

A close-up, high-angle shot of a dense cannabis crop. The plants are lush green, with many serrated leaves visible. Several large, developing flower buds (colas) are prominent, showing a mix of green and light brown/purple hues. The lighting is somewhat dim, creating a moody atmosphere. The text "Medical Marijuana" is overlaid in the center in a white, sans-serif font.

Medical Marijuana

"In accord with the disclosure policy of the Partners HealthCare System as well as standards set forth by the Accreditation Council on Continuing Medical Education, speakers, I, my spouse or partner, do not have any relationship to companies producing pharmaceuticals, medical equipment or devices."

Learning objectives

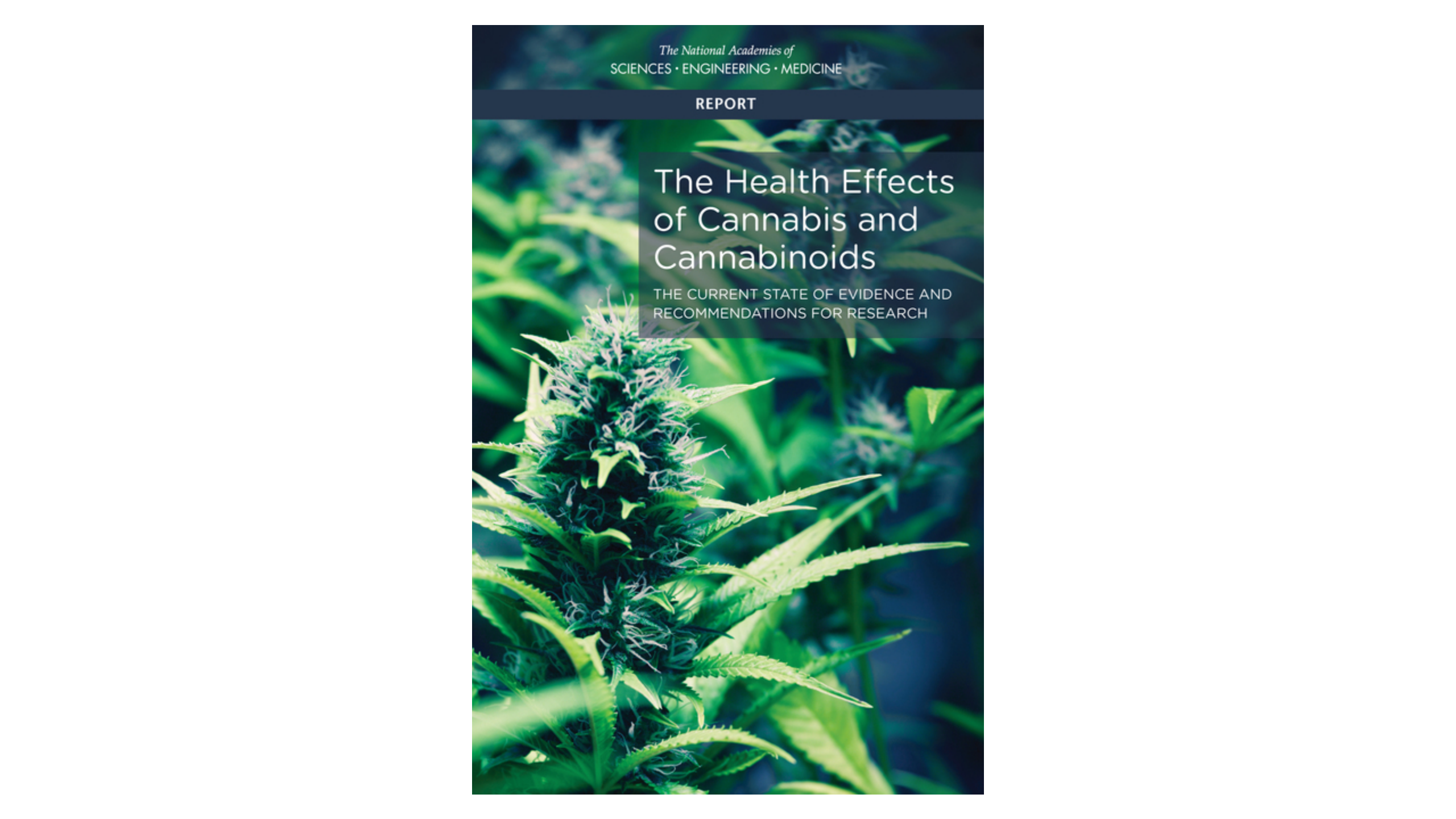
- 1. How to become a medical marijuana certifier
- 2. Understand the difference between CBD and THC
- 3. When should you recommend MMJ to your patients

Question 3 | Medical Marijuana 2012 MA

YES
63%
1,895,340 votes

No
37%
1,097,797 votes

Brookline 16 of 16 20,161 6,635

A close-up photograph of a cannabis plant with green serrated leaves and developing flower buds covered in trichomes. The image is used as a background for the report cover.

The National Academies of
SCIENCES • ENGINEERING • MEDICINE

REPORT

The Health Effects of Cannabis and Cannabinoids

THE CURRENT STATE OF EVIDENCE AND
RECOMMENDATIONS FOR RESEARCH

THE HEALTH EFFECTS OF CANNABIS AND CANNABINOIDS COMMITTEE'S CONCLUSIONS

January 2017



In the report *The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research*, an expert, ad hoc committee of the National Academies of Sciences, Engineering, and Medicine presents nearly 100 conclusions related to the health effects of cannabis and cannabinoid use.

The committee developed standard language to categorize the weight of the evidence regarding whether cannabis or cannabinoids used for *therapeutic* purposes are an effective or ineffective treatment for certain prioritized health conditions, or whether cannabis or cannabinoids used primarily for *recreational* purposes are statistically associated with certain prioritized health conditions. The box on the next page describes these categories and the general parameters for the types of evidence supporting each category.

The numbers in parentheses after each conclusion correspond to chapter conclusion numbers. Each blue header below links to the corresponding chapter in the report, providing much more detail regarding the committee's findings and conclusions. To read the full report, please visit nationalacademies.org/CannabisHealthEffects.

CONCLUSIONS FOR: THERAPEUTIC EFFECTS

There is **conclusive or substantial evidence** that cannabis or cannabinoids are effective:

- For the treatment for chronic pain in adults (cannabis) (4-1)
- Antiemetics in the treatment of chemotherapy-induced nausea and vomiting (oral cannabinoids) (4-3)
- For improving patient-reported multiple sclerosis spasticity symptoms (oral cannabinoids) (4-7a)

There is **moderate evidence** that cannabis or cannabinoids are effective for:

- Improving short-term sleep outcomes in individuals with sleep disturbance associated with obstructive sleep apnea syndrome, fibromyalgia, chronic pain, and multiple sclerosis (cannabinoids, primarily nabiximols) (4-19)

There is **limited evidence** that cannabis or cannabinoids are effective for:

- Increasing appetite and decreasing weight loss associated with HIV/AIDS (cannabis and oral cannabinoids) (4-4a)
- Improving clinician-measured multiple sclerosis spasticity symptoms (oral cannabinoids) (4-7a)
- Improving symptoms of Tourette syndrome (THC capsules) (4-8)
- Improving anxiety symptoms, as assessed by a public speaking test, in individuals with social anxiety disorders (cannabidiol) (4-17)
- Improving symptoms of posttraumatic stress disorder (nabilone; one single, small fair-quality trial) (4-20)

There is **limited evidence** of a statistical association between cannabinoids and:

- Better outcomes (i.e., mortality, disability) after a traumatic brain injury or intracranial hemorrhage (4-15)

There is **limited evidence** that cannabis or cannabinoids are ineffective for:

There is conclusive or substantial evidence that cannabis or cannabinoids are effective:

- For the treatment for chronic pain in adults
- Antiemetics in the treatment of chemotherapy-induced nausea and vomiting
- For improving patient-reported multiple sclerosis spasticity symptoms

There is moderate evidence that cannabis or cannabinoids are effective for:

- Improving short-term sleep outcomes in individuals with sleep disturbance associated with obstructive sleep apnea syndrome, fibromyalgia, chronic pain, and multiple sclerosis

There is limited evidence that cannabis or cannabinoids are effective for:

- Improving symptoms of PTSD
- Increasing appetite and decreasing weight loss associated with HIV/AIDS
- Improving anxiety symptoms in individuals with social anxiety disorders

Why I certify patients for MMJ

- Protect patients from arrest or potential probation violation
- Protect patients from possible employment hassles
- Prevent accidental ingestion of contaminants such as fentanyl, cocaine or K2
- Enable patients to request specific products such as CBD2
- Allow safer modes of delivery other than combustion such as vapes(?), tinctures, edibles and topicals
- Facilitate discussion with knowledgeable sales associates
- Avoid 20+ % retail tax

Attestation

- This is an adult patient (over 18 years of age) with whom I have a bona fide healthcare provider-patient relationship.
- I have had a clinical visit with this patient and completed a thorough assessment before submitting this certification.
- I have reviewed the Massachusetts Prescription Monitoring Program (PMP) to assess the patient's prescription history and to coordinate the patient's care at the time of his/her clinic visit.
- As part of my clinical assessment of the patient, I have reviewed the risks of using marijuana for medical reasons with my patient and provided the patient with educational information.
- I certify that this patient is currently suffering from the active debilitating medical condition as stated above and in my professional opinion, the potential benefits of the medical use of marijuana would likely outweigh the health risks for the patient.