COLLÈGE DES MÉDECINS
DU QUÉBEC

Guidelines concerning the prescription of dried cannabis for medical purposes

April 2014

(Updated: May 1st, 2015)

Guidelines

1. The use of dried cannabis for medical purposes is not a recognized treatment.

Despite the rulings of Canadian courts and the existence of medical cannabis access programs, the dried form of this product is not a medically recognized treatment. The indications are not clearly defined, the therapeutic dosages are neither known nor standardized and there is a lack of valid safety data. Information on drug interactions, in particular, is limited.

Despite the insistence of Canada's colleges of physicians, Health Canada and the political authorities of the federal government have adopted regulations under which a prescription is required to obtain dried cannabis for medical purposes. Furthermore, they refuse to have this product undergo the usual licensing process required before a prescription drug can be put on the market. Consequently, the coming into force of these regulations obliges the medical profession to prescribe this product outside the usual framework for prescribing prescription drugs and without the necessary evidence-based scientific data to ensure good medical practice. This creates a unique, unprecedented situation, with certain risks for patients and possible medicolegal implications for the prescribing physician. This situation obliges the Collège to propose a specific, precautionary framework to reconcile compliance with the regulations and the protection of patient health and well-being.

2. According to the *Code of ethics of physicians*, an unrecognized treatment can only be used within a research framework.

In March 2006, the Collège des médecins du Québec published a position statement entitled *The physician and unrecognized treatments* [available in French only].

The principles set out in the position statement have been applied on occasion and will be again here. In accordance with sections 48 and 49 of the *Code of ethics*, physicians are not required to prescribe dried cannabis and, as of April 1, 2014, those who agree to prescribe it may only do so within a research framework.

3. As of May 1, 2014, the potential therapeutic uses of dried cannabis within a research framework are those identified in the document Information for Health Care Professionals available on Health Canada's Web site at the address http://www.hc-sc.gc.ca/dhp-mps/marihuana/med/infoprof-eng.php#chp40 and, more specifically, in Table 7, Section 4.0.

This table lists the potential therapeutic uses and refers to published clinical trials. It can guide the clinician and the patient in their decision making.

A physician may not prescribe cannabis for recreational purposes.

4. **Before considering the use of dried cannabis to treat a medical condition provided for in the previous regulations, other therapeutic options must be considered, in particular other forms of cannabinoids (tablets or sprays, nabiximols [Sativex®], nabilone [Cesamet®] and dronabinol [Marinol®]) authorized for prescription by Health Canada.**

5. **A physician who is asked to prescribe dried cannabis must:**

- read the medical literature;
- inform the patient that dried cannabis is not a recognized treatment, that, in Quebec, it can only be prescribed within a research framework, and that the patient must purchase it from a producer authorized by Health Canada;
- ask him to read the document prepared by Health Canada "INFORMATION – ^{N}Cannabis (Marihuana, marijuana)" (last revised: July 2014) http://www.hc-sc.gc.ca/dhp-mps/alt_formats/pdf/marihuana/info/cons-eng.pdf;
- inform the patient about any research projects underway.

6. **Before prescribing dried cannabis, the physician must:**

- collaborate in a research project;
- obtain the research participant's consent; have him sign the relevant consent form and enter it in a research record;
- as he does before prescribing any treatment, carry out a complete medical assessment of the participating patient and plan the appropriate follow-up.

The purpose of this assessment is to:

- check the indication;

- evaluate the risk of dependence and the risks and benefits of dried cannabis;
- check the possibility of alternative solutions to the use of dried cannabis, in particular other forms of cannabinoids;
- check for the presence of contraindications or interactions with other drugs;
- note any relevant clinical and therapeutic elements in the patient's medical record and/or refer to the research record.

7. When a physician prescribes dried cannabis, he must:

- specify the type of product, the quantity and the frequency of use on the prescription;
- give the patient recommendations for use in situations where alertness is required and could be impaired, e.g., professional activities or driving a motor vehicle;
- send the original prescription directly to the producer selected and authorized by Health Canada (producers: http://www.hc-sc.gc.ca/dhp-mps/marihuana/info/list-eng.php), give a copy of the prescription to the patient and enter one in his record;
- plan and provide follow-up for the patient;
- adjust the prescription accordingly, as needed. The patient must be seen at least every three months once his condition has stabilized;
- keep a register of all patients for whom he has prescribed dried cannabis and, on request, make it available to an officer of the Collège des médecins du Québec.

8. A physician may not supply the patient directly with dried cannabis or deal in cannabis or cannabinoids.

9. A physician may not become or apply to become a cannabis producer.

10. A physician who prescribes dried cannabis must collaborate, in the context of a research project or otherwise, with the Collège des médecins and its partners in the collection of scientific data in order to improve knowledge and practices with respect to the use of cannabis for medical purposes and to ensure patient safety.