

Cannabis: Precautions & Contraindications

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

Considerations

Immunocompromised

- Cannabis may be contaminated with microorganisms. The high infection risk of this group should be considered.
 - Use cannabis from a regulated source
- Caution should be taken if the patient is taking certain medications.
 - CBD may increase the toxicity of calcineurin inhibitors
 - CBD may lower efficacy of PD1 inhibitors
 - THC may inhibit lymphocyte growth
- CBD and THC could interfere with immunotherapy for cancer patients

Chronic Kidney Disease (CKD)

- While cannabinoids are thought to be safe in patients with CKD, renal function should be monitored
- Clinicians should use the lowest effective dose and use regulated sources to avoid contamination

Older Adults

- Physiological changes associated with aging may increase risk or magnitude of adverse effects
- Higher risk for drug interactions
- A slow titration method with frequent monitoring is recommended

Concurrent medical conditions & Polypharmacy

- Limited studies concerning cannabis safety in patients with comorbid diseases
- Sedating effects may compound with conditions or medications
- Increased risk of drug interactions

Precautions

Concurrent active mood or anxiety disorder

- Established relationship between cannabis use and mental health disorders - mostly with early onset with high THC doses
- Individuals with PTSD, depression, and anxiety are more likely to use medical cannabis
- Clinicians should consider CBD products

Tobacco Use

- A patient who smokes tobacco is more likely to smoke cannabis, or add tobacco to cannabis, elevating risk of CVD, etc.

Electronic Cigarette (Vape) Use

- Use of E-cigarettes and Vapes have been linked to severe respiratory diseases (E-Cigarette or Vaping Product Use-Associated Lung Injury)
 - Some of these cases were using unregulated THC-containing products
- The CDC recommends not to use products from illicit, unregulated sources

Severe Liver Dysfunction

- May affect metabolism of cannabis
- Dose cautiously, and monitor frequently

Driving/Safety - Sensitive Occupations

- Cannabis can lead to neurocognitive and psychomotor impairment, mostly due to THC
- Patients using cannabis should not drive or participate in safety-sensitive activities for 4 hours after inhalation or 6-8 hours after injection



Prior to initiating cannabis treatment, the risks and benefits for each individual patient should be assessed. The following considerations, precautions, and contraindications outline populations and conditions that may influence patient safety using cannabis.

Contraindications

Unstable Cardiovascular Disease (CVD)

- THC can cause acute cardiovascular effects
- Cannabis should not be used with
 - Acute Congestive Heart Failure
 - Critical Aortic Stenosis
 - Poorly controlled Atrial Fibrillation
 - Coronary Artery Disease
- At risk of CVD/Stable CVD: monitor frequently, avoid smoking cannabis

Respiratory Disease

- Smoking cannabis can worsen respiratory symptoms, and releases harmful chemicals through combustion
- Cannabis Oil forms should be used instead

Psychosis and Bipolar Disorder

- Daily THC use may worsen symptoms
- For some people, THC can induce psychosis
 - Other risk factors: early life stressors, early cannabis initiation with regular use, use of high THC level products
- Take extra caution if there is a personal or family history of these conditions

Pregnancy and breastfeeding

- Potential risk of neonatal morbidity
- First trimester use associated with negative outcomes
- Concurrent use of cannabis and tobacco smoking increases risk of adverse effects
- Concern for effect on neurodevelopment
- Cannabinoids detected in breast milk for up to 6d

Relative Contraindications

Individuals Under 25

- Carefully consider risks vs benefit
- Increased risk of Cannabis Use Disorder
- Use of large THC dosages and regular use is associated with risks
 - persistent cognitive effect, social dysfunction, anxiety, depression
- Young age of initiation associated with early onset of schizophrenia and BP

CURRENT, PAST, OR RISK OF CUD/SUD

Cannabis Use Disorder (CUD)

- Cannabis is contraindicated in patients with active or history for CUD

Substance Use Disorder (SUD)

- Screen for potential problematic use of substances using risk assessment tools
- If the patient has a history/active SUD, or is at risk of CUD, cannabis risk should be carefully considered

Frequent monitoring and follow-up is important in these populations.



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