

The Inversion

Artist's Proof 34

Drug Policy

Cannabis kills zero. Alcohol kills 2.6 million. Correct the inversion

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Artist's Note

What this paper is, and why.

This is the one paper in the 420 Code that imports external data. Every other Artist's Proof derives from {S, B, R, C}; this one applies the architecture to a domain where the records are public and measured – mortality, violence, economics, biology – and lets those records do the work. The reason is that the question is empirical: which substances actually destabilise, and how does the legal classification compare?

The 420 Code takes its name from cannabis culture. This is not hidden; it is declared. The honest objection is that an author named for cannabis cannot be neutral about it. The kill switches are the answer: every claim here is falsifiable, and if the records showed cannabis destabilising at scale, the architecture would say so. The name is a commitment to honesty about where the author stands; the architecture is a commitment to falsifiability about what is true.

The argument has two parts. First, the classification of substances into legal and illegal is inverted with respect to their measured structural consequence: alcohol – 2.6 million deaths a year, no endogenous receptor system – is legal, while cannabis and psilocybin, which couple through receptor systems the body already carries and record effectively zero toxicity deaths, are criminalised. Second, the category "drug" is itself a structural error: a herb that couples through an existing channel is not the same kind of thing as a synthesised or concentrated compound that drives that coupling past the rate and concentration the substrate can regulate.

The correction follows from AP32's hierarchy: reclassify cannabis as a herb and psilocybin as a wild mushroom (Level 1); restrict alcohol rather than prohibit it, since prohibition itself is a destabilising correction (Level 2); restrict the genuine drugs – cocaine, methamphetamine, fentanyl – by their measured harm (Level 2–3). Legalising a substance that kills millions while criminalising a herb that kills none is the inversion. Correct it.

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Orientation

Where this paper fits in the body of work

AP34 is the fourth chapter of Notebook VIII – Consequences, and the worked empirical test of the architecture in a single charged domain. It depends on AP31 for the stabilising/destabilising binary, AP32 for the correction hierarchy that fixes the policy response, and AP33 for the biological coupling channels (the endocannabinoid and serotonin systems) and the ε jurisdiction boundary that governs adult sovereignty and adolescent protection.

How to read this paper

Two voices alternate. The connective passages speak to you directly – the drinker whose possibility space you have watched contract, the cannabis user you have watched face prosecution; the record sets speak in measured numbers with their sources named. Because this is the empirical paper, the kill switches are mostly empirical: they point at the data, and they will fire if the data turns. Read the numbers as the falsifiable record set they are, not as rhetoric.

0 – Dependency and Scope

0.1 What this paper does

AP34 applies the architecture to drug policy and is the only Artist's Proof that imports external data – public mortality, violence, economic, and biological records – rather than deriving its claims from {S, B, R, C} alone. It argues two things: that the legal classification of substances is inverted with respect to measured structural consequence, and that the category "drug" conflates herbs and wild mushrooms that couple through existing receptor systems with synthesised or concentrated compounds that drive coupling through those same receptor systems faster and harder than the substrate can regulate. The empirical import is declared openly, and every empirical claim carries a kill switch.

0.2 Dependencies

AP31 (The Alignment): the stabilising/destabilising binary applied to substances. AP32 (The Correction): the five-level correction hierarchy that fixes the policy response (cannabis and psilocybin Level 1, alcohol Level 2, the synthesised drugs Level 2–3). AP33 (The Boundary): the endocannabinoid (CB1/CB2) and serotonin (5-HT2A) systems as biological coupling channels, the ε jurisdiction boundary, and the adolescent-protection logic.

0.3 Axiom mapping

Axiom R is the measured record set itself – the accumulated, irreversible record of what each substance does. Axiom C bounds the substrate: a herb couples through an existing channel, while a drug forces coupling at concentrations the substrate cannot sustain. The break ε (via AP33) sets the jurisdiction boundary – below it, adult sovereignty over one's own body; above it, organism jurisdiction (adolescent protection, externalised harm). The stabilising/destabilising binary (AP31) classifies each substance by its consequence, not its legal status.

0.4 Epistemic status per section

Epistemic status per section. section 1 (statement): derived + empirical. section 2 (classification): derived. sections 3–6 (record sets): empirical – external data, referenced.

section 7 (comparison): synthesis. section 8 (why the inversion exists): historical. section 9 (adolescent protection): derived + empirical. section 10 (measured cost): empirical. section 11 (correction): application. section 12: synthesis.

0.5 Kill switch summary

Seven kill switches engage on this paper, all live and mostly empirical. KS-34.1 (alcohol data), KS-34.2 (cannabis data), KS-34.3 (psilocybin data), KS-34.4 (endogenous system), and KS-34.6 (legalisation destabilisation) point directly at the measured record sets and will fire if the data turns. KS-34.5 (drug classification) is the structural switch on the herb/mushroom/drug distinction. KS-34.7 (inversion justification) tests whether any legitimate stabilisation argument for the current classification exists. Statuses follow the Master Kill Switch Registry.

0.6 Structural debts owed

The paper carries two debts, both empirical-monitoring rather than structural-derivation. Psilocybin long-term efficacy: monitor ongoing Phase II/III clinical trials beyond the Johns Hopkins data; if larger trials fail to replicate the response and remission rates, confidence drops (Debt 35). Cannabis long-term legalisation outcomes: monitor the growing multi-year data from legal jurisdictions on adolescent use, psychosis incidence, traffic fatalities, and overall public health (Debt 36).

0.7 Items held open without claiming debt status

The confidence gap between alcohol (10/10) and cannabis or psilocybin (8/10) is temporal, not structural: alcohol has centuries of record, while legal-jurisdiction cannabis data spans at most twelve years and psilocybin therapeutic data rests on small early trials. The relevant kill switches (KS-34.2, KS-34.3, KS-34.6) are live precisely because those record sets are still growing.

0.8 Structural relationships

AP34 is the empirical demonstration of AP31's measurement and AP32's correction in one domain, fenced explicitly as the 420 Code's single data-importing paper. It draws AP33's coupling channels and ε boundary, and it is where the body of work's own name is held to its

own falsifiability standard – the architecture is shown to be able to convict the very substance its name honours, if the records demanded it.

1 – Statement

You know someone who drinks. You know what it does to them.

You have watched it happen – the slow contraction of their possibility space, the coupling pathways that close one by one, the version of themselves that gets smaller with every glass.

You have watched this, and you have watched it be legal.

You may also know someone who uses cannabis. You have watched them face prosecution, job loss, or imprisonment for something that has never killed anyone.

You have watched this, and you have been told it is justice.

This paper makes one structural argument with two parts. First: the classification of substances into “legal” and “illegal” bears no relationship to their measured stabilising or destabilising effects.

The legal status is inverted with respect to the structural consequence. Second: the category “drug” is applied indiscriminately to substances with fundamentally different structural profiles – a classification error so severe it prevents coherent policy.

The strongest structural argument for alcohol’s current legal status: prohibition was attempted (US, 1920–1933) and produced catastrophic destabilisation – organised crime, black markets, poisoning from unregulated production, loss of tax revenue, criminalisation of a majority-participating population.

The axioms agree: the correction for alcohol is Level 2 (restriction), not Level 3 (prohibition). The failure of alcohol prohibition does not justify cannabis prohibition.

It demonstrates that prohibition itself is a destabilising correction when applied to a widely-used substance. The lesson applies to cannabis and psilocybin equally.

2 – The Classification Error

You have been told that cannabis is a drug. You have been told that psilocybin is a drug. You have been told that these are in the same category as cocaine, methamphetamine, and fentanyl.

This is a lie. The lie is structural, and it costs millions of lives.

A herb is a plant or plant-derived preparation used by humans for food, medicine, or ceremony, with an evolutionary history of co-use spanning thousands of years.

A wild mushroom is a fungal organism that grows without human cultivation, consumed by humans for food, medicine, or ceremony across millennia.

A drug is a synthesised or concentrated chemical compound that hijacks biological reward or signalling pathways not evolved to process it, producing dependence, toxicity, and structural damage.

Cannabis is an herb. It has been cultivated and consumed by humans for at least 5,000 years.

The human body contains an endocannabinoid system (ECS) – CB1 and CB2 receptors distributed throughout the brain, immune system, and peripheral organs – that evolved over 500 million years specifically to interact with cannabinoid compounds.

The body has a coupling channel for cannabis. Cannabis couples through an existing structural pathway.

It is a herb the way tea is a herb, the way turmeric is a herb, the way chamomile is a herb. Calling it a “drug” is a classification error.

Psilocybe cubensis is a wild mushroom. It grows on every inhabited continent without human intervention.

Psilocybin mushrooms have been used in spiritual and medicinal contexts for at least 7,000 years (archaeological evidence including Tassili n’Ajjer rock art, Mesoamerican codices and mushroom stones).

Psilocybin interacts with the serotonin system via 5-HT2A receptors – receptors the body evolved to use. The body has a coupling channel for psilocybin. It is a wild mushroom the way chanterelles are wild mushrooms.

Who are human beings to tell nature it did something wrong?

Cocaine is a drug. The coca leaf is a plant with mild stimulant properties. Cocaine is the extracted, concentrated active compound – processed to a potency the body's reward pathways were never designed to handle.

The concentration overwhelms the dopamine reuptake system, producing intense euphoria followed by crash, craving, and compulsive re-dosing. Cocaine couples through the body's own dopamine transporter, but at a concentration that saturates it – coupling driven past the rate the substrate can regulate.

Methamphetamine is a drug. Synthesised in a laboratory from pseudoephedrine. No plant origin in its final form. No evolutionary co-history with the human body.

It floods dopamine and norepinephrine at concentrations the neural substrate cannot sustain. The result is neurotoxicity, psychosis, organ damage, and death. Methamphetamine couples through the body's own monoamine transporters, but drives them far past their regulatory capacity.

It is coupling driven past every regulatory limit the substrate has.

Fentanyl is a drug. Synthetic opioid. 100 times the potency of morphine. No evolutionary relationship with the human body at the concentrations consumed.

The margin between effective dose and lethal dose is so narrow that microgram differences kill. Over 70,000 fentanyl-involved deaths per year in the US alone.

Herbs couple within the capacity of existing channels. Drugs drive coupling through those channels past the concentration and rate the substrate can regulate.

A note on concentration. The coca leaf is a herb; cocaine is its weaponised extract. The classification tracks the receptor-level coupling, not the preparation.

But concentration matters: ultra-concentrated THC extracts may overwhelm the same ECS channel that traditional preparations couple through gently. A herb pushed past its receptor system's absorption capacity begins to behave like a drug.

The classification is structural. Regulation should track both the receptor pathway and the concentration.

The classification error: lumping cannabis and psilocybin into the same category as cocaine, methamphetamine, and fentanyl. This is not a category. It is a lie.

A lie that protects the legal status of the most destructive substance of all – alcohol – by making everything else look equally dangerous.

3 – The Record Set: Alcohol

Now look at the numbers. Look at what the legal substance does.

2.6 million deaths per year (WHO, 2024). 4.7% of all deaths globally. 200+ diseases. Highest proportion of deaths in the 20–39 age group – the peak coupling-capacity years.

For ages 25–49, alcohol is the leading risk factor for disease and death worldwide (IHME, GBD 2019).

Violence. 50%+ of all homicides and assaults globally. Two-thirds of domestic violence incidents (UK). 55% of domestic abusers drinking at the time. 80% of child abuse cases involve parental alcohol.

37% of sexual assaults by intoxicated offenders. 40% of convicted murderers under the influence.

Economics. 2.6% of global GDP destroyed. $1,306 per adult per year in damage. Productivity loss: 61% of total cost. The harm exceeds the industry's revenue.

Biology. No endogenous alcohol system. No alcohol receptors. The body treats ethanol as a toxin. The liver metabolises it through the same pathways that process industrial poisons. Every dose is damage. The body tolerates it.

It does not welcome it.

This is the highest confidence empirical claim in the entire body of work. 10/10. No other measured quantity in any AP carries this rating. The data spans every jurisdiction on Earth across centuries.

4 – The Record Set: Cannabis

Mortality: zero confirmed direct deaths from cannabis toxicity in the scientific literature. The US National Academies of Sciences: cannabis has not been determined to be the direct cause of overdose death in any study the committee identified.

The LD50 (lethal dose) has never been reached in any documented case.

Violence: no association. THC and CBD reduce agitation. The pharmacological effect is incompatible with violent behaviour. In jurisdictions that legalise medical cannabis, alcohol consumption, opioid overdose deaths, and driving fatalities decrease.

Biology: the endocannabinoid system (ECS). CB1 receptors in the brain (mood, appetite, pain, memory). CB2 receptors in the immune system (inflammation, immune response). The body produces its own cannabinoids (anandamide, 2-AG).

The system evolved over 500 million years. Cannabis couples through an existing pathway. With ageing, the ECS degrades – endocannabinoid production decreases, regulatory functions deteriorate. Exogenous cannabinoid supplementation maintains these functions.

On the evidence of ECS degradation and documented therapeutic effects, cannabis is structural maintenance for the ageing body.

Areas of genuine uncertainty

Adolescent brain development. Cannabis use during adolescence is associated with measurable cognitive effects in some studies.

The adolescent brain is still forming – the prefrontal cortex does not fully mature until approximately age 25. Introducing exogenous cannabinoids during this critical development window may alter neural pruning and connectivity.

The evidence is contested but the signal exists. This is the basis for age restrictions.

Cannabis use disorder. Approximately 9% of users develop dependence (vs 15% for alcohol, 23% for heroin, 32% for tobacco). Lower than alcohol. Not zero.

Cannabis withdrawal is real but not life-threatening (unlike alcohol withdrawal, which can kill).

Psychosis association. High-THC cannabis use is associated with increased psychosis risk in genetically predisposed individuals. The evidence is debated but the signal exists. This is the basis for THC content regulation and screening.

None of these approach the scale of alcohol's destabilisation on any metric.

The structurally honest response: regulate for these risks (age restrictions, THC content standards, screening for predisposition) the same way alcohol is regulated for its risks.

Do not criminalise a substance whose worst documented effects are orders of magnitude below the legal alternative's baseline harm.

5 – The Record Set: Psilocybin Mushrooms

Mortality: 0–1 deaths per 100,000 consumers per year. Effectively zero. No confirmed death from direct psilocybin toxicity in the scientific literature. The LD50 in humans has never been approached.

Psilocybin is one of the safest psychoactive substances ever studied.

Biology: the serotonin system. Psilocybin's active metabolite (psilocin) binds to 5-HT2A receptors – serotonin receptors the body evolved to use. The coupling is through an existing structural pathway, not a forced override.

Archaeological evidence suggests psilocybin mushrooms have been used by indigenous peoples worldwide for at least 7,000 years. There are over 300 psilocybin-containing species.

Phylogenetic analysis estimates the psilocybin-producing fungi at approximately 65 million years old (Boyce et al., 2022).

Therapeutic effects. Johns Hopkins (2022): psilocybin treatment for major depression produced 75% response rate and 58% remission at 12 months. From two doses. Two.

Compare: SSRIs take 4–8 weeks to begin working, require daily dosing indefinitely (365+ doses per year, every year), produce significant side effects including sexual dysfunction, weight gain, and emotional blunting, and have withdrawal symptoms that can persist for months.

Two psilocybin sessions versus a lifetime of daily medication. The dosing asymmetry alone warrants reclassification. The FDA designated psilocybin a "breakthrough therapy" for treatment-resistant depression.

Harvard, Yale, Stanford, and Washington University are actively running clinical trials.

Addiction potential: effectively zero. Classic psychedelics like psilocybin do not produce abuse potential in the same fashion as alcohol, nicotine, cocaine, and opioids. Tolerance develops rapidly, preventing compulsive re-dosing. No physical dependence. No withdrawal.

This is a wild mushroom that grows on every inhabited continent. It interacts with a receptor system the body already has. It treats depression more effectively than any pharmaceutical currently available.

It has zero addiction potential and zero toxicity deaths. It is classified as Schedule I – the same category as heroin. The classification is not merely wrong. It is structurally insane.

6 – The Record Set: Actual Drugs

This is what drugs look like. Not herbs. Not wild mushrooms. Synthesised chemicals that drive coupling through the body's channels faster and harder than it can regulate.

Cocaine. 29,449 overdose deaths in the US alone in 2023 (CDC). The death rate nearly quintupled from 2011 to 2023. Cocaine floods the dopamine system at concentrations the reward circuitry cannot process.

The result: cardiovascular damage, stroke, psychosis, nasal septum destruction, and compulsive re-dosing that destroys careers, families, and communities. 78% of cocaine overdose deaths in 2021 also involved opioids – the substances compound each other's destruction.

Methamphetamine. 34,855 overdose deaths in the US in 2023 (CDC). The death rate increased 34-fold from 2002 to 2023. Methamphetamine produces neurotoxicity that physically destroys dopaminergic neurons.

Chronic users develop psychosis, violent behaviour, tooth loss, skin lesions, organ failure. The damage is often irreversible. Driven far past any rate the substrate evolved to regulate. The pathway exists; the concentration does not belong to it. Coupling forced to saturation.

Fentanyl. 72,776 overdose deaths in the US in 2023 (CDC). Synthetic. 100× morphine potency. The difference between a therapeutic dose and a lethal dose is measured in micrograms.

It is the primary driver of the US overdose crisis that killed over 105,000 people in 2023. One hundred and five thousand. In one country. In one year.

Globally: over 585,000 drug overdose deaths per year (WHO). These are drugs. Synthesised or concentrated chemicals that the body has no structural capacity to process safely. They hijack reward systems. They produce dependence. They kill.

Cannabis kills zero. Psilocybin kills zero. Cocaine kills 29,449 in one country in one year. Methamphetamine kills 34,855. Fentanyl kills 72,776. These are not in the same category.

Putting them in the same category is not policy. It is structural negligence.

7 – The Comparison

You have now seen the numbers side by side. The two substances with zero deaths, existing biological coupling channels, and proven therapeutic value are criminalised. The substance with 2.6 million deaths per year is legal.

The classification does not track structural consequence. It tracks economic power, cultural entrenchment, and racial politics.

That is the inversion. The legal status is upside down with respect to the measured harm. And you have always known this. Everyone who has ever compared a hangover to a joint has known this.

The data does not reveal a new fact. It confirms what the lived record already showed.

8 – Why the Inversion Exists

Economic capture. The global alcohol industry: $1.6 trillion annual revenue. The lobbying power this buys protects legal status regardless of destabilisation produced.

In the architecture's terms: a node whose political coupling is so strong it overrides the organism's destabilisation signal.

Cultural entrenchment. Alcohol embedded in religious ceremony, social bonding, business, hospitality for millennia. The coupling pathways are so extensive that removing alcohol is perceived as destabilising even though the evidence shows the opposite.

Racial and political weaponisation of prohibition. Cannabis criminalisation in the 20th century was explicitly motivated by anti-Mexican and anti-Black racism (US Marihuana Tax Act 1937).

Nixon's War on Drugs explicitly targeted Black communities and anti-war activists – his domestic policy advisor John Ehrlichman confirmed this on record. Psilocybin was criminalised in 1970 as part of the same political programme.

The criminalisation was not a consequence measurement. It was a weapon. KS-32.7 (dehumanisation) fires retroactively.

9 – Adolescent Protection

Children and adolescents should not use cannabis or psilocybin.

This is not a concession to prohibition. It is a structural requirement from AP33 (The Boundary). The adolescent brain is in Pre-Agency transition to Active Agency.

The prefrontal cortex – responsible for executive function, impulse control, and long-term planning – does not fully mature until approximately age 25. During this critical development window, exogenous cannabinoids may alter neural pruning, connectivity, and cognitive development.

The specific mechanism: prefrontal cortex myelination – the insulation of neural pathways that enables adult executive function – continues until approximately age 25. Exogenous modulation of the ECS or serotonin system during this window may alter the trajectory of myelination itself, not merely the signals passing through the pathways.

The signal is contested but sufficient to trigger the precautionary principle.

The derivation's position: cannabis and psilocybin should carry age restrictions at least as strict as alcohol (21+ in most jurisdictions), with the structural justification that a developing node's coupling architecture must be allowed to form before it is modulated.

This is the same logic as AP33's consent architecture: you cannot consent to modifying a system you do not yet have the modelling capacity to understand.

Adults make their own choices about their own bodies. Below ε, the individual is sovereign. Children are not yet sovereign – they are nodes in formation. The organism protects forming nodes.

10 – The Measured Cost of the Inversion

The inversion's measured cost is 2.6 million alcohol deaths per year sustained over decades of legal protection.

Meanwhile, people are imprisoned, lives destroyed, families broken, and communities devastated for possession of an herb that kills no one and treats many, and a wild mushroom that may be the most effective antidepressant ever discovered.

The economic cost: 2.6% of global GDP consumed by alcohol harm. Net zero consumed by cannabis or psilocybin harm. (The 2.6% GDP figure is gross cost.

Net cost after subtracting alcohol industry revenue and employment contribution remains above 2% of GDP. The correction is to make the industry internalise its destabilisation, not to destroy the industry.)

The policy cost: billions spent on prohibition enforcement and incarceration. The human cost: millions incarcerated globally for cannabis and psilocybin offences, disproportionately from racial minorities, in a system designed from inception to target those minorities.

11 – The Correction

Cannabis: reclassify as herb. Full legalisation. Regulate as an agricultural and therapeutic product. Age restrictions (21+ with developmental justification). THC content standards. Expunge all cannabis-related criminal records.

Reparations to communities whose coupling capacity was measurably reduced by prohibition – computed from the accumulated record set: incarceration rates, economic disruption, family separation, health outcomes (AP33's coupling capacity projection).

The correction is Level 1: the destabilising agent (prohibition) directly restores the coupling capacity it reduced.

Psilocybin mushrooms: reclassify as wild mushroom with therapeutic applications. Remove from Schedule I. Legalise supervised therapeutic use immediately. Legalise personal cultivation and use for adults. Continue clinical research programme.

Cocaine, methamphetamine, fentanyl: these are drugs. The correction is Level 2–3 (restriction to separation). Treat as public health crisis, not criminal justice problem. Harm reduction, treatment infrastructure, interdiction of supply.

But do not confuse the policy response with the classification: these substances drive coupling through the body's channels past the concentration and rate it can regulate. They are structurally different from herbs and mushrooms.

Alcohol: Level 2 (restriction). Not prohibition (Level 3 failed). Taxation commensurate with measured destabilisation cost. Structural consequence labelling (not "drink responsibly" – specific data). Advertising restrictions proportional to harm.

The correction is graduated: the rate is computed from the organism's absorption capacity, how fast cultural and economic coupling pathways can adjust without producing secondary destabilisation.

The correction must not be more destabilising than the condition it corrects.

12 – Connections

AP31. The stabilising/destabilising binary applied to substances.

AP32. The correction hierarchy. Alcohol = Level 2. Cannabis/psilocybin = Level 1. Cocaine/meth/fentanyl = Level 2–3.

AP33. The ECS and 5-HT2A system as biological coupling channels. The jurisdiction boundary (ε). Adolescent protection as Pre-Agency node protection.

The terminal ethic. Legalising a substance that kills 2.6 million per year while criminalising an herb and a mushroom that kill none is not kind. The terminal ethic demands the inversion be corrected.

Kill Switches

Kill switch numbers are globally unique across the 420 Code. Seven switches engage on this paper; all are live, and most are empirical – the record set does the work. Statuses follow the Master Kill Switch Registry.

KS-34.1 — Alcohol data

Claim. Alcohol is a catastrophic destabiliser: it causes on the order of 2.6 million deaths a year, contributes to violence and economic loss at scale, and is treated by the body as a toxin (no endogenous alcohol system).

Test. Show that alcohol does not cause deaths at that scale or contribute to violence and economic loss as the record set reports.

Status. LIVE — EMPIRICAL.

Recovery. The alcohol record set is wrong; the comparison and the inversion claim must be recomputed against the corrected data.

KS-34.2 — Cannabis data

Claim. Cannabis records effectively zero direct toxicity deaths, no association with violence, and couples through the endocannabinoid system; its worst documented effects are orders of magnitude below alcohol's.

Test. Show that cannabis has significant direct mortality or increases violence at population scale.

Status. LIVE — EMPIRICAL.

Recovery. The cannabis record set is wrong; the classification of cannabis as a net-stabilising herb must be revised and the correction re-derived.

KS-34.3 — Psilocybin data

Claim. Psilocybin records effectively zero toxicity deaths and zero addiction potential, couples through the 5-HT2A serotonin system, and shows therapeutic effect in clinical trials.

Test. Show that psilocybin has significant mortality or produces population-scale harm.

Status. LIVE — EMPIRICAL.

Recovery. The psilocybin record set is wrong; its reclassification as a low-harm therapeutic substance must be revised.

KS-34.4 — Endogenous system

Claim. Cannabis and psilocybin compounds interact therapeutically with receptor systems the body already carries (endocannabinoid CB1/CB2; serotonergic 5-HT2A) – they couple through existing channels.

Test. Show that cannabis or psilocybin compounds do not interact with these endogenous receptor systems in the way claimed.

Status. LIVE — EMPIRICAL.

Recovery. The biological basis for the herb/mushroom classification weakens; the distinction must be rebuilt on a different physiological ground.

KS-34.5 — Drug classification

Claim. The herb/wild-mushroom/drug distinction is structural: herbs and wild mushrooms couple through existing receptor pathways, while drugs are synthesised or concentrated compounds that drive coupling through those same pathways past the concentration and rate the substrate can regulate.

Test. Show that the herb/mushroom/drug distinction can be shown to be arbitrary – that no structural difference separates coupling within a channel's regulatory capacity from driving that channel past saturation.

Status. LIVE — STRUCTURAL.

Recovery. The classification collapses to legal convention; the inversion argument loses its structural axis and reduces to a comparison of harm numbers alone.

KS-34.6 — Legalisation destabilisation

Claim. Jurisdictions that legalise cannabis do not show net destabilisation on the measured public-health metrics (adolescent use, psychosis incidence, traffic fatalities, overall outcomes).

Test. Show that jurisdictions that have legalised cannabis exhibit net destabilisation on those metrics as the record set grows.

Status. LIVE — EMPIRICAL.

Recovery. The Level-1 correction for cannabis is wrong; the policy response must escalate to restriction, and the record set is explicitly still growing.

KS-34.7 — Inversion justification

Claim. There is no legitimate stabilisation argument for the current classification – the legal status tracks economic power and cultural entrenchment, not measured structural consequence.

Test. Show a legitimate stabilisation argument for the current classification that tracks measured consequence rather than economic or cultural power.

Status. LIVE — EMPIRICAL.

Recovery. The inversion claim fails; the current classification has a structural justification the paper has missed, and the correction is withdrawn.

What This Establishes and What Remains Open

What this paper closes

No kill switch is closed by this paper; all seven remain live. What it establishes, against the public record, is the inversion: alcohol's measured destabilisation against cannabis's and psilocybin's near-zero toxicity, the structural difference between coupling through an existing channel and forcing one, and the graduated correction that follows from AP32's hierarchy.

What this paper does not close

It does not close the long-term psilocybin efficacy question (Debt 35) or the long-term cannabis legalisation outcomes (Debt 36). Both are empirical-monitoring debts: the record sets are growing, and the relevant kill switches stay live until they mature.

Items held open without claiming debt status

The confidence gap between alcohol and the herbs is temporal, not structural – alcohol has the longer record. Ultra-concentrated extracts (high-THC products) are flagged as a concentration question within the herb category: the structural classification follows the receptor pathway, but regulation should track concentration as well.

Confidence summary

Stated by the paper, on a ten-point scale: alcohol as a catastrophic destabiliser 10 (the highest-confidence empirical claim in the body of work); cannabis as a net stabiliser 8 (motor impairment, ~9% dependence, and a psychosis signal acknowledged); psilocybin as a therapeutic stabiliser 8 (early data, trials ongoing, no toxicity); cocaine, methamphetamine, and fentanyl as catastrophic destabilisers 9; the herb/mushroom-versus-drug classification 9 (endogenous receptor systems are structural facts); the inversion as a measurable policy failure 9; the racial weaponisation of prohibition 9 (on the record from its architects).

Where the philosophical-register implementations live

The terminal ethic this paper invokes – that legalising a substance that kills millions while criminalising a harmless herb is structural cruelty – is developed at the philosophical register in the Ø Models catalogue and grounded in AP43 and Notebook VII. AP34 supplies the formal-register, data-anchored application; it does not originate the ethic.

Structural relationships to subsequent work

AP34 is the empirical worked example of AP31's measurement and AP32's correction within AP33's jurisdiction boundary. It is fenced as the single data-importing paper and stands as the test case for whether the architecture can convict against the author's own declared standpoint.

The 420 Code placement

AP34 is the fourth chapter of Notebook VIII – Consequences: the inversion, measured.

The closing

Cannabis kills zero. Psilocybin kills zero. Alcohol kills 2.6 million a year and is legal. Putting a herb that couples through a channel the body already carries in the same category as a synthesised compound that drives that channel past saturation is not policy – it is structural negligence. The records will do the work. Correct the inversion.

Claim Summary

1 – Statement [FRAMING / EMPIRICAL]. The legal classification of substances is inverted with respect to measured structural consequence, and the category “drug” conflates herbs and wild mushrooms with synthesised compounds; alcohol’s correction is restriction, not prohibition (which failed).

2 – The Classification Error [DERIVATION]. Herbs and wild mushrooms couple through existing receptor pathways (endocannabinoid, serotonergic); drugs drive coupling through those same channels past the concentration the substrate can regulate – a structural distinction that concentration crosses (the coca leaf versus cocaine).

3 – The Record Set: Alcohol [EMPIRICAL]. Alcohol: ~2.6 million deaths a year, leading risk factor for ages 25–49, half of homicides, ~2.6% of global GDP destroyed, no endogenous receptor system – the highest-confidence empirical claim in the 420 Code.

4 – The Record Set: Cannabis [EMPIRICAL]. Cannabis: zero confirmed toxicity deaths, no violence association, couples through the endocannabinoid system; genuine uncertainties (adolescent development, ~9% dependence, psychosis signal) are acknowledged and far below alcohol’s scale.

5 – The Record Set: Psilocybin Mushrooms [EMPIRICAL]. Psilocybin: effectively zero toxicity deaths, zero addiction potential, couples through 5-HT2A, with strong early therapeutic results – yet Schedule I.

6 – The Record Set: Actual Drugs [EMPIRICAL]. Cocaine, methamphetamine, and fentanyl are synthesised or concentrated compounds driving tens of thousands of overdose deaths each; these are drugs – not herbs, not wild mushrooms.

7 – The Comparison [SYNTHESIS]. Side by side, the classification tracks economic power and cultural entrenchment, not measured harm: that is the inversion, and the lived record already showed it.

8 – Why the Inversion Exists [STRUCTURAL CRITIQUE]. Economic capture, cultural entrenchment, and the racial-political weaponisation of prohibition explain the inversion; the criminalisation was a weapon, not a consequence measurement – KS-32.7 fires on it.

9 – Adolescent Protection [DERIVATION]. Children and adolescents should not use cannabis or psilocybin – not a concession to prohibition but AP33’s consent architecture: a

forming prefrontal cortex cannot consent to modifying a system still being built; adults below ε are sovereign.

10 – The Measured Cost of the Inversion [EMPIRICAL]. The inversion's cost is millions of alcohol deaths a year sustained over decades of legality, plus the human and economic cost of prohibition enforcement against near-zero-harm substances.

11 – The Correction [DERIVATION]. Reclassify cannabis as a herb and psilocybin as a wild mushroom (Level 1, with reparations computed from measured harm); restrict alcohol (Level 2, not prohibition); restrict the genuine drugs by measured harm (Level 2–3); the correction must not be more destabilising than the condition.

12 – Connections [INTEGRATION]. Ties the analysis to AP31 (the binary), AP32 (the correction hierarchy), AP33 (the coupling channels and ε boundary), and the terminal ethic.

Conditionality Footer

Dependencies. AP31 (The Alignment), AP32 (The Correction), AP33 (The Boundary).

Dependents. AP36 (The Feed) draws this paper's endocannabinoid and serotonin coupling channels; AP37 (The First Boundary) draws its tool/crutch distinction for substances. Both cite this paper as a dependency.

Kill switches closed by this paper. None.

Kill switches that remain live. KS-34.1, KS-34.2, KS-34.3, KS-34.4, KS-34.5, KS-34.6, KS-34.7.

Structural debts owed. Psilocybin long-term efficacy monitoring (Debt 35); cannabis long-term legalisation outcomes monitoring (Debt 36).

Items held open without claiming debt status. The temporal confidence gap between alcohol and the herbs; the concentration question within the herb category (ultra-concentrated extracts).

Status: Chapter of Notebook VIII – Consequences. Body preserved verbatim; envelope prose written at register, tracing to the source paper.

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STUDIO 6