



SolaceMD

Empowering Wellness

Medical Cannabis - Is this really medicine?

Whether you know it or not, cannabinoids have been a part of you for your whole life. In fact they're a part of everyone. The endocannabinoid system (ECS), discovered in 1988, is an organized and multifaceted system that's involved in the maintenance of a balanced internal environment - a physiological ying-yang process biologists refer to as homeostasis. In a seminal paper on the ECS in 1998, Di Marzo et. al. perhaps best described it as the "relax, eat, sleep, protect and forget" system. You can imagine why a system that interacts with so many vital functions might draw the attention of the medical field. More recently, emerging scientific evidence has started supporting the use of cannabinoid therapy to offset the use of some more conventional pharmaceutical treatments - something which has been referred to as the system-modulating approach versus the symptom-modulating approach. This makes cannabis and cannabinoid therapy unique amongst other conventional therapies.

The cannabis plant (more commonly referred to as marijuana) contains over 400 unique chemical/medicinal elements. Many of these have been identified by the effects that they exert on the ECS. The most well known individual cannabinoid elements include THC (delta-9-THC) and CBD (Cannabidiol), with the most well known non-cannabinoid elements being terpenes, terpenoids, flavonoids, and phytochemicals. Cannabis then should be understood not as 'one medicine' but rather as multiple medicines. There is an ever growing body of evidence to support this group of medicine's ability to successfully reduce seizures, stimulate appetite, quell nausea, mask pain, improve mood, aid with PTSD, treat depression and foster wellbeing amongst a host of other conditions. You may however be surprised to learn that with several clinical trials investigating cannabis' clinical utility either underway or about to start, very little of that research, at least historically has originated here in the US.

But why you ask? Cannabis is currently labeled a Schedule I narcotic, meaning that like heroin, at least according to the federal government and all of the powers under their jurisdiction, cannabis has no currently accepted medical use and a high potential for abuse. This means it has traditionally been very difficult to gain approval to conduct pivotal research. Which is why it's somewhat odd that 31 US states currently have medical cannabis programs. A large study from the RAND corporation earlier in the year looking at data from 1999-2010 pointed to a 20% reduction in opiate deaths in states with access to medical cannabis dispensaries. Three of those states, Illinois, New York, and most recently Pennsylvania have since approved the recommendation of medical cannabis as treatment in the ongoing battle against opiates & opiate addiction - a strategy known as harm-reduction. While causation isn't implied in the RAND study, a 20% reduction in deaths across these states during an 11 year period in the middle of an opiate crisis which claimed 72,000 American lives in 2017 is attention grabbing.

In a landmark April 2018 decision, the Federal Drug Administration (FDA) approved the first naturally derived cannabinoid for clinical use in two discrete seizure disorders. Epidiolex as it is called is medical grade CBD. Previous to this only synthetic cannabinoids such as Marinol or Nabilone had won FDA approval. It should be noted that this medicine, Epidiolex was developed outside of the United States due to CBD being listed (at that time) as a schedule I narcotic. The DEA's announcement in late September 2018, that all CBD containing compounds approved by them would now be labeled as a schedule V drug, which it defines as having the lowest potential for abuse marks a much more informed and sensible designation for this class of compounds. Note that marijuana/cannabis itself remains a schedule I drug under federal law along with the likes of LSD.

Although challenges with consistency, reliability, and dosing of this group of medicines currently do exist, this largely relates to the draconian scheduling and federal policies which have limited the potential for testing and research for decades. And yet, the future looks bright. Innovation in the form of novel drug delivery vehicles, pharmacogenomics of cannabis, and other exciting avenues are currently being investigated and starting to show promise. Now is the time for those of us within the medical and scientific community to advocate and educate regarding the therapeutic potential of this all too often demonized and frequently misunderstood plant. We must capitalize upon the advances gained, and build upon the research of those who have established the basis of cannabis science and medicine for us. Moreover, in preserving their adherence to good science we must separate fact from fiction, present the bad with the good, and honor the data in place of the dogma.

Here at SolaceMD we invite you to join us on this exciting journey as we traverse the oftentimes confusing and complicated medical cannabis landscape, working to remove barriers to access where possible, and helping to empower you on your personal path to health & wellness as you evaluate the risks, benefits and many other important considerations of integrating cannabinoid therapy into your life. Together, let's advance the conversation.

Welcome to SolaceMD

Medical Cannabis Information. Recommendations. Consultations. Empowering wellness.

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