Pharmacotherapies for cannabis dependence?

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Background
The Cochrane review of pharmacotherapies for cannabis dependence was first published in 2014 [1]. In the past year we have contributed to an update of this review, which is currently in editorial review stages. The new studies that were considered for the update have added to the diversity of medications that have been considered for the treatment of cannabis dependence, but as yet there is not sufficient evidence to support any particular pharmacotherapy.

Aim and methods
This poster provides an overview of some of the key findings from our Cochrane review. It is based on the updated analysis that was published in the Cochrane Database of Systematic Reviews in November 2018 [2].

Medication Rationale for use Efficacy Future directions

**Taurine**
- Amino acid that is involved in glutamatergic transmission and neuroprotection.
- May prevent tumor growth.
- Future directions: Further research needed.

**Nicotine**
- A natural, non-opioid substance that has been shown to increase dopamine release in the brain.
- May be used as a potential treatment for cannabis dependence.
- Future directions: Further research needed.

**Calcium channel modulation**
- Involves the regulation of calcium ions in the cell.
- May have a role in the treatment of cannabis dependence.
- Future directions: Further research needed.

**N-Acetylcysteine**
- A precursor to glutathione, which is a natural antioxidant.
- May help to reduce oxidative stress.
- Future directions: Further research needed.

**Quetiapine**
- A mood stabilizer that is used to treat psychosis.
- May help to reduce symptoms of paranoia and delusions.
- Future directions: Further research needed.

**Oxytocin**
- A hormone that is involved in social bonding and attachment.
- May help to reduce anxiety and depression.
- Future directions: Further research needed.

**Venlafaxine**
- A selective serotonin and norepinephrine reuptake inhibitor (SSRI).
- May help to reduce symptoms of depression and anxiety.
- Future directions: Further research needed.

**Mirtazapine**
- A tricyclic antidepressant that is used to treat depression.
- May help to reduce symptoms of anxiety and depression.
- Future directions: Further research needed.

**Escitalopram**
- A selective serotonin reuptake inhibitor (SSRI).
- May help to reduce symptoms of depression.
- Future directions: Further research needed.

**Dronabinol plus lofexidine**
- A combination of a cannabinoid and an alpha-blocker.
- May help to reduce symptoms of withdrawal.
- Future directions: Further research needed.

**Nabiximols**
- A combination of a cannabinoid and an alpha-blocker.
- May help to reduce symptoms of withdrawal.
- Future directions: Further research needed.

**Mixed action antidepressants**
- Drugs that have both dopamine and serotonin reuptake inhibition effects.
- May help to reduce symptoms of depression and anxiety.
- Future directions: Further research needed.

**Anticonvulsants and mood stabilizers**
- Drugs that are used to treat seizures and mood disorders.
- May help to reduce symptoms of withdrawal.
- Future directions: Further research needed.

**Atypical antipsychotics**
- Drugs that are used to treat schizophrenia and bipolar disorder.
- May help to reduce symptoms of psychosis and mood disorders.
- Future directions: Further research needed.

**References**