MEDICINAL CANNABIS FOR CHRONIC PAIN, ANXIETY, INSOMNIA AND OPIOID OVERUSE: REVIEW OF MY FIRST 200 CBD PRESCRIPTIONS IN AOTEAROA NZ

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Introduction/Issues: On 7 September 2017 the NZ Misuse of Drugs Act regulations were amended to deschedule cannabidiol (CBD). Near-pharmaceutical grade CBD products became available from 7 December 2017.

The author opened the first medicinal cannabis clinic in Aotearoa NZ in early 2018 and has prescribed CBD oil to over 200 patients.

This presentation describes the range of presenting problems and outcomes.

Reference is made to the growing literature on the opioid-sparing properties of cannabinoids. Could this have wider application in addiction treatment?

Method/Approach: Medical records were audited for the reasons (presenting problems) patients were started on CBD oil. Levels of patient satisfaction were audited from self-reports after at least one month of CBD therapy. Literature on medicinal cannabis and opioids was reviewed.

Key Findings: Most patients had experienced pain for years or decades, unresponsive to medical interventions. Many were on opioids. Up to 45% with chronic pain reported very good to excellent benefits from CBD. Some were able to reduce or stop opioids. Neurological, psychological or cancer symptoms also showed reasonable response.

Discussions and Conclusions: International literature and patient experiential evidence support the use of CBD for chronic pain and other symptoms. Literature suggests there are opioid-sparing effects of medicinal cannabis. Patients reported their opioids were more effective and some were able to reduce them while on oral CBD. CBD is non-euphoriant with low abuse potential and may have a role in treating opioid overuse.

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