

Medical Marijuana New Patient Success Guide

from Cannabis Clinicians Colorado

*Throughout this booklet, the words Cannabis and Marijuana are used interchangeably.
Cannabis is simply the botanical name for marijuana.*

There are many reasons people turn to cannabis. Sometimes, conventional medicine fails to provide relief for debilitating conditions such as chronic pain, seizures, and nausea; or for serious diseases such as cancer, Parkinson's, or multiple sclerosis. Other times, pharmaceutical treatments are not enough. Many patients on long-term pharmaceutical regimens turn to cannabis after experiencing serious side effects, a lack of effectiveness over time, or problems with dependency.

What Cannabis Is and Isn't

- Cannabis IS an herbal medicine, used since ancient times to help relieve suffering. As an herbal medicine, the cannabis plant is used either whole, in part, or processed into products - such as oils, rubs, and candies (more on forms of cannabis medicines later).
- Cannabis ISN'T a magical cure for all diseases from baldness to bad breath. It ISN'T a substitute for professional medical care – it IS a supplement to it.
- For most people, medical marijuana offers symptom relief and not a miracle cure. Keep this in mind, as reasonable expectations can help you set reasonable goals.

What are Your Treatment Goals?

Medical marijuana laws vary widely from state to state. In Colorado, you can get a medical marijuana registry card with a doctor's recommendation for the following 8 conditions: cancer, glaucoma, HIV/AIDS, severe pain, severe nausea, persistent muscle spasms including multiple sclerosis, seizures including epilepsy, and cachexia which is weight loss with muscle loss. You can also use marijuana purchased either medically or recreationally to help yourself with other conditions such as insomnia, Alzheimer's, depression, PTSD, and more. In all states and in all cases, a doctor can write only a recommendation and NOT a prescription for marijuana. If and how you use cannabis is up to you. This means your personal treatment goals can include goals for problems other than your qualifying condition.

Considerations for goal-setting:

- Is your condition life-threatening or not?
- Is your condition chronic or recurring, such as multiple sclerosis; or is it temporary, such as accident recovery?
- What do you consider a good result? Examples: Fewer days of pain - Return to playing soccer - A reduction in prescription drug use – etc.

Goal-setting works best when you can quantify your progress.

Let's say you qualified for medical marijuana for chronic lower back pain. That pain affects your quality of life on a daily basis by making it difficult to perform simple tasks such as shopping for food. It interferes with sleep, which can interfere with thinking and your work. On occasion, the pain may be so bad that you cannot rise from a chair without help, and become bed-ridden.

In this scenario, goals for pain control with cannabis might be:

1. Reduce number of bed-ridden days from 4 per month to 1 per month.
2. Improve sleep to 6 hours continuous sleep, at least 4 nights per week.
3. Reduce pain while food shopping by 50%
4. Work with Primary Care Physician to reduce prescription drug use

Write Your Treatment Goals here:

1. _____
2. _____
3. _____
4. _____
5. _____

Cannabis as Medicine – The Basics

Every single mammal on this planet, from you, to an elephant, to the smallest mouse, has a receptor system in their body that recognizes cannabis compounds. It's called the Endocannabinoid System or ECS for short. The ECS is comprised of CB1 receptors in the brain and nervous system, and CB2 receptors in the gut, organs, and immune system. Why do we have such a massive receptor system for ... a plant? Because it's not just for marijuana. The ECS is there because our bodies make cannabis compounds naturally. The job of the ECS is to help maintain homeostasis – balance. The chemical compounds that bind to ECS receptors are called cannabinoids. Cannabinoids that are made naturally inside the body are called Endogenous Cannabinoids or endocannabinoids. Cannabinoids from cannabis plants are called Phyto (Greek word for plant) Cannabinoids. There is a hypothesis among some medical researchers that certain diseases may stem from a lack of endogenous cannabinoids. In other words, endocannabinoid system deficiency may contribute to disease. This may explain why phytocannabinoids are effective at relieving certain conditions. Hopefully, more research will lead to more answers.

Cannabis plants contains over 480 chemical compounds. Over 80 of these compounds exist only in cannabis family plants. These 80+ are the

phytocannabinoids. The main phytocannabinoids currently known to have medicinal properties are listed.

THC-A is short for tetrahydrocannabinol-acid. The acid form is the raw form of THC, found in cannabis plants. It is non-psychoactive until heated or dried. Using THC-A from sources such as raw cannabis juice and THC-A tinctures can help people get the benefits of THC without the “high” feeling.

THC is the abbreviation for Delta(9)-tetrahydrocannabinol. The most well-known cannabinoid and the most psychoactive. In addition to medical benefits such as analgesic properties, appetite stimulation, anti-nausea, and anti-spasmodic uses; THC has the ability to alter mood-perception and consciousness. THC is responsible for the euphoric feeling from marijuana.

CBD or cannabidiol, is the second most common cannabinoid in medical use. Its raw form, CBD-A or cannabidiol-acid, has shown medical promise as well. CBD is non-psychoactive. Studies have shown it to have anti-inflammatory, anti-anxiety, anti-nausea, neuroprotective, blood pressure lowering, and analgesic properties, among many others. It is known to help reduce the psychoactivity of THC when used together.

CBC or cannabichromene, is the third most common cannabinoid in the marijuana plant overall. In some strains, CBC may even take dominance over CBD. Like CBD, cannabichromene is non-psychoactive. CBC has analgesic, anti-inflammatory, and very promising antibiotic properties. Like CBD, CBN, and CBG; CBC works best when combined with some THC.

CBN is somewhat psychoactive at roughly 10% the activity of THC. CBN is a breakdown product that occurs when THC is exposed to light or heat. CBN is known to cause drowsiness and reduce spasms.

THCV is a somewhat psychoactive cannabinoid that may act as a vasodilator. As such, it is often recommended to try for migraines and asthma.

CBG or cannabigerol, is the cannabinoid formed first in the plant and has shown significant ability to counteract and prevent tumor formation.

There are many other cannabinoids, but these are the main ones you'll find tested for and labeled at dispensaries. While it's popular in research to study cannabinoids separately, such as CBD alone for seizures, and THC alone for nausea, most people need a combination of cannabinoids to achieve relief. This has to do with the weak binding action at ECS receptor sites shown by most cannabinoids other than THC. The greater-than-the-sum-of-the-parts effect exhibited by combinations of cannabinoids, like those found naturally in

the plant, is called the “Entourage Effect”.

Common Forms of Cannabis

Inhaled Marijuana - The fastest way to get marijuana into your body is to inhale it. This includes smoking, vaporizing, and “dabbing”. Smoking cannabis gives fast relief - you feel the effects in 1 -5 minutes. It also wears off quickly, with effects lasting only 1 – 3 hours.

But lighting your marijuana on fire at 500+ degrees destroys some of the medical compounds and carcinogens are released. Unlike tobacco, there are no known cases of lung cancer caused by smoking cannabis. So the risks aren't known.

Vaporizing involves a low-temperature electronic cigarette or vaporizer. The cannabis material is heated only until the natural plant oils release as vapor, without burning the material. Both whole herb medicines and concentrated oils can be vaporized. It's the same fast onset / short duration as smoking, but with less waste and no smelly smoke.

Dabs are small doses of super-potent cannabis concentrates. Dabbing is not recommended for first-time or inexperienced marijuana users, as overconsumption symptoms can result. Dabs are typically made from hash oil and are vaporized rather than smoked. Never “hold in the hit” with a dab; just breath it in and out. Holding your breath cuts off oxygen to your brain which can cause you to pass out. We do not recommend dabs for those new to medical marijuana.

Oral Absorption includes tinctures or drops, mints, chewing gum, breath strips, etc. The usual recommendation is to hold the medicine in the mouth, under the tongue for a minute or longer before swallowing. This allows the cannabinoids to be absorbed into the blood through the mucus membranes of the mouth. Most patients feel the effects within 0 minutes and relief lasts from 2-4 hours. It's a good fast onset-short duration method for people who don't want to smoke.

Skin Absorption – There are two types of skin products: topicals which work on the area of skin applied and trans-dermals that transport the medicine through the skin and into the bloodstream. Topicals include cannabis infused bath soaks, balms, salves, skin oils, lotions, and liniments. These stay on the outer layers of the skin and work mostly by reducing inflammation, like Icy Hot. They are local anti-inflammatories that do not enter the bloodstream. That said, up to 50% of patients get a significant level of relief from topicals, due to the CB-2 receptors in the skin.

Patches and gels are **Trans-dermals**. These products contain an uptake agent to transport them through the skin and into the bloodstream. They typically take effect in 15 to 30 minutes. Because they are not processed by the digestive system, most people need a lower dose with a patch than with an edible. Effects normally last from 8-12 hours. Cannabis patches are measured dose and timed release. They can be cut with scissors into smaller pieces if a lower dose is desired. Unlike an edible which cannot be deactivated once digested, the patch can be removed if feelings of overconsumption are present.

Raw Cannabis juice is a nutritional supplement used to improve gut absorption and promote healing. It's normally prepared from vegetative green leaves, not from buds or flowers. It's non-psychoactive and a potent anti-oxidant. It can be frozen in ice cube trays to give a measured dose that can be both preserved and easily accessed.

GI Absorption – Pot brownies, candies, edibles, capsules, and other swallowed medicines are very popular. But be careful with dosing. Because they have to be digested before taking effect, it can be anywhere from 30 to 90 minutes before the effects are felt. Taking a small bite, waiting 15 minutes, then eating the whole thing because you think it “didn't work” is how most people get into trouble. Edibles can be highly psychoactive – moreso than other forms. The effects last from 6-8 hours and can give a brain-fog feeling the next day. That said, edibles can be every effective when used properly; healing from the inside out as they travel through the whole gut.

MMJ FORMS & DOSAGE INFORMATION FOR PATIENTS

Form / Method	Onset	Duration
Inhaled (Vapor or smoke)	1-3 minutes	1-3 hours
Sub-lingual (drops, lozenge, spray)	10-25 minutes	1-3 hours
Ingested (capsules, edibles, drinks)	30-90 minutes	6-8 hours
Topical (balms, etc)	30-60 minutes	6-8 hours
Transdermal (patch, gels)	15-30 minutes	6-12 hours
Raw Cannabis Juice (non-psychoactive)	Nutritional Supplement	

Dosing with cannabis is highly personal – what works for one person may not be right for another, even with the same diagnoses. Finding your dose involves the trial and error method. So it's important to write down what you try. No one wants to waste money on things that don't work, and when you have a good

result you can easily repeat it if you keep track. Most people will need more than one form of marijuana for their problem. A long-acting medicine like a patch during the day, an edible to help stay asleep at night, an acute relief fast acting form like a vape pen or tincture, and a preventative like juice or salves. For best results, be sure to record other drugs, therapies, and treatments used in addition to medical marijuana.

Starting doses for both men and women are set low on purpose. Men and women under 150lbs should begin with 2.5-5mg on measured dose medicines like edibles and tinctures. Women over 150lbs and men with low body fat up to 200lbs can increase to 10mg. With edibles wait a full hour before increasing the dose by 2.5mg until the desired results are felt. If using inhaled medicines, start with one puff only every 15 minutes until relief is achieved.

Starting Dose Guidelines for Tested Medicines

CBD – start with 1mg per 10 lbs body weight. Add THC as needed, per below. This is easiest to do with tinctures when first starting.

THC – starting doses

Adults / Women 90lbs -125 lbs: 2.5mg–5mg THC per dose

Adults 130-160 lbs: 5mg-10mg THC per dose

Adults 175-200 lbs: 5mg-15mg THC per dose

All patients: increase by 2 to 5mg as directed for form of medicine til relief.

Inhaled whole herb or vaporized medicines: Start with 1 puff per 15 mins until relief. If meds are tested, record cannabinoids or ratios.

Titration: If minimal results after 15 mins for inhaled meds & tinctures or after 60 mins for edibles, dose again with low amount and record results until desired relief attained. Total of doses is next starting dose. Cannabis is a fat and adheres to fats in the body. Lower body fat may mean lower dosages more frequently. Higher body fat may need higher dosages.

Overconsumption can be a problem, particularly with edibles. Problems with over-use can be compounded by the use of prescription drugs and alcohol which alter the intended effects of marijuana on the individual. THC overconsumption symptoms can be mild: red eyes, dry mouth, rapid heart beat, dizziness, and lethargy or “couch-lock”. Or they can be severe: acute paranoia, trouble walking, vomiting, breathing difficulties and loss of consciousness.

What to do if you get too much? There is no known “antidote” for too much THC. Assess if you have had other drugs or alcohol before deciding to visit an emergency room. Most people do NOT need emergency medical help. Lay down in a safe place. Try and breath normally. Call a friend to sit with you, and SLEEP IT OFF. **No One Has Ever Died of a Cannabis Overdose.**

CANNABIS USE JOURNAL

Date	Symptom	How Bad? 1-10	Treatment Used MMJ Strain, hash oil, etc - Smoke / Vapor Tincture, Capsules, Oil, Edible, Balm, Patch, Juicing, etc. Include Dispensary Name	Amt used (Mgs, Puffs, Drops, etc)	Result 1-10 1 hour later



0



1-2

MILD



3-4

MODERATE



5-6

INTERFERES WITH CONCENTRATION



7-8

SEVERE



9-10

INTERFERES WITH BASIC NEEDS

BEDREST REQUIRED

NO PAIN

CAN BE IGNORED

INTERFERES WITH TASKS

INTERFERES WITH CONCENTRATION

INTERFERES WITH BASIC NEEDS

Using the pain scale - If your starting pain level is a 7 and using cannabis drops it to a 3, that is a 60% reduction in pain – a good result.

Purchased from _____ Date _____

Type: Flower Edible Tincture Topical Patch Concentrate Oil

Brand / Product _____

Sativa Indica Hybrid _____ THC _____ CBD _____ Other

Dose Used _____ mgs, Puffs, or Portion

Starting Symptom Level 0 1 2 3 4 5 6 7 8 9 10 Time _____

Resulting Symptom Level 0 1 2 3 4 5 6 7 8 9 10 Time _____

Notes _____

Progress Towards Goals:

Disclaimer – this booklet was produced by Society of Cannabis Clinicians Colorado, and was reviewed for medical accuracy by our member physicians. Citations for medical reference are available on our website CoScc.org along with a by-condition database of cannabis research. Patients should consult with a physician before starting any cannabis program. Reduction of pharmaceuticals must be monitored by a physician.

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