Medical Marijuana, Part 4: Can a Christian Use It?

by Walt Larimore, MD

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For three posts I have written mostly as a physician. I have told you what CBD is and isn't, where the law now stands, and what the evidence says cannabis can and cannot do. This is the post most of you have been waiting for, and it is the one I have thought hardest about. Can a follower of Jesus use marijuana?

I want to answer that carefully, because I have watched this question divide Christians who love each other and love the Lord. Some of my readers have a grandson in the grip of cannabis addiction. Some have a wife with multiple sclerosis whose spasms only cannabis seems to touch. Some have simply been told by their pastor that it is a sin, or by their neighbor that it is a plant God made, and they want to know which is true. So let me lay out what Scripture actually says, what thoughtful Christians have concluded, and where I land. Then you will have to do what every believer must do with a question the Bible does not answer by name: think it through before God.

What Scripture says, and doesn't

There is no verse about cannabis. Some have tried to find one in Galatians 5:20, where Paul lists "sorcery" (the Greek word is *pharmakeia*, which is related to our word "pharmacy") among the works of the flesh. I don't find that persuasive. The word described the use of drugs and potions in pagan magic, not medicine, and stretching it to cover a dispensary strikes me as the kind of proof-texting that gives Bible study a bad name.

What Scripture does say bears directly on the question, and it says it often.

It commands sobriety. "Do not get drunk with wine, for that is debauchery, but be filled with the Spirit" (Ephesians 5:18). "Let us keep awake and be sober" (1 Thessalonians 5:6). "Be sober-minded; be watchful" (1 Peter 5:8). Drunkenness appears in Paul's list of the works of the flesh, right alongside sorcery, and he says plainly that those who practice such things will not inherit the kingdom of God (Galatians 5:19 to 21). The church has been remarkably unanimous on this for two thousand years. Deliberate intoxication is sin.

It says our bodies are not our own. "Do you not know that your body is a temple of the Holy Spirit within you, whom you have from God? You are not your own, for you were bought with a price. So glorify God in your body" (1 Corinthians 6:19 to 20).

It says we are to submit to governing authorities (Romans 13:1 to 4, 1 Peter 2:13 to 14), which is why the legal picture I described in Part 2 is not a side issue.

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It says that Christians have real liberty, and that liberty has limits. "All things are lawful for me, but not all things are helpful. All things are lawful for me, but I will not be dominated by anything" (1 Corinthians 6:12). Romans 14 tells us not to judge a brother on disputable matters, not to cause a brother to stumble, and, in one of the most searching verses in the Bible, that "whatever does not proceed from faith is sin" (Romans 14:23).

And it says that medicine is good. Jesus healed. Luke was a physician. Paul told Timothy to take a little wine for his stomach (1 Timothy 5:23). Wine itself is called a gift that gladdens the heart (Psalm 104:15). Relieving suffering is part of our mandate to push back against the curse, and Christians have built hospitals for that reason since the fourth century.

Hold those five things together, and you have the frame in which every careful Christian treatment of this subject has been written.

Three positions worth taking seriously

I have read a great deal on this subject, and three treatments stand out. They do not agree with each other, and I think each is worth your attention.

The Christian Medical and Dental Associations, in a position statement approved in 2019, took the physician's view. CMDA holds that a prudent physician should recommend only FDA-approved, pharmaceutical-grade medications with clear indications, established dosing, and proper monitoring. It says bluntly that a dispensary product with unknown contaminants, variable contents, and unproven efficacy "is not medicine," and that smoking anything is never medicine. It does not say Christians may never use cannabinoids. It says the bar for any medical use must be high, that benefits must clearly outweigh risks, that FDA-approved options come first, and that when those have failed, a patient should seek a qualified physician who can prescribe pharmaceutical-grade cannabinoids with proper monitoring. It also called for rescheduling to allow real research, which, seven years later, has begun to happen.

Melvin Otey, a law professor writing in the theological journal *Themelios* in 2023, took the lawyer's view. His argument was that the drug's legal status must be a principal consideration, that Scripture requires Christians to submit to governing authorities, and that because marijuana possession and use remained federal crimes regardless of state law, Christians had a duty to avoid it entirely, medical use included. He compared marijuana today to alcohol during Prohibition: available, but illegal. He was honest that federal law might change, and said that if it did, Christians would then be free to analyze cannabis the way they analyze alcohol, remembering that legalization alone does not make a thing wise. As I noted in Part 2, the April 2026 rescheduling order moved state-licensed medical marijuana out of Schedule I, and the courts have so far let that order stand. Lawyers are still sorting out precisely what that means for an individual patient's federal status, and recreational use remains a federal crime. But the footing under Otey's argument has shifted, and by his own reasoning that shift reopens the question for medical use.

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A 2024 essay in *Christianity Today*, drawing on ethicist Todd Miles's book *Cannabis and the Christian*, took the pastor's view. Its argument about recreational use is the one I find most compelling. Alcohol can be consumed without intoxication, and Scripture commends it in moderation. Marijuana cannot. The only reason anyone smokes pot recreationally is to get high, and even a small dose produces the high. Recreational THC use is therefore seeking intoxication, and seeking intoxication is what Scripture forbids. On medical use, the essay allowed that judicious use of intoxicating substances to relieve suffering can be part of our mandate to push back against the Fall, but it asked hard questions: Is this the best or only option? Is it in physician-directed doses? Is the motive honestly relief, or a convenient way to use weed? It concluded that such use is not sinful when the benefit outweighs the harm, provided the decision is made soberly, with accountability, and for a limited time.

Where I land

I have spent a long time with these three, and with Scripture, and here is where I have come out. I hold it with conviction and with an open hand.

On recreational marijuana, I agree with Miles and with *Christianity Today*. The purpose of recreational THC is to alter the mind for its own sake. That is intoxication, whatever we call it, and Scripture does not leave room for it. The alcohol comparison fails at exactly the point where it needs to succeed: a believer can enjoy a glass of wine at dinner without being drunk, but there is no THC equivalent of that glass. Add to that what the evidence in Part 3 shows about addiction, psychosis, driving, and the developing brain, and I cannot find a way to call recreational use a matter of Christian liberty. It is not the unforgivable sin. Many believers have used it, and some reading this use it now, and the grace of God is as available for this as for anything else. But I will not tell you it is fine.

On CBD, I said in Part 1 that this is a question of wisdom and stewardship, not of holiness, because CBD does not intoxicate. I stand by that. Be a careful steward of your body and your money, and check your medications.

On medical THC, I land where CMDA and *Christianity Today* overlap, and I land there as a physician. For forty years I gave morphine to patients in severe pain and to patients who were dying. Morphine is intoxicating. It clouds the mind. It is addictive. No thoughtful Christian has ever told me that giving it to a woman with bone cancer was sin, because the purpose was relief of suffering, the dose was the lowest that worked, and a physician was accountable for the decision. The same logic applies to THC. What makes intoxication sinful is seeking it for its own sake. What makes a drug medicine is that it is used, under care, in the smallest effective dose, for a real condition, with the goal of restoring a person to function rather than removing them from it.

So I believe a Christian may use THC medically, and I believe the conditions matter enormously. Here are mine.

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- A real diagnosis, for a condition where there is at least reasonable evidence that cannabis helps. Part 3 lists those. There are not many.
- Standard treatments and FDA-approved cannabinoids have been tried first, or there is a sound medical reason they cannot be.
- A physician who knows you is directing the treatment. Not a dispensary clerk. Not a website. Not your cousin.
- The lowest effective dose, taken by mouth, with the goal of relief rather than euphoria. If you find yourself wanting the high, tell someone. That is the moment the medicine is becoming something else.
- You are not in one of the groups that should never use it: pregnant or nursing, under 25, with a personal or family history of psychosis or addiction, or with unstable heart disease.
- Accountability. Your spouse knows. Your physician knows. If you are wise, your pastor or a trusted friend knows.
- A defined trial with a stopping point. If it is not clearly helping in a month or two, it is not going to, and continuing is no longer medicine.
- You obey the law where you live. Recreational use is federally illegal everywhere. Medical use is legal only within your state's program and only in your state. And a medical card will not protect your job if you are federally drug-tested.

Some of my brothers and sisters will read those conditions and conclude that the wiser course is to abstain entirely, medical use included. I respect that, and Romans 14 requires me to. It also requires them not to judge the believer with MS who, having met every one of those conditions, uses a cannabis oil at bedtime so she can sleep without spasms. If you cannot do it in faith, do not do it. If you can, do it quietly, do it carefully, and do not make it a banner.

A word about compassion

I will end where the *Christianity Today* essay ended, because it is the right place. About three in ten people who use cannabis develop a use disorder. Some of them are in your church. Some of them are your children. The church's response to the drunkard has too often been shame, and shame has never made anyone sober. Addiction is a stronghold, and strongholds are broken by grace, truth, and the patient love of a community that will not give up on a person. Be that community. Do not be naive about the drug, and do not be cold to the person.

The bottom line

- Scripture forbids intoxication, calls our bodies temples, tells us to obey the law, gives us real liberty with real limits, and commends medicine as a gift. Any Christian answer has to hold all five.
- Recreational THC use is seeking intoxication. I do not believe it is compatible with following Christ.

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- CBD is a stewardship question, not a holiness question.
- Medical THC can be legitimate for a Christian under strict conditions: a real diagnosis, better options tried first, a physician's direction, the lowest effective dose, no red-flag risk factors, accountability, a defined trial, and obedience to the law.
- Believers who conclude they should abstain entirely, and believers who use it medically within those conditions, owe each other the charity of Romans 14.

Next time, the last post in this series, is written for my fellow Christian physicians: should you recommend it, and if you do, how do you do it responsibly?

This post reflects my own convictions as a Christian and a physician. I have tried to represent the views of others fairly and to cite them so you can read them for yourself. Where I have failed at either, I welcome correction.

Sources

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