# Addressing Legalized Marijuana & Discussing with Patients

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### What Non-Marijuana Prescribers <u>CAN</u> do:

- Engage in clinically relevant discussions about:
  - State-approved medical marijuana use with any patients requesting information about marijuana
  - How use of State-approved medical marijuana may relate participation in other clinical activities, (e.g., how marijuana may impact other aspects of overall care [pain management, PTSD treatment, SUD treatment]; how marijuana may interact with other medications).

### • Plan care:

 Providers need to make decisions to modify treatment plans based on marijuana use on a case-by-case basis, such decisions need to be made in partnership with the patient and must be based on concerns regarding patient health and safety.

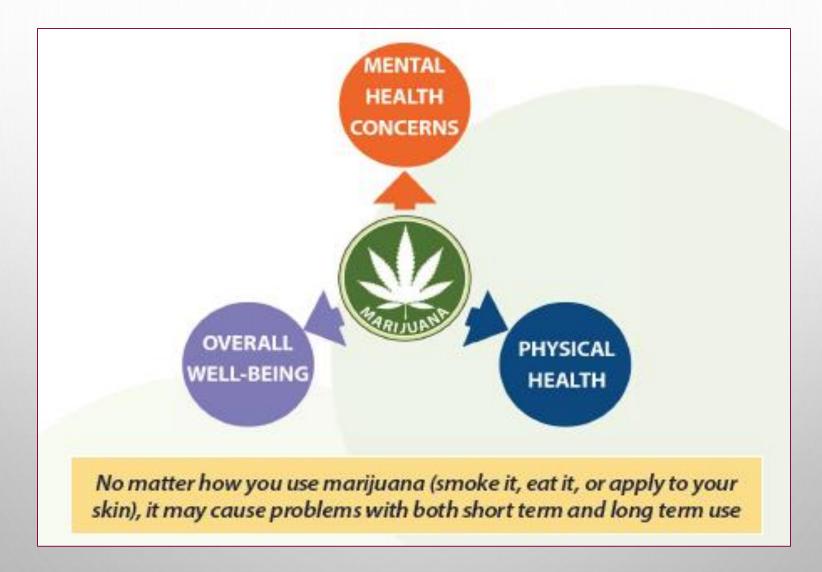
### What we SHOULD do:

- Enter relevant information into the medical record:
  - If a provider discusses marijuana with a patient, relevant information must be documented in progress notes, and considered in the development or modification of the treatment plan, using his/her clinical discretion.
  - If a patient reports marijuana use <u>AND</u> participation in a State-approved marijuana program, that information is entered into the medication section of the electronic medical record.
  - The indication for its use should also be listed.

# What to discuss?

The following slides may be useful in providing you insight.

## **OVERALL AREAS OF CONCERN**

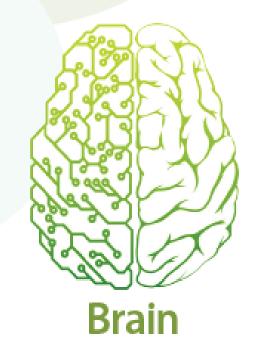


### **BRAIN EFFECTS**

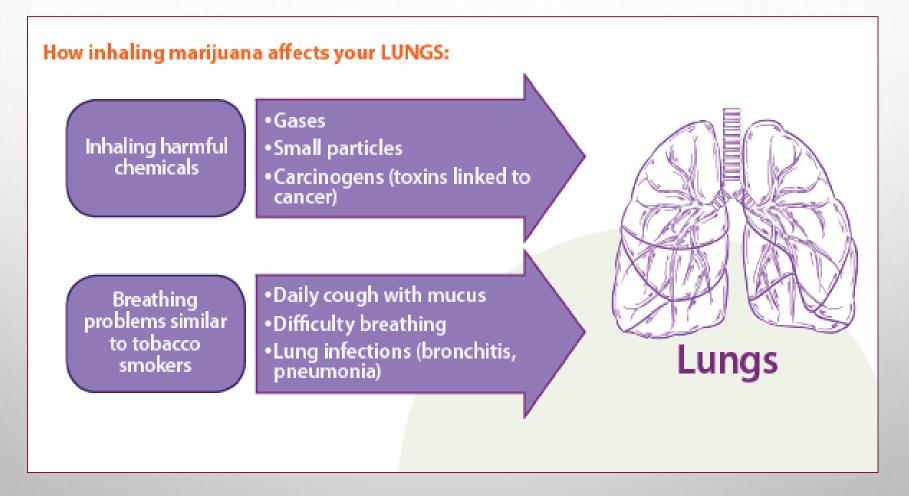
#### How marijuana affects your BRAIN:

Potential effects from Short Term Use Poor focus, memory and reaction time
Difficulty with problem solving
Hallucinations, paranoia, anxiety

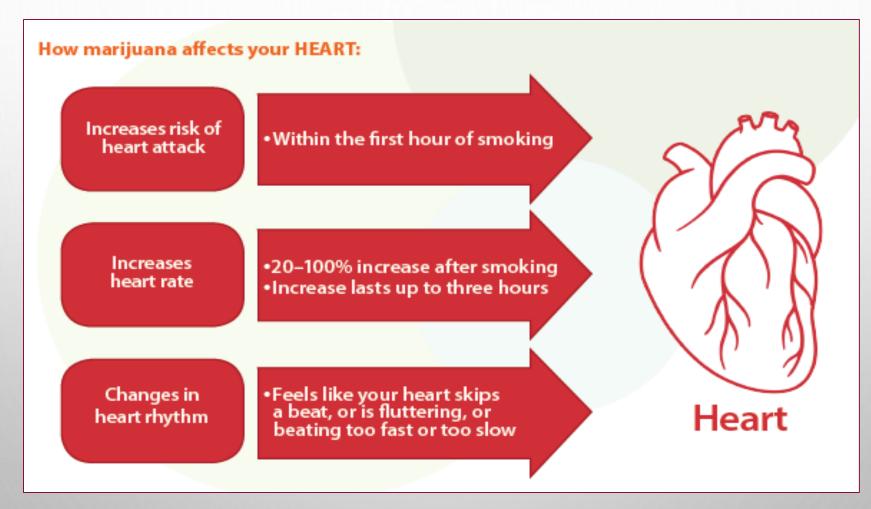
Potential effects from Long Term Use Memory problems and trouble learning new things
Depression, hallucinations, paranoia, anxiety, worsening PTSD symptoms
Addiction



### LUNG EFFECTS



### **HEART EFFECTS**



# SAFE TO USE WITH OTHER DRUGS?

#### Is it SAFE to use marijuana with other medications?

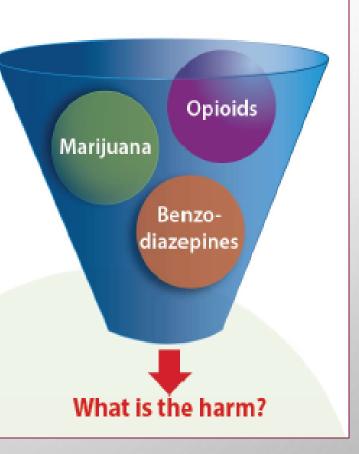
A combination that can be concerning is the use of opioids and/or benzodiazepines with marijuana.

#### Opioids + Benzodiazepines + Marijuana:

Drowsiness: All three can cause drowsiness.

Reaction time: All three can reduce reaction time. Do not drive or operate machinery.

Overdose: Opioids and Benzodiazepines can cause reduced breathing and in some cases, breathing can stop and a person can die. Marijuana containing higher levels of THC may cause difficulty with thinking and memory and this could result in medication errors where extra doses of opioids, benzodiazepines, or other medications may be taken.



### **ADDICTION POTENTIAL**



#### You can have problems with marijuana withdrawal.



You may have withdrawal symptoms the day after you stop using. These can get worse 2 to 3 days after using and can take 1 to 2 weeks or longer to go away.

# **QUALITY CONTROL**

What is different between the marijuana product I get from the marijuana shop and a prescription from the pharmacy?

#### **Quality Control**

Is an edible from one shop the same as another shop? Was the product tested for contaminants? (e.g. molds, pesticides)

#### No Warnings or Reported Side Effects

Will I get an information sheet from the shop like I do from the pharmacy?

#### **Product Form**

What is the difference if I smoke it, eat it or use a cream on my skin? Will they all work?

#### No Established Dose to Treat a Condition

If I am taking this for pain, how much should I use?

## **IMPORTANT CONCLUDING REMARKS**

- MARIJUANA PLANT AND RELATED PRODUCTS DIFFER FROM FDA-APPROVED MEDICINE.
- INCREASING AVAILABILITY OF MARIJUANA CORRELATES WITH INCREASING CANNABIS USE DISORDER AMONG PATIENTS.
- PATIENTS AND PROVIDERS SHOULD BE ENGAGED IN CONVERSATIONS ABOUT THE IMPACT OF MARIJUANA USE ON HEALTH.