

“Medical” Marijuana

You have asked your Physician to authorize ‘Medical Marijuana’ for you, either through a ‘Compassion Club’ or ‘Dispensary’ or through Health Canada’s provisions.

Please see the following information.

Your physician is very troubled about recommending the use of Marijuana as a “Medicine” because: there is no clear research support for the use of cannabis as a “medicine”; the dangerous effects of ‘smoke’ as a common means of using this “medication”; the ‘dose’ can’t be managed as with other medications; worry about the interaction of this drug with others; and other possible harmful effects. Your physician will discuss these concerns with you and make a decision in each individual situation.

Your physician may record that you believe you have benefited from use of Marijuana, without actually recommending it.

1. **Effectiveness of Marijuana isn’t Proven:**

Most of the claimed medical benefits of marijuana are not proven scientifically.

2. **Safety of Marijuana isn’t Proven:**

Physicians should not prescribe any substance without knowing the risks, benefits, possible complications and drug interactions; we don’t have good information.

3. **Smoking is a bad way to take a medication:**

No other prescribed medication uses smoking as a way to take the medicine. Smoke is a dangerous way to take a drug. Marijuana smoke contains many of the same cancer-causing chemicals found in tobacco smoke.

4. **Marijuana is especially dangerous for some people:**

Smoked cannabis has serious risks, particularly in young people. These risks include psychosis, addiction, depression, poor school or work performance, motor vehicle accidents, and poor brain development in children of pregnant cannabis smokers.

5. **Marijuana impairs thinking and performance:**

Most scientific studies show that marijuana use is connected with poorer ability on thinking and memory tests. Driving and operation of intricate machinery, including aircraft, may be especially risky.

6. **Accurate dosing can’t be determined:**

Correct dosages for cannabis have not been developed. The dose cannot be controlled using smoking as a way of taking the drug, so it is difficult to set clear-cut doses or dose schedules.

Other ways of taking marijuana:

Besides smoking and vaporization, marijuana may be used in cookies or brownies or drunk as teas. However, absorption by the oral route is slow and uncertain and dosages are even less well understood.

Some evidence of benefit:

The ability of cannabis to increase appetite has been recognized for many years.

In humans, studies suggest that people with spasticity (such as Multiple sclerosis) may have some relief with cannabis.

Warnings

The dose of marijuana to be smoked is difficult to estimate and is affected by the source, its processing and by smoking techniques, such as depth of inhalation and breath-holding, the number and frequency of puffs and by how much of the cigarette is smoked. Smoking should be gradual and should stop if the patient starts to experience: confusion, dizziness, abnormal movements, anxiety, rapid heart rate and low blood pressure, depression, hallucinations (seeing things) or psychosis.

Adapted from: Health Canada; College of Physicians & Surgeons of BC; CFPC Statement on Medical Marijuana