



College of Physicians and Surgeons of British Columbia

Professional Standards and Guidelines

Marijuana for Medical Purposes

Preamble

This document is a standard of the Board of the College of Physicians and Surgeons of British Columbia.

College's Position

Few reliable published studies are available on the medical benefits of marijuana. The amount of active ingredients in marijuana varies significantly, depending on the origin and method of production of the substance.

Physicians are advised that they should not prescribe any substance for their patients without knowing the risks, benefits, potential complications and drug interactions associated with the use of that agent. Physicians may be the subject of accusations or suggestions of negligence, including liability if the use of marijuana produces unforeseen or unidentified negative effects.

Currently in Canada,¹ the only legal source of marijuana for medical purposes is that provided by a licensed producer, which can be supplied to patients upon receipt of a medical document provided by a physician. The authorization document must be completed annually if the patient continues to receive marijuana for medical purposes.

Cannabis is generally not appropriate for patients who:²

- a. are under the age of 25
- b. have a personal history or strong family history of psychosis
- c. have a current or past cannabis use disorder
- d. have an active substance use disorder
- e. have cardiovascular (angina, peripheral vascular disease, cerebrovascular disease, arrhythmia) or respiratory disease
- f. are pregnant, planning to become pregnant or are breastfeeding

¹ See Marijuana for Medical Purposes Regulations SOR/2013-119

² See College of Family Physicians of Canada "Authorizing Dried Cannabis for Chronic Pain and Anxiety" September 2014

The College recognizes that there are sometimes circumstances in medical practice where exceptions to strong relative contraindications may be appropriate. When physicians utilize a therapeutic agent despite strong relative contraindications, the standard of care mandates detailed documentation of their rationale.

The College considers the medical document authorizing patient access to marijuana to be equivalent to a prescription. Physicians must not charge patients or licensed producers of marijuana for completing the medical document, or for any activities associated with completing the medical document, including, but not limited to: assessing the patient; reviewing his/her chart; educating or informing the patient about the risks or benefits of marijuana; or confirming the validity of a prescription in accordance with the Marijuana for Medical Purposes Regulations.

Given the paucity of evidence to support the use of marijuana for medical purposes, physicians who choose to provide a document related to the authorization of marijuana for medical purposes shall:

1. Document that conventional therapies for the condition for which the authorization of marijuana for medical purposes was provided have been attempted to assist the patient in the management of his/her medical condition and have not successfully helped the patient.
2. Assess the patient for addiction and/or risk of addiction. For the latter, use a validated addiction risk tool and retain a copy in the patient record.
3. Discuss with the patient the risks of using marijuana and record in the patient's medical record that a discussion occurred.
4. Review the patient's PharmaNet information prior to issuing an authorization for marijuana for medical purposes and in any reassessment of patients receiving marijuana for medical purposes.
5. Retain a copy of the document provided for the authorization of marijuana for medical purposes in the patient's medical record.
6. Include processes to identify any misuse/abuse/diversion by the patient in any reassessment of patients receiving marijuana for medical purposes.
7. Not sell or dispense marijuana for medical purposes to any patient.
8. Not complete a document for the authorization of marijuana for medical purposes for a patient unless
 - a. the physician has a longitudinal treating relationship with the patient, or
 - b. the physician is in direct communication with another physician or nurse practitioner who has a longitudinal treating relationship with the patient and both are in well-documented agreement with the issuance of a document for the authorization of marijuana for medical purposes.

Although the authorization of marijuana for medical purposes is valid for up to one year, patients using marijuana for medical purposes should be clinically reassessed as to the appropriateness of treatment by their physician at least once every three to six months.

It is important to ensure that patients understand that potential side effects of marijuana, such as sedation or cognitive impairment, can impact their safety. Health Canada has stated that

driving, operating heavy equipment, or other activities involving alertness and coordination may be unsafe for up to 24 hours following a single consumption, depending on the dosage, the delivery route, and the patient's age and other health factors. It is important to discuss with patients that their reactions to the substance and to different formulations are individual, and that it is important to go slowly with the treatment until a stable, effective dose is reached. A similar caution should be provided to any patient in a safety-sensitive occupation such as health professionals and the supervision of children.

Through its library service, the College is providing registrants with access to appropriate reference material to guide them in making informed decisions on the risks and benefits of marijuana for medical purposes as they seek to provide appropriate evidence-based care to their patients.

Physicians may seek advice on this issue by contacting the College and asking to speak with a member of the registrar staff.

References

For more information on medical uses of marijuana, visit:

Canadian Medical Association

- CMA Response: Health Canada's Medical Marijuana Regulatory Proposal Submitted to the Office of Controlled Substances Health Canada (February 28, 2013)
https://www.cma.ca/Assets/assets-library/document/en/advocacy/Proposed-Medical-Marihuana-Regulations_en.pdf

Health Canada

- Medical use of marijuana (Last updated December 2014)
<http://www.hc-sc.gc.ca/dhp-mps/marihuana/index-eng.php>
- Information for health care professionals: cannabis (marihuana, marijuana) and the cannabinoids (Last updated August 2014)
http://www.hc-sc.gc.ca/dhp-mps/alt_formats/pdf/marihuana/med/infoprof-eng.pdf
- Marijuana for medical purposes regulations (December 2014)
<http://www.hc-sc.gc.ca/ahc-asc/media/nr-cp/2013/2013-79bk-eng.php>
- About the Marijuana Medical Access Program (June 20, 2013)
<http://www.hc-sc.gc.ca/dhp-mps/marihuana/about-apropos/index-eng.php>

Canada Department of Justice

- Marijuana for Medical Purposes Regulations
<http://www.laws-lois.justice.gc.ca/PDF/SOR-2013-119.pdf>

College of Family Physicians of Canada

- Authorizing Dried Cannabis for Chronic Pain or Anxiety (September 2014)
<http://www.cfpc.ca/uploadedFiles/Resources/PDFs/Authorizing%20Dried%20Cannabis%20for%20Chronic%20Pain%20or%20Anxiety.pdf>

College of Physicians and Surgeons of Ontario

- Marijuana for Medical Purposes (March 2015)
<http://www.cpso.on.ca/Policies-Publications/Policy/Marijuana-for-Medical-Purposes>

Approved by Executive Committee May 1, 2015

Effective May 5, 2015

Revised July 30, 2015

Questions and Answers

Marijuana for Medical Purposes

Who may complete a document for authorization of marijuana for medical purposes?

Only an authorized health-care practitioner as defined in the Marijuana for Medical Purposes Regulations may complete a document for the authorization of marijuana for medical purposes. In British Columbia, the only authorized health-care practitioners are physicians.

Are persons able to access marijuana for medical purposes by applying directly to Health Canada?

Under the previous Marijuana Medical Access Regulations (MMAR) a person could access marijuana for medical purposes by applying to Health Canada. Under the Marijuana for Medical Purposes Regulations that replaced the MMAR, a person needs to obtain a document for the authorization of marijuana for medical purposes from an authorized health-care practitioner.

Am I obliged to complete an authorization of marijuana for medical purposes document if my patient requests an authorization?

Physicians are not obligated to complete an authorization of marijuana for medical purposes if they feel it is medically inappropriate for a patient or if they are not familiar with its treatment or use.

How much marijuana for medical purposes can be dispensed to a patient at a time?

The new Regulation limits the total amount of marijuana that can be administered (dispensed) to a patient in a 30-day period to no more than 30 times the daily quantity specified in the medical document or 150 grams, whichever is less. In published tracking data for over 5,000 patients in the Dutch cannabis program (2003-2010), the average dose of dried cannabis was 0.68 grams daily (range 0.65 grams to 0.82 grams). In Israel's medical marijuana program average daily use was 1.5 grams (2011-2012.) For more information see Health Canada Marijuana for Medical Purposes Regulation – Daily Amount Fact Sheet (dosage). Given the tentative nature of the scientific evidence on indications, efficacy, and safety, physicians are advised to utilize the lowest dose required to achieve realistic therapeutic goals.