people age, they can become more sensitive to the impact of drugs, both prescription and recreational.⁶ This means older adults are more likely than younger adults to experience common side effects from cannabis use, or experience those side effects more intensely, such as:

- Anxiety, paranoia, confusion, and hallucinations;
- Drowsiness and disorganized thoughts;
- Memory, attention, and coordination issues; and
- Increased risk of falls, injuries, and accidents.⁷

Older adults are also more likely to have chronic conditions, such as heart, liver, and/or kidney diseases.⁸ As a result, cannabis use can create additional health challenges. For instance, cannabis use can exacerbate heart conditions by raising heart rate and blood pressure, which can increase the risk of a cardiac event, such as arrhythmia, angina, heart attack, or stroke.⁹ Cannabis use can also lower blood pressure, which can lead to dizziness or fainting.¹⁰ Further, cannabis can have adverse drug interactions with prescriptions used to treat common conditions, such as blood thinners, which can increase the risk of drug-related side effects.¹¹ These health risks are particularly concerning as the 2025 New York University CDUHR study on cannabis use trends noted a significant increase in cannabis use by older adults with chronic conditions, such as heart conditions, diabetes, hypertension, cancer, and chronic pulmonary obstructive disease.¹² The University of Michigan's National Poll on Healthy Aging found that only 56% of adults who used cannabis regularly had discussed their cannabis use with their doctor.¹³

Cannabis use disorder is an additional concern for older adults. Cannabis use disorder is a condition that involves a problematic pattern of cannabis use that negatively impacts one's health and quality of life.¹⁴ The University of Michigan's Poll on Healthy Aging found that 20% of older adults exhibited at least one sign of potential dependence on cannabis.¹⁵ While dependence by itself does not rise to the level of cannabis use disorder, it is a precursor and oftentimes a requirement to being diagnosed. In one study on cannabis use in veterans aged 65-84, of the 10% of respondents who reported current cannabis use, 36% had symptoms of cannabis use disorder, with 22.9% of overall respondents showing mild symptoms, 10.9% moderate symptoms, and 2.5% severe symptoms.¹⁶

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Why Increased Use?

There are many reasons cannabis use is rising among older adults. One is lowering risk perception among potential users. For instance, in Maryland, the perception of there being “great risk” from smoking cannabis monthly has decreased among individuals 12 and over from 25.9% in 2015-16 to 21.0% in 2021-22.¹⁷ Additionally, many older adults see cannabis and cannabis products as a way to manage the conditions and symptoms of aging, such as trouble sleeping, pain, or mental health.¹⁸

Maryland policy has also increased accessibility to cannabis, both adult-use and medical. Maryland’s medical cannabis program has broad qualifying conditions, such as severe/chronic pain and “other conditions,” allowing for more people to qualify for medical cannabis under the definition.¹⁹ This accessibility is reflected in medical cannabis patient data: in 2024, severe/chronic pain was the most frequently reported qualifying condition for medical cannabis patients.²⁰ The most common “other chronic conditions” were anxiety and insomnia.²¹

Maryland’s medical cannabis program also increases accessibility by allowing designated caregivers to pick up medical cannabis for the patient.²² This rule removes barriers for older adults who may otherwise struggle to get to the dispensary to access medical cannabis due to a disability or inability to drive. Furthermore, Maryland allows all adults, whether adult use or medical users, to grow cannabis at home²³ and will allow for delivery of cannabis products.²⁴ All these policy choices are important accessibility tools, especially for medical cannabis patients, but also have the incidental effect of making it easier for all – including older – adults to access cannabis.

Conclusion

Cannabis use by older adults is rising and poses unique health risks. Healthcare practitioners, local health departments, community organizations, and state agencies that work with older adults can provide outreach and education on the unique risks of cannabis use among older adults to help minimize the health risks for this population.

The work of the Legal Resource Center for Public Health Policy (LRC) is funded in part by the Maryland Department of Health. The LRC provides information and technical assistance on public health issues related to cannabis, injury prevention, problem gambling, and tobacco. The legal information and assistance provided in this document does not constitute legal advice or legal representation.

For legal advice, please consult specific legal counsel.

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¹ Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan, [Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan](#), (Sep. 12, 2024).

² Han, Benjamin, et al., Trends in Past-Month Cannabis Use Among Older Adults, JAMA Internal Medicine, doi:10.1001/jamainternmed.2025.1156 (June 2, 2025).

³ See Maryland Department of Health, Maryland Behavioral Risk Factor Surveillance System (BRFSS) Report (2018); Maryland Department of Health, Maryland Behavioral Risk Factor Surveillance System (BRFSS) Report (2024) (Data unpublished and provided by the Maryland Department of Health).

⁴ See Maryland Department of Health, Maryland Behavioral Risk Factor Surveillance System (BRFSS) Report (2018); Maryland Department of Health, Maryland Behavioral Risk Factor Surveillance System (BRFSS) Report (2024) (Data unpublished and provided by the Maryland Department of Health).

⁵ *Maryland Medical Cannabis Patient Survey Report 2023*, Maryland Cannabis Administration, <https://cannabis.maryland.gov/Documents/2024%20Reports/MMCPS-23-V5.pdf> (Sep. 2023).

⁶ *Cannabis Information for Older Adults*, Ottawa Public Health, <https://www.ottawapublichealth.ca/en/public-health-topics/cannabis-information-for-older-adults.aspx> (Aug. 28, 2025).

⁷ *Id.*

⁸ *Id.*

⁹ *Id.*

¹⁰ *Id.*

¹¹ *Id.*

¹² Han, Benjamin, et al., Trends in Past-Month Cannabis Use Among Older Adults, JAMA Internal Medicine, doi:10.1001/jamainternmed.2025.1156 (June 2, 2025).

¹³ Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan, [Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan](#), (Sep. 12, 2024).

¹⁴ Cannabis Use Disorder, Cleveland Clinic, <https://my.clevelandclinic.org/health/diseases/cannabis-use-disorder> (accessed Oct. 15, 2025). Maryland Medical Cannabis Patient Survey Report 2023, Maryland Cannabis Administration, <https://cannabis.maryland.gov/Documents/2024%20Reports/MMCPS-23-V5.pdf> (Sep. 2023).

¹⁵ Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan, [Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan](#), (Sep. 12, 2024).

¹⁶ Pravosud, V. et al, Cannabis Use Among Older Adults, Jama Network Open, doi:10.1001/jamanetworkopen.2025.10173 (May 14, 2025).

¹⁷ 2025 Maryland Cannabis Use Biannual Study, Maryland Cannabis Administration, [https://dlslibrary.state.md.us/publications/EXEC/MCA/HG13-4401\(c\)_2024.pdf](https://dlslibrary.state.md.us/publications/EXEC/MCA/HG13-4401(c)_2024.pdf) (Mar. 1, 2025).

¹⁸ Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan, [Gavin, Kara, Cannabis & older adults: Poll looks at use, beliefs and risk, Michigan Medicine University of Michigan](#), (Sep. 12, 2024).

¹⁹ Md. Code Regs. § 14.17.04.01 (available at <https://dsd.maryland.gov/regulations/Pages/14.17.04.01.aspx>).

²⁰ Maryland Medical Cannabis Patient Survey Report 2023, Maryland Cannabis Administration, <https://cannabis.maryland.gov/Documents/2024%20Reports/MMCPS-23-V5.pdf> (Sep. 2023).

²¹ *Id.* Use of cannabis can exacerbate rather than relieve these conditions.

²² *Caregivers*, Maryland Cannabis Administration, <https://cannabis.maryland.gov/Pages/caregivers.aspx> (accessed Oct. 15, 2025).

²³ Md. Crim. Code § 5-602 (available at <https://mgaleg.maryland.gov/mgawebsite/Laws/StatuteText?article=gcr§ion=5-602&enactments=true>).

²⁴ Md. Code Regs. § 14.17.07.07 (available at <https://dsd.maryland.gov/regulations/Pages/14.17.07.07.aspx>).

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