

# Cannabis: Clinical Flowchart

## Commonly-asked questions from patients REF

**Does cannabis work?**  
 "There are some conditions for which cannabis may provide benefit. For most conditions, however, there isn't much evidence to show cannabis is effective, and research is unreliable or ongoing. If you are using cannabis for other health issues, let's discuss them and make sure we are managing them well with treatments that have more evidence." REF

**Cannabis is just a plant, isn't it safe?**  
 "Inhaling or consuming cannabis, like tobacco, can have long-term risks to your health including respiratory, reproductive or memory issues." Video REF

**Why is the research unreliable?**  
 "Many cannabis studies are small, brief, or did not do a placebo comparison. Some excluded people who had never tried cannabis; others are surveys of just a few people. Such research isn't reliable enough to be conclusive. Many topics haven't yet been studied."

**Doesn't cannabis help anxiety?**  
 "While many people use cannabis to reduce their anxiety, it may in some cases make anxiety worse." REF

[More Information](#)

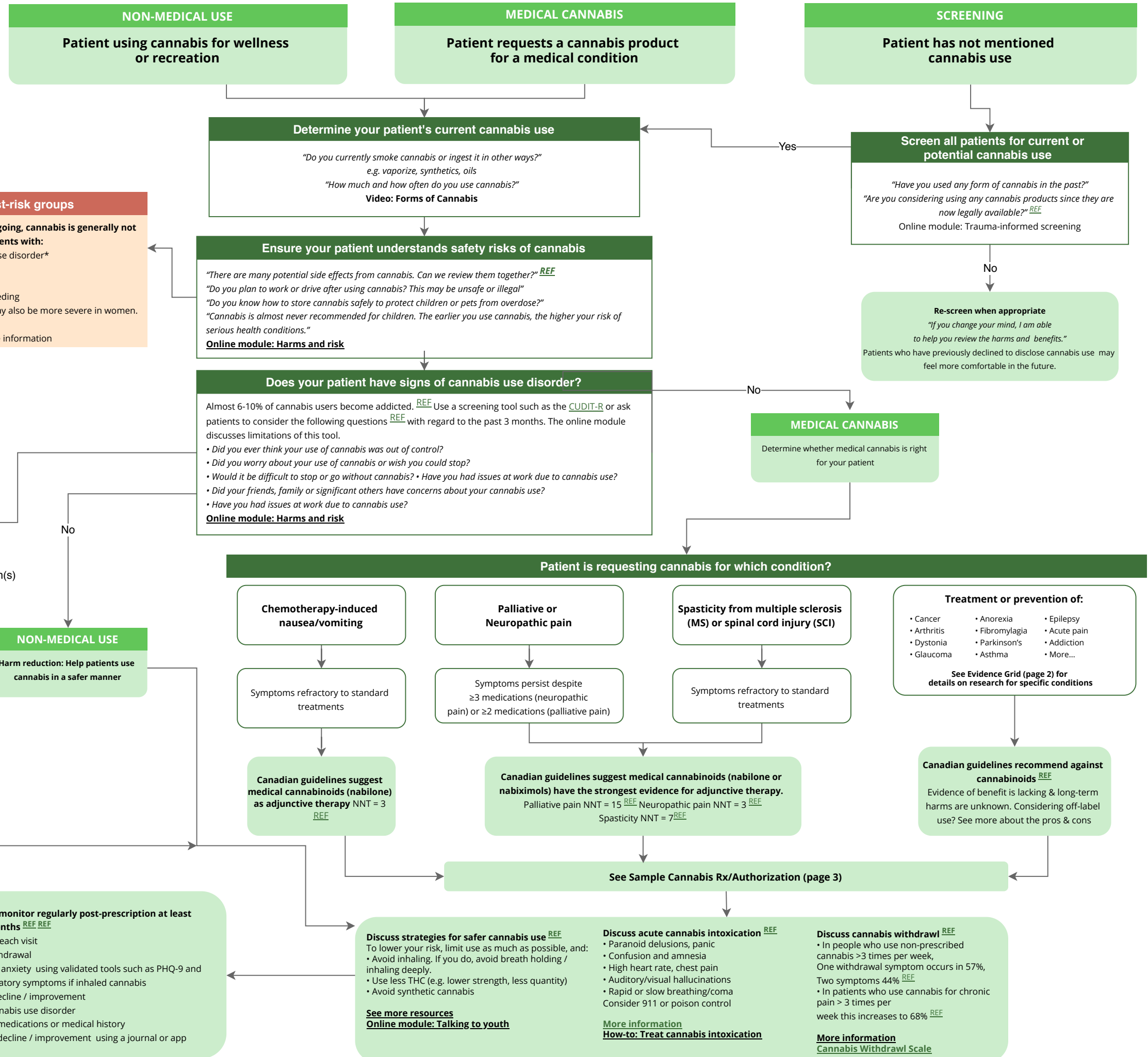
**Highest-risk groups**

**Though research is ongoing, cannabis is generally not recommended for patients with:**

- History of substance use disorder\*
- History of psychosis
- Age < 25 years\*
- Pregnancy or breastfeeding

Cannabis withdrawal may also be more severe in women. REF

\*Exceptions apply. More information



**PROBLEM CANNABIS USE**

**Suspect Cannabis Use Disorder**  
 Does patient meet diagnostic criteria?

**Primary care providers can provide brief counselling sessions** REF

- Include trauma-informed information sharing and motivational interviewing approaches
- Review consequences, readiness to change, goals

Consider pharmacologic options for withdrawal symptoms (e.g. antidepressants, cannabinoid agonists)

**Online module**

**Refer if indicated**

If unable to cut down use or experiencing harms from use, further management options are limited. Consider [RACE line](#) phone consult or referral to addictions specialist, especially in the presence of a concurrent disorder.

See BC resources

**NON-MEDICAL USE**

**Harm reduction: Help patients use cannabis in a safer manner**

**Continue to monitor regularly post-prescription at least every 3-6 months** REF REF

- PharmaNet each visit
- Signs of Withdrawal
- Depression, anxiety using validated tools such as PHQ-9 and GAD-7 Respiratory symptoms if inhaled cannabis
- Symptom decline / improvement
- Signs of cannabis use disorder
- Changes in medications or medical history
- Functional decline / improvement using a journal or app

**Patient is requesting cannabis for which condition?**

**Chemotherapy-induced nausea/vomiting**

Symptoms refractory to standard treatments

**Canadian guidelines suggest medical cannabinoids (nabilone) as adjunctive therapy NNT = 3** REF

**Palliative or Neuropathic pain**

Symptoms persist despite ≥3 medications (neuropathic pain) or ≥2 medications (palliative pain)

**Canadian guidelines suggest medical cannabinoids (nabilone or nabiximols) have the strongest evidence for adjunctive therapy.** Palliative pain NNT = 15 REF Neuropathic pain NNT = 3 REF Spasticity NNT = 7 REF

**Spasticity from multiple sclerosis (MS) or spinal cord injury (SCI)**

Symptoms refractory to standard treatments

**Canadian guidelines suggest medical cannabinoids (nabilone or nabiximols) have the strongest evidence for adjunctive therapy.** Palliative pain NNT = 15 REF Neuropathic pain NNT = 3 REF Spasticity NNT = 7 REF

**See Evidence Grid (page 2) for details on research for specific conditions**

**Canadian guidelines recommend against cannabinoids** REF  
 Evidence of benefit is lacking & long-term harms are unknown. Considering off-label use? See more about the pros & cons

**See Sample Cannabis Rx/Authorization (page 3)**

**Discuss strategies for safer cannabis use** REF  
 To lower your risk, limit use as much as possible, and:

- Avoid inhaling. If you do, avoid breath holding / inhaling deeply.
- Use less THC (e.g. lower strength, less quantity)
- Avoid synthetic cannabis

**See more resources**  
**Online module: Talking to youth**

**Discuss acute cannabis intoxication** REF

- Paranoid delusions, panic
- Confusion and amnesia
- High heart rate, chest pain
- Auditory/visual hallucinations
- Rapid or slow breathing/coma

Consider 911 or poison control

**More information**  
**How-to: Treat cannabis intoxication**

**Discuss cannabis withdrawal** REF

- In people who use non-prescribed cannabis >3 times per week, One withdrawal symptom occurs in 57%, Two symptoms 44% REF
- In patients who use cannabis for chronic pain > 3 times per week this increases to 68% REF

**More information**  
**Cannabis Withdrawal Scale**

### Side Effects

**Patients may experience high rates of cannabis side effects across all medical cannabinoids (NNH = 6), though this may vary based on THC/CBD ratio and may be dose-dependent** [REF](#) [REF](#)

- Drowsiness
- Feeling high
- Dizziness
- Psychiatric disturbances (27% if inhaled)
- Impaired memory
- Sedation
- Numbness

See the online module for comparison table.

**"Feeling high" is generally attributed to THC and not CBD.** [REF](#) However, CBD does have reported side effects especially sedation [REF](#)

- Decreased appetite 22%
  - Elevated LFTs 16% - note these patients were also taking anti-seizure medication
  - Vomiting 15%
  - Pneumonia 8%
- Pediatric trials on CBD (vs Placebo)
- Somnolence 25% (vs. 8%)
  - Irritability or Agitation 9% (vs 2%)
  - Aggression/ anger 3-5% (vs 1 %)

**Smoked cannabis is not recommended due to unknown risk of lung disease.** [REF](#)

**Health Canada recommends against vaping or vaporizing cannabis.** [REF](#)

### Safety and cannabis: Working or driving

#### The 4-6-8 Rule

Rate of fatal car crashes increases with THC use. [REF](#) Avoid driving for 4 hours after inhaling, 6 hours after ingestion, 8 hours if feeling high. [REF](#)

#### Can I work after using cannabis?

Check with your own industry as regulations vary widely. If you feel affected, don't engage in safety-sensitive activities such as driving or operating machinery, Effects usually last at least 6 hours after use, but can last 24 hours.

### THC, CBD and more: Cannabis ingredients

#### Cannabis contains over 500 unique compounds

Principal ingredients: delta-9-tetrahydrocannabinol (89-THC) & cannabidiol (CBD). CBD does not cause a "high." [REF](#)