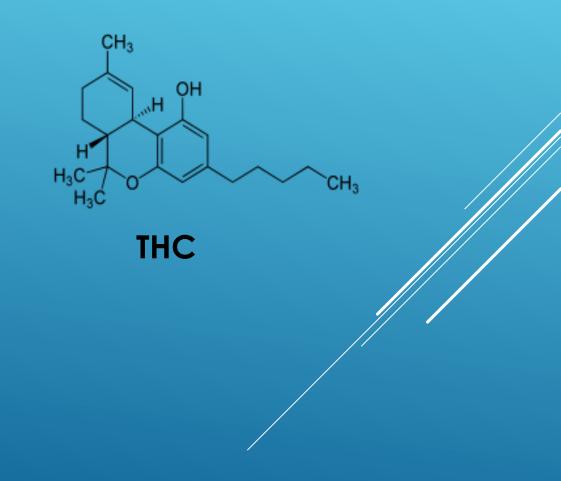
NORDIC SPECIALIST COURSE IN PALLIATIVE MEDICINE 2019

Project: Self-reported cannabis use in patients referred to The Palliative Care Unit at a University Hospital in Copenhagen.

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CANNABIS





INTRODUCTION

- Cannabis products for recreational and medical purposes has attracted increasingly attention in the generel population in many countries
- The public, social media and firms have increased pressure on politicians to get access to cannabis in a legal way
- In some countries cannabis is legalized. Most cannabis products for medical purposes have bypassed usual drug regulatory procedures and therefore have no leaflet
- January 1, 2018 Danish doctors were permitted by law to prescribe medical cannabis

INTRODUCTION

 This law and the fact that we knew some of our patients used cannabis made me want to investigate the intake more systematically

 New patients would often ask about cannabis, seek the doctors advice about the use and the effects

 In the case we included patients in our team we would like to know, if cannabis were used due to possible interactions with other drugs

MATERIALS AND METHODS

- ✓ The Unit covers an area of 5-600.000 inhabitants
- \checkmark 600 patients are referred to the Unit per year
- All newly referred and visited patients in a prespecified period of time
- A prespecified questionnaire was made and used by all doctors in the team
- The study was approved by The Ehtics committee and The Danish Data Protection Agency

MATERIALS AND METHODS

✓ Criteria for inclusion

All patients referred to Specialist Palliative Care Unit

✓ Criteria for exclusion

✓ Imminently dying

The patient did not want to participate in the study

May first 2018 – October 31 2018

All included patients had to sign an informed consent

RESULTS

✓ During the six months 286 patients were visited

✓ Included in project: 198 (69%) patients

✓ Exclusion by protocol:

 \checkmark Seven (2,4%) patients did not want to participate

 \checkmark Two (0,7%) were imminently dying

RESULTS

- Exclusions not allowed by protocol 79 (27%) patients
 - \checkmark No signed informed consent 5 (1,7%) patients
 - \checkmark Not able to speak Danish 3 (1%) patients
 - \checkmark Not able to hear 1 (0,3%) patient
 - Secretary stopped project under my vacation 7 (2,4%) patients
 - Never asked to be included in the study 63 (22%) patients
- Patients not invited to participate were evenly distributed over the period of inclusion



Epidemiology						
Sex	Age (Years)	Diagnose	Abuse			
Female 93 (47%)	Mean 67,3	Cancer 165 (83%)	Never 163 (82%)			
Male 105 (53%)	Median 68	Other 33 (17%)	Former 28 (14%)			
	Range 27-92		Currently 7 (4%)			



Cannabis questionnaire results						
Cannabis		Type of cannabis				
Yes	50 (25%)	THC	16 (32%)			
No	148 (75%)	CBD	28 (56%)			
		Dronabinol	7 (14%)			
		Marinol	1 (2%)			
		Other	15 (30%)			

RESULTS

Cannabis questionnaire results

Why do you take cannabis?		Does it relieve symptoms?		Do you have side effects?	
Nausea	6 (12%)	Yes	1 9 (38 %)	Yes	13 (26%)
Pain relief	20 (40%)	No	15 (30%)	No	35 (70%)
Increase of appetite	6 (12%)	Don't know	16 (32 %)		
Sleep disorder	8 (16%)				
Antineopla stic effect	22 (44%)				
Other	15 (30%)				

DISCUSSION

- Antineoplastic effect
- Strengths and limitations in this study
 - Prospective and consecutive in palliative patients
 - ✓ No recall bias
 - Patients were just asked, no objective measurements
- ✓ Other surveys
 - Two recently in cancer patients and 1 in chronic noncancer pain
 - ✓ No surveys in palliative patients
- ✓ Meta-analysis
 - ✓ Chronic non-cancer pain

CONCLUSION

 \checkmark 25% used cannabis of some kind

✓ Equally distributed between men and women

 38% had symptom relief, but not necessarily the symptom/s patients used cannabis for

 ✓ 26% reported side effects, mainly dizziness and fatique. Some patients had more than one side effect

✓ 56% used CBD. 22% used CBD in combination with THC



THANK YOU FOR YOUR ATTENTION

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