

Cannabis: Dosing and Titration

MacCallum CA, Russo E. Practical considerations in medical cannabis administration and dosing. 2018
 Eadie et al. Duration of Neurocognitive Impairment with Medical Cannabis Use: A Scoping Review. 2021

Cannabis medicine doses and regimen must be made for each individual specifically. A "Start Low and Go Slow" titration method is recommended to reduce chances of adverse effects and impairment. A CBD - dominant product is often chosen first, with the slow addition of THC if treatment goals are not achieved. Following initiation, follow-up and monitoring is essential.

'Start Low and Go Slow'

Oil

STEP ONE: INITIATION

Start with 5mg CBD oil BID

STEP TWO: CBD ONLY

- Titrate dose by 5mg CBD every 2-3 days
- Stop increasing dose when patient reaches goals of therapy or adverse effects seen

STEP THREE: ADD THC

- If CBD is not reaching treatment goals at 40mg/day, assess and consider adding THC
- Recommended initial dose:
1 - 2.5mg at bedtime
- Titrate by 1-2.5mg THC every 2-7 days
- If daytime THC is needed, start at 1mg and titrate by 1-2mg every 2-7 days

DOSE CONSIDERATIONS

- Stop increasing dose when patient reaches goals of therapy or if adverse effects seen
- If side effects occur: reduce dose to previous, best tolerated dose
- THC doses above 40mg/day rarely required
- If 40mg/day is reached, reassess risk:benefit

Inhalation

RECOMMENDED CANNABIS STRAIN

THC = CBD or THC Only

"MINDFUL VAPING" TECHNIQUE

- Start with 1 inhalation
- Wait 15-30 minutes
- Increase by 1 inhalation
- Repeat until symptoms improve

NO RELIEF ? SIDE EFFECTS?

- Consider changing strain
- Change %THC or THC:CBD ratio

FINAL DOSE

Final dose = total consecutive inhalation doses required for symptom relief

Notes

- Patients should keep track of symptoms, response and efficacy to discuss at followup visits
- Most patients use 1-3g of cannabis per day
- Most patients using nabiximols require 6-8 sprays per day for symptom relief (max. 12)
- CBD-predominant products have fewer psychotropic effects, and may require higher dosing

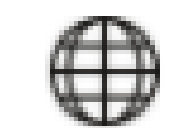
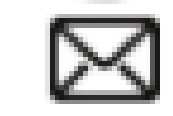

Oil vs Inhalation

- Oral THC effects are easier to judge due to the listed concentration
- Vaporization is subject to variables such as chamber size, inhalation depth, breath holding, and chemovar THC strength, which can influence dose

Follow-up and Monitoring

Special populations:	2 Weeks
.....	
Minimal experience, chronic pain	2-4
Moderate to severe comorbidities	Weeks
Difficulty adhering to treatment	
.....	
Experienced,	Within
Minimal comorbidities	3 Months
Adheres to treatment plan	

Ideally, THC-predominant preparations should be started at bedtime to limit adverse effects seen (but not required)

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