

## 27. "Sex and Cannabis" Chelsea Cebara ID 03:11

Recording. Okay. Welcome to the show, Chelsea.

I'm so excited to have you here. I'm so excited to be here. Thank you for asking me on.

Yeah. So I have really been looking forward to this interview because it's something I have a lot of questions about. It's something that comes up in my practice quite a bit.

And so I know that there are people out there who are going to learn a lot from this podcast and who probably will have a lot of the same questions. So before we dive into the chunk of this episode, can you talk a little bit about how you got into treating sexual issues using cannabis? Well, I kind of fell into it. Well, I made the choice, but I wasn't ever one of those people who really loved weed recreationally.

I come from Florida where the cannabis is really not great. And it was never, it was never one of my preferred recreational substances. So then I move up to Seattle for other reasons.

And I have terrible endometriosis or had terrible endometriosis and crippling pain. And I was on the floor at my friend's house one time, just in a fetal position. Women who struggle with this, they know it's so, so bad.

And she, it was a huge pothead. And she said, you know, here, take two bong rips. And I'm desperate.

I'm like, no, no, I don't like weed that much. And she's like, trust me. So I did.

And not only was the pain gone for minutes, but I wasn't even high after that. And I thought, wow, there's really something to this. And this friend was actually opening a dispensary.

And so I actually pivoted. I had gone to school for anthropology with a specialization in sexual health. And she, that was, you know, you have to think this is 2009.

So high to the recession. Not a good time to get work in that area. So I was struggling and, and I went to work for her.

Oh, wow. Yeah. And, and after that just kind of pivoted everything.

So I'm sitting there and, and, you know, I became a medical specialist bud tender, they have a special designation up here for medical certification bud tenders. And I was doing that. And I started seeing products come into the dispensary that were designed for sex and very poorly designed.

Because these are folks who knew a lot about weed, but they didn't know much about

the vaginal biome. They didn't know, you know, they didn't know the basis for any of the things they were creating. So I was seeing these really badly formulated things.

And so I started teaching because I now had this Venn diagram overlap of cannabis expertise and sexual health expertise. And so I started teaching workshops. And that became a job I was, I was hired from someone who had gone to one of those and ended up partnering with a friend of mine to develop the world's first water-based THC lube.

And I put quotation marks. So we'll talk about that later, but I'm curious. Yeah.

Yeah. So it was, it was a circuitous path, but, but definitely it was like, I can't believe nobody is talking about this or do. Yeah.

Yeah. I mean, especially since cannabis is now, you know, been formulated to treat all kinds of medical issues. It is a bit surprising that it wasn't really until the past 10 years or so that people took more of a focus to use it for sex.

And in a way I would think that would be one of the first things people would think about because that tends to be where the money is for a lot of pharmaceutical products. Yeah. You would think it's just, I think it's because it does, you know, sadly, like everything else, it does help women or people with vaginas more tends to help more than this is.

And so, you know, how that goes. Yeah. Yeah, definitely.

Definitely. So cannabis has come a long way. I mean, I'll never forget.

I had an experience in college where I tried the brownies and no one told me that it took a while for them to kick in. And so I hit another one and was pretty much on the floor feeling like I was having this very out of body experience and really had not much. I didn't have much of an interest in trying it again for a long time, but that was probably pretty bad quality I'm assuming at a college party, but it has come a long way and there are all kinds of strains.

And I hear a lot of buzzwords being thrown around about what people should look for when buying. So can you maybe start just by breaking it down for the average consumer or really let's say for a beginning consumer? Sure. Actually.

And I'm really great. I'm really glad that you brought that up. I actually have a book coming out in about three weeks called The New Cannabis Consumer Guide that is really designed to give people the exact information that they need and not too much information because there's really a deluge of information out there.

Yeah. Let me interrupt you really quick, Chelsea. I'm going to have you start that part over about your book, because by the time this airs, it'll be about 4-20 and your book will be out.

Perfect. If you want to say, take it from the top and say that you have a book that just came out, that would be appropriate. Okay.

Yeah. I'm really glad that you brought that up because I'm, my new book is just coming out, has just come out. When you ask the question again, it'll be easier.

Yeah. Well, I, um, okay. So if you could just break down kind of what the average or even beginning consumer should think about when purchasing cannabis, I think that that would be really helpful.

Oh, awesome. I'm so glad that you asked that question because I actually just put out a book that is designed to answer that very question in a way that gives the information that you need, but not too much information. It is called the new cannabis consumer guide, and it's available on all the major ebook platforms.

You can find a link on my website. It is really just synthesizing in a very, in a very concise way, the information that consumers who are new to cannabis, curious about it, or just casual users need in order to make smart buying decisions, make, find safe and effective products. How do you determine who's a good company and who's not? So that's coming out.

And I actually, it's funny that you mentioned the brownie thing, because there's actually a sentence in the book that is everyone who ate that second brownie knows the dosage is important. Yes. You don't miss, you don't make that mistake twice, but it is very, very, very common.

And it is almost, it almost always the same thing that you describe. It's a college party. There are brownies.

You have one, you don't think it's working. You have another one. I did that.

Everybody has done this and the dosage then you're going from if you're, if you're starting with edibles, you're starting milligrams should be 2.5 to maybe five. And your, your average brownie that you might have at a party is like 60. Oh, whoa.

So you had, I mean, if we're being generous, it was a small brownie. You had 30, you know, as you had at least 60 milligrams when you should have had 2.5. And that's why you're psychedelic and intense. But, but this is, this is actually, there is some background information you need in order to go to a dispensary and make good choices.

And so my book does get into that, that detail. But the take-home is you really have to be prepared for a short and hopefully pleasant journey of discovery and finding the products that work for you. Strains while straight, what we call strains, it is real.

The idea that we have of strains that they're consistent, that they always produce the

same results. And that results is consistent from person to person is really a myth. So you need to go in thinking more about the, at what, what is imparted by, by terpenes and minor cannabinoids.

It's like this kind of full profile of the plant rather than what the strain is. And it does make it a little trickier, but it is one of the realities of cannabis. If you want to get the best experience, you have to be prepared to do a little bit of trial and error.

You have to go into the shop and you have to look at not just the strain, but the company and how they grew it. You have to look at all of their testing. And my book does talk about how to read a label correctly and understand what it's telling you.

You have to look at its formulation. If it's anything other than just flower, you know, just bud. And then you have to also try it more than once as you, as you go forward.

So it's a little bit more of a daunting process, I think for folks because it, if you do try the wrong thing, it can be a little bit uncomfortable, but you just, if you keep your dosage reasonable, even if it's not the strain for you, even it's not the growth for you or the product for you, it's not going to be a major experience like you had in college, you know? Yeah. That's good to know. And I mean, truthfully, what you're saying really, isn't that different from any kind of medication you might take for something.

I mean, some are more clear cut. If you have an infection and you need an specific antibiotic, that's what you take and you know exactly what to do. But I think, especially like for psychotropic medications, a lot of people have to play with different medications, different dosing.

They may have to add something to combat a side effect of something else they're taking. And there's really a lot of trial and error, you know, when it comes to many medications as well. And so I think what you're describing really doesn't seem any different.

Yeah. Yeah. People just need to go in with that expectation, especially if you're looking to treat medical concerns.

Uh, just, just have that in, in the forefront of your mind. And then it won't be like, Oh, I tried something and I didn't care for it. That means cannabis isn't for me.

Right. You know, it, it, yeah. Yeah.

And would you say that that's something like the average dispensary worker, is that the right word by the way? Okay. Yeah. That they would be able to help you with, or is it really something people need to kind of go in prepared to, to do on their own? That's both really.

Um, so there I'm a really huge bud tender activist because I started there. Uh, and also because I saw so many, um, so many incredibly knowledgeable professionals working as bud tenders and they are not compensated, um, commensurate with their knowledge and their skill. And they're expected to have this tremendous knowledge and make really, I mean, they're not allowed to make medical recommendations technically, but we all know that effectively, that's what they're doing.

So they're, they're really making these important suggestions for people and they deserve respect and they deserve higher compensation. And most my cat, sorry. That's okay.

Um, most bud tenders are going to be knowledgeable. Now, does that mean that there aren't plenty of folks who are going to lead you astray are going to try to sell you the most expensive thing or the thing that has the most THC? Yes, that does happen, but you got to vibe it out, you know, with your store and make sure that you feel comfortable accepting the recommendations and you can't only do that. Right.

Also have to do the research yourself and you have to keep a notebook, a literal notebook or a notes app on your phone. And you have to write down your experiences for like a month. Yeah.

Yeah. No, that makes a lot of sense. Can you talk a little bit about different ways of consumption? Because it used to be you rolled a joint or you ate a brownie and now we have all kinds of options.

So can you break that down for people just so that people kind of have an understanding of what their options might be? Yeah, absolutely. And again, this, I go into this in my book, it's got it really well laid out. So do pick that up.

If you'd like this in the kind of a more clear, you know, nonverbal way. But there are basically five categories you have inhalation, which includes both combustible cannabis, like you might smoke a joint or, or use a pipe as well as vaporized cannabis. So you can vaporize whole flower, or you can vaporize oils.

Like you see people with those vape pens. Then you have edibles, which is anything that gets processed through your digestive tract. Then you have sublinguals, which are usually placed under the tongue and held there for as long as you can.

And this is like mints and tinctures. And these are kind of half and half. They're, they're absorbed a little bit through your mucosal membrane in your mouth, but also a little bit through your digestive tract.

So I recommend them a lot as like kind of a softer, gentler edible edible that you don't have to wait two hours to know where you're at. And so then you have your topicals, which are going to be localized effects, something that you rub on a part of your body

that you have cannabinoid receptors all over your body, including on your skin. In fact, your skin has the highest number of them of any part of your body.

So these are, and of course these are where my heart's at. I love topicals. So that that's a category.

And then there's transdermals, which are still applied to the skin, but they have special ingredients that are designed to traverse the skin and enter the bloodstream. So those are kind of more similar to a sublingual or an edible they're longer lasting, and they're going to be processed through your liver more slowly. Interesting.

And I imagine your method of consumption would really depend on what you're using it for. So let's talk then about how cannabis can be used for sex. You discovered it really helped with your endometriosis pain, but now it's something that people can use for all kinds of issues.

So I'm just going to hand it over to you and ask you to give people the breakdown. Well, I would be here for two hours. In fact, in a couple of weeks, I am teaching for two hours on this topic.

So it's, I will try to synthesize it because the, the essential thing that cannabis does that improves sexual response and helps with sexual dysfunction is it improves blood flow. THC in particular is a vasodilator and it improves blood flow to the smallest capillaries in your body. Especially this is why your eyes get red when you smoke.

It is not because of the smoke as many people think it is because of this vasodilating effect that applies to your genitals as well. So you're also having a flushing, which is very similar to the natural arousal response. It also enhances sensitivity.

If you're using something systemic, meaning it's in your blood stream. So something you've smoked or eaten, not a topical, then you're also going to have the intoxicating effect that I'm assuming THC here. We can talk about CBD only as well, because it does have effects, but I want to be very clear that a lot of the things that are best for improving sex are THC specific.

Okay. Okay. So we're going to, we're going to, I'm going to drive that point home.

Cause there's a lot of CBD claims out there that are like, it's going to do the same thing as THC and it just simply is not. So we'll want to be clear about that. But yeah, so those intoxicating effects also have the effect of heightening your senses.

A sense of increased sensory perception is very common. And so that obviously plays well into arousal. While cannabis is itself, not an aphrodisiac specifically, what it tends to do is remove barriers.

If you find the right strain, you know, the right row, the right product, it removes the barriers to your own eroticism, I feel. And it really can get you out of your own way, get you out of your head, get you more in touch with your body. So it does have this kind of indirect aphrodisiac effect.

And then the other thing it does is reduce inflammation. So inflammatory pain that can be the result of micro tears or, you know, anything that might be going on there. Or if you have pain from unconscious tightening of the pelvic floor, you can find, people often find relief through topical cannabis and those preparations, especially that we call lubes, which is a misnomer.

And I can explain that actually, I'll just tell you right now. Yeah. Lubes are designed to reduce friction.

Cannabis topicals that are marketed as lubes are not, while they might be slick, they might feel slick. Their primary purpose is not to reduce friction, it's to enhance sensation. So you don't use them the same way that you would use a lube.

You want to put it on and you really want to give it as much time as possible to absorb into the tissue, which is not what you do with a lube, typically, right? You put it on and wait. Think about it more as an ointment, which I know is the least sexy word in the English language. But if you can think about it that way, it's more effective or a primer.

I've heard people call it a primer. Oh, I like that. Then if you can put it on like 20 minutes in advance of a session of lovemaking, or if you're by yourself, it works also, then you'll really get a much better result because you're giving your skin more time to absorb.

Okay. So yeah, so that's kind of the main ways. You have your increased blood flow, which is really the most important thing.

You have that sense of the expansion of the senses that happens if you're using something systemic, you have decreased inflammation, and then you have all those kinds of, um, kind of, uh, person specific feelings. Like you might have lower anxiety, you might have less tension overall and, and not everyone gets those, but it is a good choice for people who do. And you said those kinds of effects like reduced anxiety and expansion of the senses that happens more when you've ingested it, like as an edible or smoked it because it's affecting you systemically, as opposed to the THC primers that are staying just in the specific area.

And I think that's so important for people to know, because I know a lot, what a lot of people don't necessarily want is to feel high, but maybe they want the benefit of, you know, increased blood flow and reduction in inflammation in one part of the body. And so my understanding is that's really what it's doing since it's not being absorbed systemically. You don't feel high necessarily.

Yes, that's absolutely true. So I should always put an asterisk on this because it is, if you're using a cannabis lube, a cannabis topical for sex, um, intravaginally, you are absorbing cannabinoids into your bloodstream. The thing is the vagina is not really designed to absorb stuff and put it into the bloodstream that much.

So it's very minimal. And for most people, you're not going to feel a thing. It's so minimal.

You're, you're not ever going to experience any kind of effect. Um, it is very, very, very rare that anyone would notice anything, but not impossible. There are people who've had a little, and even if you did, it would be like the lightest.

Yeah. Right. Yeah.

Yeah. So it is, it is in your bloodstream just very, very low, um, unless you ingest it in, in a, by a non-topical route. Interesting.

Now I imagine a lot of people listening would hear what you're describing in terms of feeling more relaxed, a little more in uninhibited feeling, more connected or reduction anxiety and think like, well, I could have a glass of wine or a cocktail or two, which that's what I hear a lot from my clients who do have sexual inhibitions or anxieties that they'll rely on alcohol to help them relax a little bit. And I'm always, you know, the mind that for most people, yeah, maybe a glass could help a little bit, but we know that alcohol compared to cannabis, for example, can really have a negative effect on sexual arousal. Am I correct in saying that of all the different substances in terms of like recreational drugs, which alcohol is one that cannabis is really the only one that doesn't have a specific negative effect on sexual functioning? Uh, well, I would say that it's a, it's broad to say that because there are some concerns.

Um, you know, I think that the experts are still somewhat split, but there is definitely strong evidence that regular cannabis use reduces sperm count and motility and, um, sperm mobility motility. Um, so that, that does exist. Um, the effect is kind of, you know, not super well established does seem to be consistent, but it's, it's not something that most people really have to worry about, you know, unless you're using massive quantities of cannabis and really trying to get pregnant.

Um, so, so yeah, I would say that, um, you know, like MDMA is known to, to be a very, um, you know, heart unlocking and sexual connectivity substance, but it's very, very difficult to orgasm using that, you know, we all know the thing with cocaine, we all know the things with alcohol. Um, so of the recreational drugs out there. And I, I also will talk a little bit later about the, the split between recreational and medicinal, which I take issue with having that autonomy at all, but the, uh, of the ones that are out there, I think, you know, cannabis is probably the best choice.



Yeah. Yeah. That's my understanding.

And, you know, as I was preparing for this episode, I was trying to get, you know, online and read some research articles to understand what the findings have been around cannabis and sexuality. And it does seem like to date, the findings are a little bit mixed that it seems generally when there's, you know, like a comprehensive literature review that people find that for a pretty good percentage of people, they notice some positive effect, but then of course there are other people who say that, you know, it has a negative effect. And so I think it sounds like it's something we probably need a little bit more time to completely understand.

And I think too, just given all the different mechanisms of consumption and different reasons why people might be using it, that that probably, um, would direct the research findings a little bit as well. Yeah. The research that is out there is really, it's really hindered by the dual stigmatization of cannabis research and sex research, which of the two sex research is the more is the bigger roadblock, frankly, it's what is out there is largely limited to studies and interviews, like self-reported data.

There's not. And I was trying to work with Dr. Jordan Tischler for a while and I set it down, but I really should try to pick it back up again to try to get the study done. That is, has a direct is like, you know, has a control actually, you know, can measure, um, the response of topical cannabis on sexual response, because what they do is they ask a bunch of people, they ask a bunch of volunteers, do you use cannabis and how much sex do you have? And how do you feel about that sex that you had? So there are so many founding factors that it's really, even the better done ones are really methodologically, um, not great.

Yeah. And I should clarify two of the studies I did find, it was all interviewing people who used cannabis recreationally, as opposed to medicinally. And it sounds like you take a little bit of an issue with that.

So can you explain why, because that's the language I would have chosen, but it sounds like I need to think about that. I mean, it's okay. I'll just, I'll, I'll, I'll say how I feel and why I take issue with it.

And it's, it's a politically important distinction, but I'm also coming at this from a perspective of, um, watching in Washington state, as the specific designation of medical cannabis became subsumed in the recreational legalization, the needs of medical, um, patients just were obliterated. They, the, the market, you know, there are a small portion of the market relative to the recreational and it's, it's, it got, you know, patient needs just fell by the wayside. And it was, it was really tragic and continues to be tragic.

Um, however, um, my, my issue with the distinction is, um, that we in Western medicine tend to think of medicine as treating disease States. And I would like to shift that lens,

especially when it comes to cannabis. And I think the popularity of cannabis and legalization of cannabis is a good call, a good opportunity to have this conversation, uh, shifting that lens to think of medicine rather, rather as maintenance of health, thinking in terms more of pleasure itself as being helpful.

And we come from such a Puritan background that people are very, very hesitant to think of that. They dismiss pleasure. And this is where our sex negativity in our culture that's our culture comes to harm us physically.

Like pleasure is itself a health sustaining practice that includes recreational use of substances where the, you know, the pro-con ratio is favorable that includes sex that is fulfilling and joyful. These practices are not something that you go to a doctor to treat. There's something that you should be encouraged to be cultivating.

Yeah. I am with you a hundred percent. I can't tell you like how many self-proclaimed health nuts have come through my office who completely ignore their sexual health and wellbeing, or don't really understand why they should cultivate more pleasure sexually.

And I'm like, look at what the, I mean, there's research out there that talks about how important sexual satisfaction is to not just relationship satisfaction, obviously, but to like feeling once life is meaningful and to feelings of happiness overall, it improves mental health, physical health. Like there is so much behind sexual pleasure and satisfaction that is important for our overall health and wellbeing. And so I I'm with you on that one.

Yeah, absolutely. It needs to be expanded to, even to thinking about non-sexual pleasure in general, we need to like be talking about pleasure as one of the fundamental health sustaining practices that gives us a, you know, a reason. Yeah.

Anyway, I, I, so I think also like there's also such a fuzzy line too, because at what point does, you know, if you talk to a recreational cannabis, you know, outlet, anything, whether it's a dispensary or anything that they're going to say relaxation. And if you through a medical lens, they're going to say treats anxiety. Where is the line between relaxation and treating anxiety? You know, is that line clear? Does it rely on a diagnosis? Does it need a diagnosis? Does it matter actually, you know, it's yeah.

So that, that kind of stuff, just anyway, I will, I will get down from my soapbox. No, I mean, you're welcome to stay on. I think we were starting to see a shift, I think a little bit in how we think about health and wellness.

And there's a lot more of a focus these days, I think on preventative medicine. And, you know, there is a little bit more of a focus on the importance of mental health and all of that, but I know that we still have a long ways to go. So the more people on soapboxes, the better.

So we talked about cannabis used to treat different kinds of sexual pain, pelvic floor

tightening, pain that may be caused by endometriosis, how it can help with female sexual arousal because of the vasodilation effects. And what about like helping people who might have low desire or helping men who have arousal difficulties? Well, I'll, I'll, I'll in reverse, I'll answer those in reverse, in reverse order, people with penises who do have you know, whether it's ED or just difficult, you know, mental difficulty, I just want to say everything that applies to the, you know, vulvovaginal response is also, it also applies to penises. Like it's, it's the same tissue just arranged differently, and it's still doing the vasodilation.

Now, we're not talking herbal Viagra here, you know, that's not what's going to happen, but it is a little nudge in the right direction. Sure. The thing that I always do like to mention is if you are a penis owner using this, you want to just be aware that your effective window is smaller than somebody with a vagina.

So you just need, it is easier to overdo it and actually end up decreasing sensation, you can actually have numbness and in our, in our development process, we found that for women, the effective zone was pretty generous, you know, you had a wide range. But for men, you really, you got to make sure you don't use too much, you need to use enough to be effective, but not too much is a much smaller zone. And then you can actually get numbness and a loss of sensation, which if that happens, that's fine.

Just, you know, take a break. Yeah, not forever. Right, Use less next time.

So, so that is still possible. And that's kind of the physiological response that might be expected. And then the arousal part is really more of a mental response, physiology informs like your, your physical, if your physical body is starting to act aroused, that can get you in the mood, you know, definitely cycle.

But if what you're seeking to do is generate arousal, then cannabis is only ever going to be a doorway for you to walk through to your own arousal. It won't put horniness there. I teach these workshops, and there's always a guy, it's always a guy in the back and he says, what are the strains that are going to make my wife horny? Yep.

Sir, there's like six different things wrong with that question. So, so it, it won't, it, it won't make you horny, but it can remove barriers to your own horniness. Yeah.

I think that's a very eloquent way of putting it actually. And so true. So, okay.

So what about, um, I lost my train of thought for a second. Let me just take a look here at my sheet. Okay.

My cat is going to take this opportunity to meow at me. Okay. So I'm just going to come back to your talking voice.

So Chelsea, you speak nationally on the intersection of cannabis with sex kink and

consent culture. Can you talk a little bit about how cannabis use affects consent? Yes. And thank you so much for asking that question, because this is something that I am always pushing and I don't see discussing people discussing a lot in the wake of me too.

We had a uncomfortable, fraught conversation about what meaningful consent means in the context of intoxication from alcohol. But we did not have that conversation as regards cannabis. And I'm trying very hard to at least have us acknowledge that if you're using systemic cannabis, heck, even if you're not using systemic, even if you're using a topical, you still have to get the person's informed consent about that topical use.

And if you're using something systemic, we do have to acknowledge that intoxication affects your ability to consent. Now, I'm not saying that if you smoke a joint, you can't consent. That's, you know, it's silly, but we need to at least have this conversation.

So for example, I'm going to go back to your experience in college. That is so common among people. Everybody did that.

After two brownies, you're nonverbal, you're somewhere else, you're on a different plane. You're not able to consent. You know, there's a situation, you know, if you had done that intending to have sex with somebody, you know, it's entirely possible that you can lose the ability to verbally communicate, especially with edibles.

And no one is discussing this and we need to be talking about this. So edibles are really the biggest danger. The rest of the consumption methods, you have enough space to moderate where if you're getting a little bit too high, you can probably back it off.

But most people don't just use cannabis, especially in a recreational context. There's a lot of overlap with alcohol and these things do stack. So the thing that I try to drive home vis-a-vis any kind of intoxicated sex, whether it's cannabis or otherwise, is that you really need to make sure that whatever you're doing, you're doing it on purpose.

Everything has to be intentional. Intentionality is the antidote to risk. It's not a perfect antidote, but even if you get into a situation where something happens that went a little further than you preferred or something didn't really go the way it went, if you've had your intention set and said yes, every step along the way, it's way less traumatic to know, okay, well, I went ahead with that and I probably shouldn't have, and I can talk to my partner about it.

We can heal from that. Then to have not opted in, to just be high and have stuff happen to you. And then that can feel really gross and really violating.

And you can even end up in a situation where you have a consent violation occurred that nobody really knew was happening at the time. And that's the worst case scenario, right? Because then there's not a villain, there's not an abuser, there's not a big fat, there's like, oh my gosh, we were both too high and we made this mistake. And it's much

more difficult to navigate.

So I do think just taking that moment and doing whatever best practices for consent, like if it's your long-term partner, probably don't get super high and go home with somebody who's a stranger. Yeah, not a good idea. If it's your long-term partner, then you can sit down and you can say, hey, we're going to have an altered sex date.

Let's talk about what we want that to be like. Let's talk about what green light, yellow light, red light activities we have. And if you do that work, the window for consent violations definitely gets much smaller.

Yeah. Thank you for sharing that really important information because you're right. I don't think people are talking about that enough.

You're right. We hear more about consent as it relates to alcohol or just any other, you know, kind of, you know, sexual activity, hooking up that sort of thing, but you don't hear it talked about that much with cannabis use. Yeah.

Yeah. It's just some, it's just something, it's more gentle. Cannabis is more gentle than alcohol.

It's not, it's not as risky, but that doesn't mean that it is risk-free. Right. Right.

Well, since you say that, can you talk a little bit about some of the other risks or side effects? Like, is there anyone who shouldn't be using cannabis products? Yes, there definitely are. You know, part of my, my responsibility ethically as a cannabis proponent is that we do have to speak frankly and openly about the risks, small though they are, of cannabis use and specifically of cannabis use for sex. We've gone over consent, which is probably the biggest one, but there are also drug interactions.

For example, high CBD products should not be used with ED drugs. Like, oh my God, Viagra. Viagra.

Right. I was like, I was thinking of Sildenafil, but it's the same. I'm thinking of the brand name.

So, so yeah, so it should not be used with that. There are several other drug interactions, especially with CBD. People think of CBD as gentler than THC because it is non-intoxicating, but that's actually not true.

It has the ability to, there are certain liver enzymes that are kind of, they're the same ones that are involved with grapefruit. Okay. Okay.

So if you're taking large doses of CBD, then you should treat that as though you're drinking grapefruit juice. Interesting. And smaller doses of CBD don't really do anything.

So if you are taking CBD, make sure you're taking enough of it and also be aware of the different drug interactions. There's only like eight of them and they're in my book. It's, it's all, you know, pretty, pretty similar to what you would have for grapefruit juice basically.

And blood thinners also are on there, but that's for CBD. THC doesn't have a whole lot of interaction risks, but you can, you know, there are real risks. There is a link between THC and psychosis.

This whole reefer madness thing was racist and hugely exaggerated, terrible, but there is a kernel of connection there because we do have strong data that THC increases the risk of psychosis in people who are schizophrenic or bipolar. And so if you have either of those diagnoses, you really do need to consider cannabis use with extreme caution. Okay.

The other thing that you have to consider is with topicals, cannabis topicals for sex lubes. They are not compatible with any safer sex barriers. Okay.

That's really important to know. No condoms, no dams, latex, polyisoprene, nitrile, any of those do not use any oil-based cannabis lube, which is basically all of them. We made ours water-based with the very specific intention of having a barrier safe option, a barrier.

So yours, yours is barrier safe. It is. Yes.

But the company has since we sold the company. And so it is not as available as it was. So it's hard to find ours in Washington.

I'm sorry to say, but it is still available in Washington. You can still get it here and it's it's compatible. We did testing to ensure compatibility with latex, polyisoprene and nitrile.

But anything that is oil-based, even polyurethane, I meant to say polyurethane, Trojan suppress also, um, they, we used to say they were compatible, but Trojan said, please stop saying that. Okay. So we now have to say they are not officially compatible with oil-based lubes, which is really what you're going to find.

Whenever you're looking for cannabis lubes, it's largely almost exclusively oil-based. Interesting. Well, that's really important information.

So thank you for clarifying all that. What about motivation? I mean, when I think of someone who is smoking weed all day or regularly, I think of just someone kind of stone sitting on the couch. I mean, is there, are there any risks of losing motivation from any of these topicals or even from like smaller daily doses of like edibles or something like that? I mean, everything is dose dependent, but that that's largely a stereotype.

I mean, we have, you know, Michael Phelps and Chicago Davidson and like, uh, and you know, basically high profile, highly effective people. They all smoke weed. We just don't associate them, you know, with the stoner stereotype.

Totally. It's, it's not something it's more like kind of like with all drugs, um, recreational drugs, the, the problem is not the substance. The problem is the context in which it is used.

So if somebody is dealing with depression, they're more likely to smoke more weed. Right. And that's, you know, and then people are going to see like, Oh, he just sits in his basement smoking pot all day.

You know, the problem is actually the depression. Yeah. Correlation, not causation.

Yeah. Chelsea. So tell people where they can find your book and learn more about you and stay up to date.

Well, I am on Twitter and on my website. Um, I, my Twitter is very much just my personal opinions on things that I do post some cannabis content there as well. Um, I know my website, which is just ChelseaCebara.com that's C E B A R A. Um, and Chelsea, C H E L S E A. So ChelseaCebara.com find a link there, uh, to my book, which is called the new cannabis consumer guide.

And also I offer personalized cannabis consultations. So if you are basically you can hire me as a bud tender for you. If you would like to have a consultation, I'll spend an hour with you and tell you, you can talk to me about your concerns.

I'll tell you a little bit about what you might want to look for when you go into a store and we can even pull up your local dispensary menu. And I can give you a few things to check out, to start. Um, I also offer business development services and you can contact me at my website, a contact form for any of that.

Um, and that I think is all the ways to find me. Awesome. Well, we will be sure to link everything in the show notes for anyone who might've missed any of that.

So, um, Chelsea, this was so informative and it was a fun conversation to have. So I just want to thank you again for joining me on the podcast. Oh, thank you so much.

It's been great to be here. All right. Until next time, Chelsea, I want to actually ask you one more question that I may just edit back in later.

Cause I want to better understand CBD versus THC. Cause we'd like reference that a lot, but I think we maybe need to clarify that. Is it okay if I ask you that and we put it back in? Yeah, totally.

So we've talked a lot about CBD versus THC. Can you break that down for people a little

bit? I, I live in Texas, by the way, for anyone who's listening. And my feeling is we probably won't have any dispensers here for a long time, but I know, but CBD shops are popping up everywhere.

And it's something a lot of clients are asking me about. So can you break that down for people who might not know the difference? Absolutely. This is very important distinction.

Um, we in the cannabis industry have been both excited to see people embrace CBD, which is a cannabinoid and it's kind of oddly a gateway cannabinoid. If you allow that, that joke, um, that has shown people that cannabis is as a plant is not scary, right? Um, CBD has become popular following the 2018 farm bill, which allowed the interstate transportation of hemp, which is any cannabis plant with less than 0.3% THC. So this was a big change and it allowed CBD to proliferate.

We've seen CBD everywhere. There are CBD hamburgers. There's, you know, and this, unfortunately, um, put it in kind of a snake oil category for a lot of people because most of what's out there is not using CBD in a way that maximizes its effectiveness.

Um, CBD and THC are fundamentally different cannabinoids. They do share some of the same effects. They're both anti-inflammatory, um, but they do different things and people have been transposed, um, to the detriment of their, you know, their health.

Basically, if you buy something with CBD, expecting it to do what THC does, you will be disappointed. CBD is, um, also it's kind of unfortunate that it proliferated so much as a cannabinoid by itself because, um, it is one of the ones that really needs to be delivered in context. Uh, other cannabinoids, other plant chemicals need to go along with CBD in order to maximize its effectiveness.

If you don't have that, then you need to increase your dosage dramatically to overcome the, the way that it is, you know, a little bit weaker action. So CBD is non-intoxicating. That's its biggest thing.

Um, it is anti-inflammatory. It is powerfully anti-spasmodic, which is why we've seen that, that, um, the FDA even approved a seizure medicine, uh, that is just CBD. Oh, I didn't know that.

Yeah, it does. I think it has a very small amount of THC in it actually, but it's, it's, yeah. So it is the only thing that's been FDA approved.

Um, uh, and it, it does do great things, but especially in the context of sexuality, THC is really your, where you're going to maximize, where you're going to get your power from. Um, CBD is good for the relaxation of tension. It's good for decreasing inflammation.

That's great. Um, it is, it's not good for sleep. Some people find it helps them sleep, but it's basically because it gets you out of your head so that you can sleep.



Um, it is, uh, it's not as good for pain. Um, it is, uh, you know, as I said, most of the time, the thing that you buy, that's all, that's like five, 10 milligrams of CBD. That's just not going to be enough to do anything for you.

You need the higher dosage. THC on the other hand, is going to be responsible for all of those things that we classically associate with, um, improved sexual response, uh, thanks to Canada. So it's, that's where you get your blood flow.

That's where you get your pain reduction. It's where you get, uh, again, that anti-inflammatory effect. It's also, you know, all of those, um, psychoactive effects, um, which CBD is also psychoactive.

So I say intoxicating instead of psychoactive, but it's not intoxicating the way you think about. So these really are, um, I do want to drive home. These really are different and that we should have different expectations.

Should you try a CBD lube? Sure. Great. Just go into it with the right mindset, have your expectations much lower than you would have for a THC lube and really check your sourcing.

Um, you can, you can, uh, you know, uh, get my book and look at it, or you can, you can look up basically how was this extraction done? How did they get the CBD out of the plant? Basically what they add back in all of these things are considerations, um, that, uh, especially, I'm sorry to say with, when it comes to products for sex, there's a lot of really poor, poorly formulated stuff out there, like glycerin, like don't buy don't buy any waxy consistency, you know? Yep. Yeah. Yeah, totally.

Okay. Well, thank you for making that clarification. Cause it's something I've always been a little confused about.

So I know other people probably are too. Yeah. Yeah.

A lot of people walked away from it going like, cannabis doesn't work. Like, you know, 10 milligrams of CBD and it didn't do anything. Right.

Right. Okay. Well, um, let me go ahead and end recording and then we can chat a little bit.