

Medical Marijuana and Cannabis with Parkinson's

Further research into the efficacy and safety of medicinal cannabis in the treatment of Parkinson's symptoms is necessary before Fight Parkinson's will advocate its use.

Medicinal use of cannabis

The two main active ingredients used for medical care are tetrahydrocannabinoids (THC) and cannabidiol (CBD). Both are referred to as cannabinoids. THC is the part that produces the 'high' favoured by recreational cannabis users and may have benefits in reducing nausea. CBD produces no 'high' and may be used to treat pain, inflammatory conditions and seizures. Generally, the use of either form of medicinal cannabis is for symptom relief, not a 'cure'.

Evidence for medicinal cannabis

Many people with a range of serious conditions, including cancer, have reported experiencing symptom relief benefits from cannabis or medical marijuana. A review of current scientific research suggested there was reasonable evidence that cannabinoids can help provide relief from symptoms of chronic pain and spasticity including that experienced in multiple sclerosis.

In other conditions, such as nausea and vomiting caused by chemotherapy, weight gain in HIV infection, sleep disorders and Tourette syndrome, the use of cannabinoids remains unproven.

While there have been numerous endorsements of cannabinoids in relieving Parkinson's

symptoms on social media, the science tells a different story.

When it comes to Parkinson's, there are valid concerns that using marijuana may lead to confusion or, in some cases, trigger psychotic symptoms. Additionally, the existing evidence supporting the use of cannabinoids to alleviate Parkinson's symptoms is extremely limited. This does not mean that cannabis has no benefits for people with Parkinson's; it may well be related to the standards of the research conducted.

Most studies on cannabis in Parkinson's have relied on self-report surveys, case studies and observational research, along with four small, short-term randomised placebo-controlled trials. These studies are often constrained by limited participant numbers and insufficient data on the consistency and quality of cannabis products used.

Out of the ten studies, five reported some benefits; however, most of them were either too short-term or too small to accurately document any potential adverse events or harms. Most studies emphasised the need for more extensive research, particularly using randomised double-blind placebo-based trial methodologies (Stampononi Bassie et al). Stampononi Bassi et al. state, "Results from available clinical studies are controversial and inconclusive due to severe limitations, including small sample size, lack of standardised outcome measures, and expectancy bias."

The US-based Committee on the Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research conducted a review of current evidence. The Committee concluded that "There

is insufficient evidence that cannabinoids are an effective treatment for the motor system symptoms associated with Parkinson's disease or the levodopa-induced dyskinesia" (National Academies of Science 2016).

Changing legal framework

The Access to Medicinal Cannabis Act 2016 was passed by the Victorian Parliament in April 2016. Children with intractable epilepsy were the first to be given access to an imported CBD product. The Act also paved the way for the establishment of a medicinal cannabis industry, enabling the production of consistent, high-quality products for medicinal use.

This was followed by changes in regulations in NSW to allow medical practitioners to prescribe medicinal cannabis in a range of conditions, including cancer, Multiple Sclerosis (MS), arthritis and anxiety and depression.

More recently, Queensland Parliament passed legislation to make medicinal cannabis available to certain groups of patients who have exhausted other treatment options through prescriptions.

Currently, Parkinson's disease is not included in any of the States' lists of conditions where medicinal cannabis is considered to have benefits.

This does not mean that access is completely banned. In some states, individuals with Parkinson's can approach a medical practitioner

Driving motor vehicles and use of cannabis products

Driving while impaired by any drug, prescribed or not, is an offence.

Prescribed CBD is not an illicit drug under the Road Safety Act in Victoria. However, if CBD consumption impairs any mental or physical capacities, it would be considered a drug under the Road Safety Act. Prescribed THC is an illicit

and request medicinal cannabis if they believe all other treatment options have been exhausted.

Individuals should explore all available options and be fully informed of any side effects and costs of use.

All legislation emphasises that the unregulated use of cannabis products remains illegal. It's crucial to understand that the legislation does not equate to the decriminalisation of marijuana for recreational use or self-treatment purposes.

Prescribing of medicinal cannabis

Currently, medicinal cannabis is imported and strictly regulated by the Therapeutic Goods Administration (TGA). The TGA has put a framework in place for doctors prescribing medicinal cannabis. Patients seeking medicinal cannabis need a prescription from their treating doctor, which falls under the Special Access Scheme (SAS). Prescribed medicines with THC content exceeding 2% (the component of cannabis that produces a 'high') are subject to stringent restrictions, requiring the doctor to apply for an additional Schedule 8 permit. CBD that contains 2% or less THC is then a Schedule 4 drug and does not require anything more than the SAS permit.

In most instances, the supply of medicinal cannabis is not subsidised by the Pharmaceutical Benefits Scheme (PBS) with the full cost being paid by the person using the drug.

drug for the purposes of the Road Safety Act and any presence of THC in a person's blood is a driving offence.

When being prescribed a medicinal cannabis product, it is important to use it in strict accordance with the prescribing doctor's directions and to seek advice on your capacity to drive a motor vehicle while using that specific medicine.

Fight Parkinson's position

The renewed interest in the potential for cannabis or its extracts to provide some symptom benefit in Parkinson's disease is encouraging.

Fight Parkinson's, in collaboration with leading neurologists and the Chronic Illness Alliance, has thoroughly evaluated the limited number of randomised controlled trials. The studies were deemed too small in size, inconsistent, and supplied insufficient information on the safety and efficacy of cannabis products. Fight Parkinson's concludes that there is a lack of evidence about the benefits and safety of medicinal cannabis products in treating the symptoms of Parkinson's disease.

Fight Parkinson's is supportive of appropriate and ethically approved scientific research into the therapeutic benefits of medicinal cannabis. In the face of limited evidence, individuals who wish to access medicinal cannabis should fully inform themselves of any benefits, risks and costs and discuss these with a doctor and thoroughly explore other treatment options.

References

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Fight Parkinson's is a leading source of specialised health information and advice services. Through research, education and support, we strive to improve the lives of people living with Parkinson's, PSP, MSA and CBS.

Any medial information provided is for general information purposes only. You should always talk to your treating doctor and qualified healthcare providers for personal medical and health-related instructions.

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