

ASK the Pharmacist



Q:

Last week, the article touched on what medical marijuana was. Can you tell me what sorts of ailments it can be used for and what side effects might be expected?

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A:

As mentioned last week, marijuana will not cure any disease or disorder but rather it can help provide relief from symptoms. In the case of nausea and/or vomiting due to chemotherapy, the current first line agents such as ondansetron (Zofran) or prochlorperazine (Stemetil) are still recommended as the first drugs to try. For people that are not adequately controlled, cannabinoids can be a suitable add-on therapy. While it is true that marijuana can also cause nausea and vomiting as a side effect, it does seem to help chemotherapy induced nausea according to anecdotal (not based on studies but more on recipients saying it helped) records. The THC (tetrahydrocannabinoid) component of marijuana has shown moderate effectiveness in the treatment of neuropathic pain and can be considered as an add-on medication. As for cancer pain, many people have tried marijuana since their traditional pain management was ineffective and/or the side effects were too cumbersome. A study done at a University in Israel discovered that those people that opted for marijuana for the treatment of their cancer pain experienced a significant reduction in their pain within 4 months. Spasticity and tremor often accompany multiple sclerosis (MS) and marijuana has also been shown to be effective at reducing those symptoms when either smoked or taken orally. Cannabinoids may also help alleviate the pain associated with MS and as well as minimize the involuntary loss of urine that some experience. Smoking marijuana cigarettes seems to stimulate the appetite of AIDS patients resulting in an increase in caloric intake and thus weight gain. The key word here is “seems” since studies were only done using the pharmaceutical version of cannabis and not medical marijuana. Any promise shown with marijuana would once again be anecdotal. Marijuana can decrease the intraocular pressure within the eye, which would make one think it might be effective in treating a condition called glaucoma. However this decrease is very short lived and comes with a major downside. Marijuana also decreases the blood supply to the optic nerve which can result in other visual impairments therefore it is not recommended for glaucoma despite what you might read on the internet. There was a study done in the United States looking at using the CBD (cannabidiol) component of marijuana in the treatment of epilepsy that has not responded to conventional drug therapy. At doses of 20mg/kg/day and 10mg/kg/day, there was a 42% and 37% reduction respectively in drop seizures per month as compared to placebo (17%). All of these ailments require more studies done to firmly establish its effectiveness but so far marijuana looks very promising in this area. Along with whether medical marijuana is likely to work for a particular ailment, the risk of side effects needs to be weighed against these possible benefits to determine if it is right for you. In terms of side effects, the following are commonly associated with its use; dry mouth, red eyes, nausea and vomiting, dizziness/ drowsiness, euphoria, altered judgement, anxiety, paranoia, psychosis, rapid heart rate, euphoria (“high” feeling) and more. With respect to anxiety, it has been shown to be strongly associated with marijuana; short term use can trigger anxiety and panic attacks and high doses can worsen an existing anxiety condition. As well, the youth are more susceptible to experience psychosis and more at risk of developing cannabis related psychosocial harm when compared to adults. Chronic or long-term use of marijuana can lead to a lack of interest or enthusiasm, impaired memory, chronic psychosis and heart attacks to name only a few. The cognitive impairment develops slowly but becomes clinically significant after about 2 decades of use. If smoking your marijuana, you have to consider the effects on the lungs as well; it has been determined that smoking 3-4 marijuana cigarettes equates to 22 tobacco cigarettes. Bullous emphysema (large air spaces within the lung tissue), chronic bronchitis, shortness of breath, pneumonia etc... are all possible effects on the lungs. Recently, marijuana has thought to be possibly linked to testicular cancer in men. The risk for lung cancer remains unknown however abnormal cell growth in the lung has been noted among cannabis users which might be due to the fact that marijuana cigarettes contain 70% more carcinogens when compared to tobacco. Cannabis hyperemesis (severe cyclic nausea and vomiting) is becoming an increasingly recognized problem with marijuana use, likely due to an increase in its use. On a positive note, this seems to gradually resolve over days to a week once the marijuana has been discontinued. As hinted earlier, more studies are needed to determine both effectiveness and side effects; understudied does not equal safe. For more information on this or any other topic, contact the pharmacists at Gordon Pharmasave, Your Health and Wellness Destination.