Cannabis: Products, Health Effects, Policies, and Clinical Interventions

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American Society of Addiction Medicine Annual Conference April 2, 2022



Disclosure Information Cannabis: Products, Health Effects, Policies, and Clinical Interventions

April 2, 2022 at 11:30 a.m.

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- Dr. Pham is a Chief Medical Officer at Institute for Community Living (ICL)
- She is a consultant to Office of Mental Health of New York State and grant reviewer of Substance Abuse and Mental Health Services Administration

No Financial Conflicts of Interest





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Brian Hurley, MD, MBA, DFASAM, FAPA

- No Financial Conflicts of Interest
- Dr. Hurley is the President-Elect of the American Society of Addiction Medicine, so comments on topics involving ASAM may be biased towards ASAM





Disclosure Information

- Victoria Pham, DO, MBA, FAPA, DFAACAP
 - Commercial Interests: No financial disclosures
- Brian Hurley, MD, MBA, DFASAM, FAPA
 - Commercial Interests: No financial disclosures



Learning Objectives

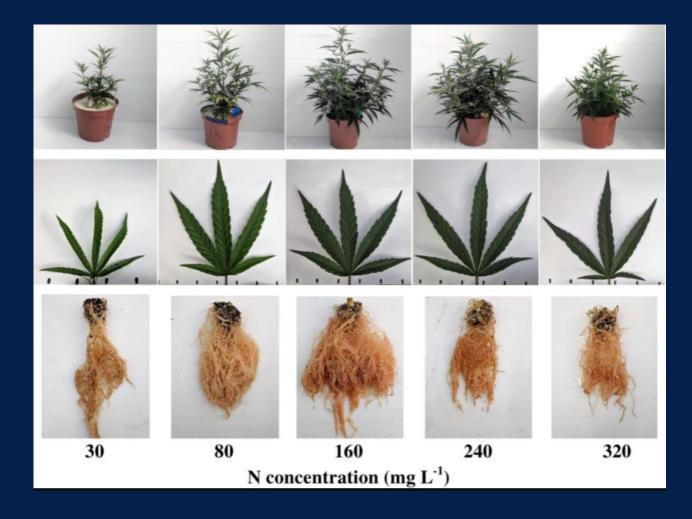
- By the conclusion of this learning session, participants will be able to:
 - Characterize the various types of cannabis products
 - Describe cannabis use and potency
 - Explain cannabis' impacts on physical and mental health
 - Discuss which cannabinoid drugs have FDA approval and which THC/CBD related clinical trials are in the pipeline
 - Summarize the emerging policies and regulations with regards to Cannabis use in the United States
 - Identify treatment options available to people with cannabis use disorder



Backgroun d

- Cannabis Sativa: greenish-gray mixture of the dried flowers
- Marijuana: weed, herb, pot, grass, bud, ganja, Mary Jane, dope, MJ, doobie, hooch, hash, reefers, 'ouid', etc

Stronger form of marijuana: sinsemilla, concentrated resin, hash oil, waxy budder, shatter, etc



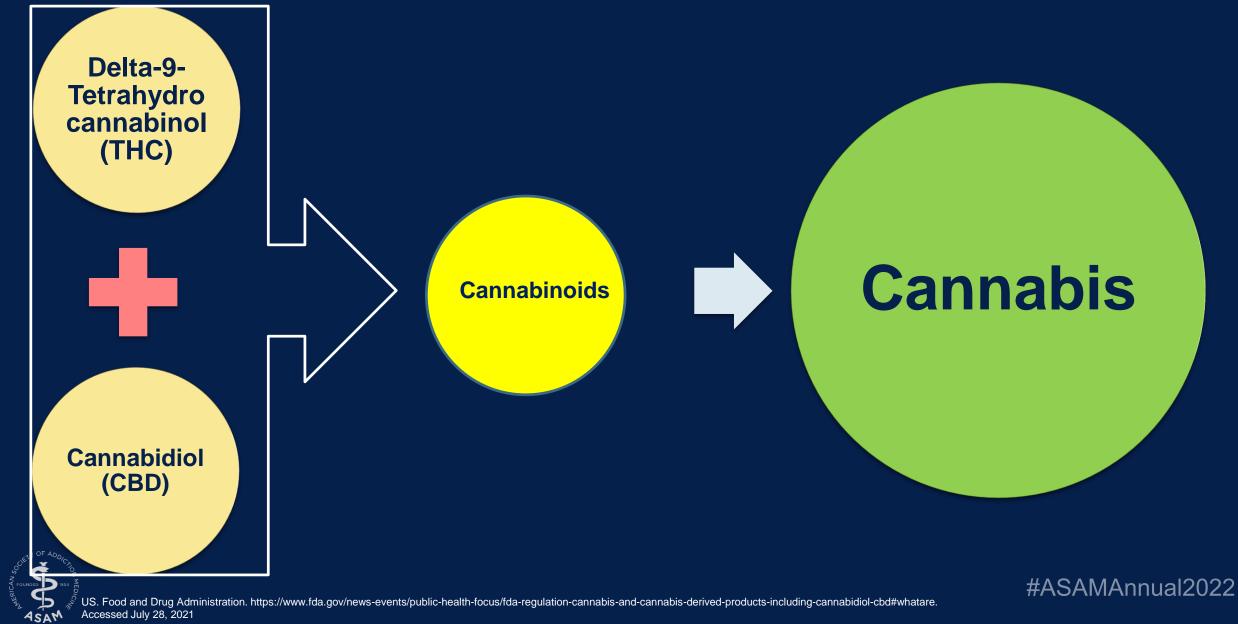


113 active cannabinoids identified in cannabis plant





Cannabis Characterization



Hemp



Lower level of THC (<0.3%), Can have high levels of CBD



US. Food and Drug Administration. https://www.fda.gov/news-events/public-health-focus/fda-regulation-cannabis-and-cannabis-derived-products-including-cannabidiol-cbd. Accessed July 28, 2021



Marijuana Dried flower tops and leaves of cannabis









Flavored Marijuana







https://pevgrow.com/blog/en/the-flavors-of-marijuana/. Accessed July 21, 2021

Flavored Marijuana



Werts M, et al. Flavored Cannabis Product Use Among Adolescents in California. Prev Chronic Dis 2021;18:210026 Google Images. Accessed July 21, 2021 What is considered flavored cannabis may reflect a variety of use patterns:

- Flavored rolling papers, as a blunt within a flavored tobacco cigar
- Cannabis flower that was marketed with flavor descriptors

Flavored Rolling Papers





Google Images. Accessed July 21, 2021



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Brand	General Hydroponics
Product	3.3 x 13.2 x 8.5 inches; 8 Pounds
Dimensions	
Liquid Volume	3 Quarts

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#ASAMAnnual2022



General Hydroponics Flora Series Expert Plus Complete Nutrient Kit - Small - Walmart.com - Walmart.com. Accessed August 6, 2021. www.amazon.com. Accessed August 6, 2021

Table 1. Flavored Product Use Among Past 30-Day Users, by Product (N = 1,423), California High School Students, 2019–2020^a

Product	Cigarettes	Moist Snuff	Cigars	E-Cigarettes	Smoked ^b Cannabis	Vaped ^c Cannabis	
Past 30-day product use, among total sample	32 (2.2)	20 (1.4)	36 (2.5)	302 (21.2)	160 (11.3)	139 (9.8)	
Flavored use, among past 30-day users ^d							
Flavored ^e	14 (43.8)	13 (68.4)	29 (80.6)	225 (75.8)	76 (48.1)	80 (58.0)	
No flavor or tobacco flavor ^f	15 (46.9)	6 (31.6)	7 (19.4)	27 (9.1)	39 (24.7)	24 (17.4)	
Don't know	3 (9.4)	0 (0.0)	0 (0.0)	45 (15.2)	43 (27.2)	34 (24.6)	

Missing data⁹ Table 2. Types of Flavors Used Among Past 30-Day Cannabis Users, California High School Students, 2019–2020

Flavor	No. (Unweighted Percentage) ^a
Smoked cannabis (n = 160)	
No flavor ^b	56 (35.4)
Fruit	48 (30.4)
Candy, dessert, or sweet	38 (24.1)
Alcoholic drink	9 (5.7)
Spice or cinnamon	8 (5.1)
Mint (not menthol)	6 (3.8)
Menthol (cool or frost)	4 (2.5)
Nonalcoholic drink	0 (0.0)
Other flavor	8 (5.1)
Don't know ^c	48 (30.4)
Missing data ^d	2
Vaped cannabis (n = 139)	
Fruit	54 (39.1)
No flavor ^b	43 (31.2)
Candy, dessert, or sweet	38 (27.5)
Alcoholic drink	8 (5.8)
Mint (not menthol)	7 (5.1)
Menthol (cool or frost)	5 (3.6)
Spice or cinnamon	5 (3.6)
Nonalcoholic drink	2 (1.4)
Other flavor	2 (1.4)
Don't know ^c	41 (29.7)
Missing data ^d	1



Hashish

Dried extract resin from cannabis flowers compressed into bricks







CANNABIS CONCENTRATES



CRUMBLE Dried oil with a honeycomb like consistency



BADDER/BUDDER Concentrates whipped under heat to create a cake-batter like texture



SHATTER A translucent, brittle, & often golden to amber colored concentrate made with a solvent



DISTILLATE Refined cannabinoid oil that is typically free of taste, smell & flavor. It is the base of most edibles and vape cartridges



BUBBLE HASH Uses water, ice, and mesh screens to pull out whole trichomes into a pastelike consistency





Stronger form of marijuana: sinsemilla, concentrated resin, hash, oil, wax, budder, shatter, etc #ASAMAnnual2022



CRYSTALLINE Isolated cannabinoids in their pure crystal structure



DRY SIFT Ground cannabis filtered with screens leaving behind complete trichome glands. The end-product is also referred to as kief



ROSIN End product of cannabis flower being squeezed under heat and pressure



Thus://ppaccentral.org/2020/05/13/marijuana-extracts-thc-concentrates/. Accessed July 26, 2021

Hash Oil Viscous mass of concentrated compounds from cannabis extracted with a solvent





Dabbing delivers high concentrations of cannabinoids to the body quickly. The risks of physical dependence and addiction increase with exposure to high concentrations of THC, and higher doses of THC are more likely to quickly generate its desired (and undesired) effects.

Al-Zouabi I, et al. *Subst Abuse Rehabil.* 2018;9: 91–101 https://weedhub.delivery/sf-peninsula/concentrates/ . Acce<u>ssed July 26, 2021</u>

Cannabinoids Added to Foods / Products









Cannabinoids in Beauty Products







Cannabinoids Added to Tabs/Caps





Synthetic Cannabinomimetics

Chemical agents sprayed onto plant matter





Rising Potency

 In the early 1990s, the average THC content in confiscated marijuana samples was less than 4%. In 2018, it was more than 15%.

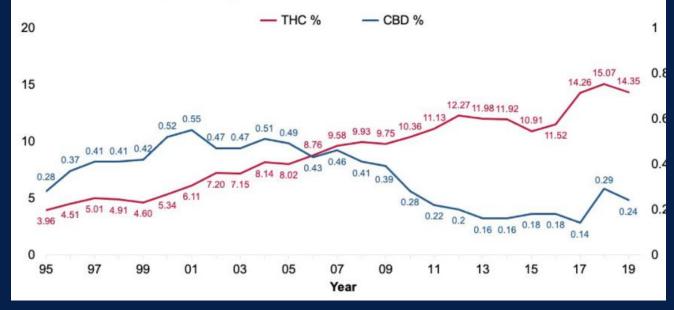


Office of National Drug Control Policy, National Drug Control Strategy Data Supplement 2020, Feb. 2020, p. 95, https://www.whitehouse.gov/wp-content/uploads/2020/02/2020-NDCS-Data-Supplement SAMANUAI2022

National Institute on Drug Abuse. Research Report: Marijuana Research Report. Revised July 2020. Accessed July 16, 2021. https://www.drugabuse.gov/publications/research-reports/marijuana/what-marijuana

Percent of THC and CBD in Cannabis





Delta-9tetrahydrocannabinol (THC) and Cannabidiol (CBD) Potency of Cannabis Samples Seized by the Drug Enforcement Administration (DEA), Percent Averages from 1995-2019.



Regulations & Economics



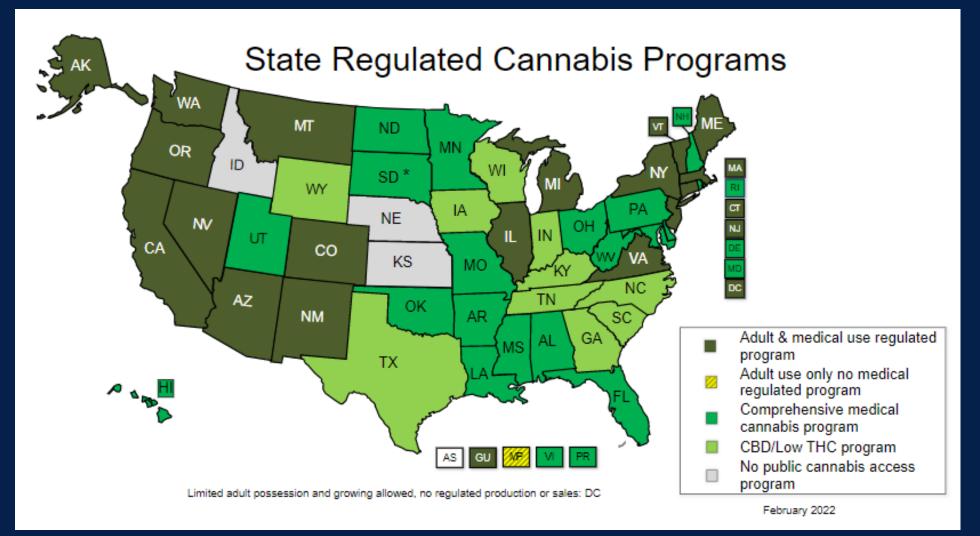


Marijuana Regulation

- Uruguay and Canada now regulate cannabis as a legally available produce for consumption.
- At the United States federal level, Cannabis products are classified as Schedule 1, ie, not currently accepted medical use and regulated as a drug with high potential for abuse



State Regulation of Cannabis





National Conference of State Legislatures and Marijuana Policy Project February 2022 https://www.ncsl.org/research/health/state-medical-marijuana-laws.aspx

Cannabis Taxes and State Revenue

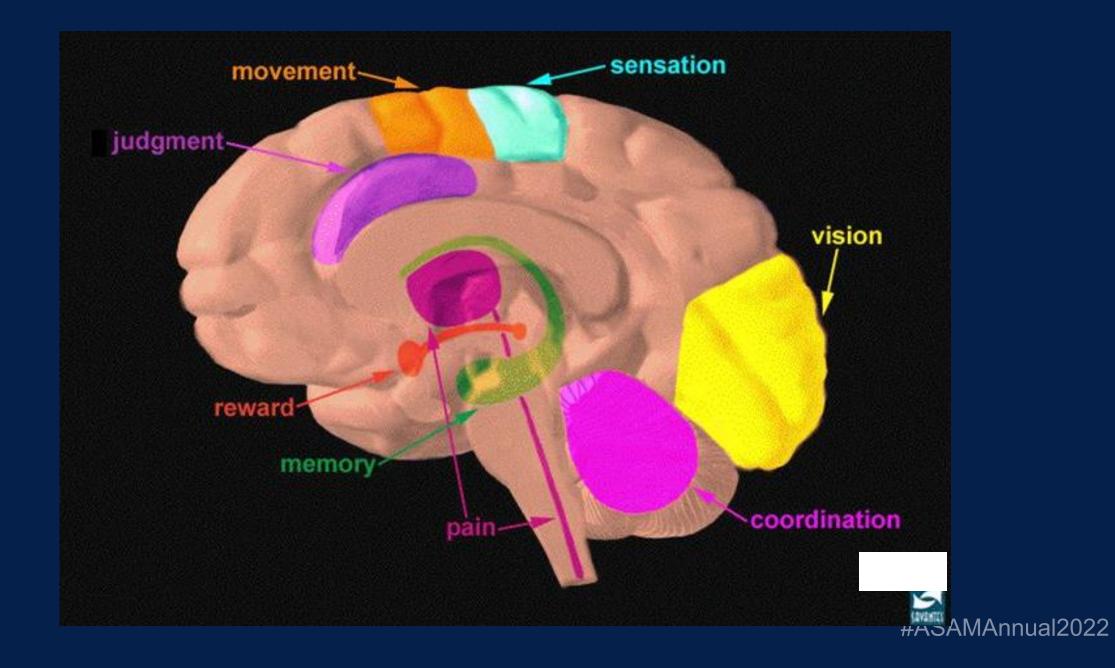
- CO: 2.9 % tax for both medical and recreational sales, but 15% excise tax when marijuana moves from grower to seller
 - In 2019, Colorado collected more than \$302 million in taxes and fees on medical and recreational marijuana. Sales in the state totaled over \$1.7 billion
 - It took the state 3.5 yrs to get to \$500 million mark in total state revenue from marijuana sales
- **NV**: An RCG Economics and Marijuana Policy Group study on Nevada projected:
 - Legalizing recreational marijuana in the state could support over 41,000 jobs until 2024 and generate over \$1.7 billion in labor income.
- CA: The ICF study estimates at least 81,000 additional direct, indirect, and induced jobs in California as a result of legalized marijuana sales. It also projects an increase in total labor income by at least \$3.5 billion.



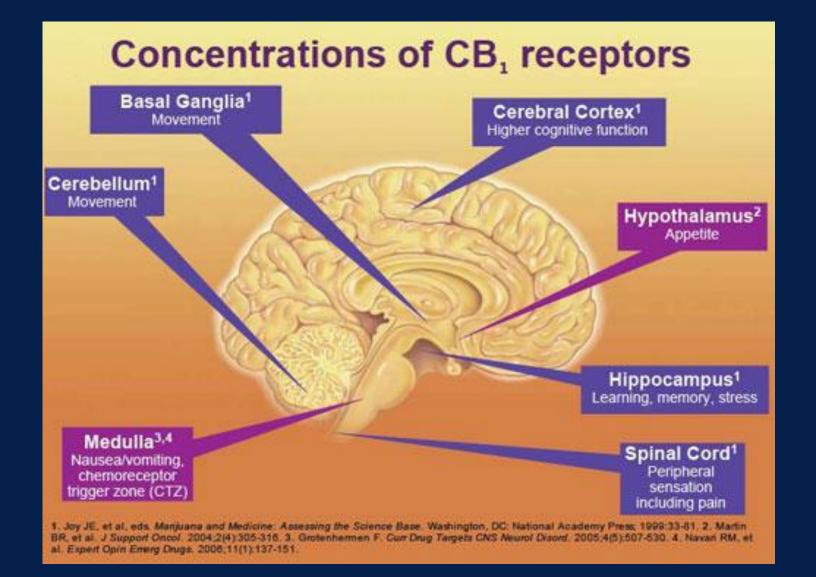
"The Economic Impacts of Marijuana Sales in the State of California" Accessed July 30, 2021 Colorado Department of Revenue. "Marijuana Tax Data." Accessed July 30, 2021 BDS Analytics. "2019 Was a Big Year for Legal Cannabis." Accessed July 30, 2021. Colorado Department of Revenue. "Marijuana Sales Reports." Accessed July 30, 2021. The Economic Benefits of Marijuana Legalization (investopedia.com). Accessed July 30, 2021



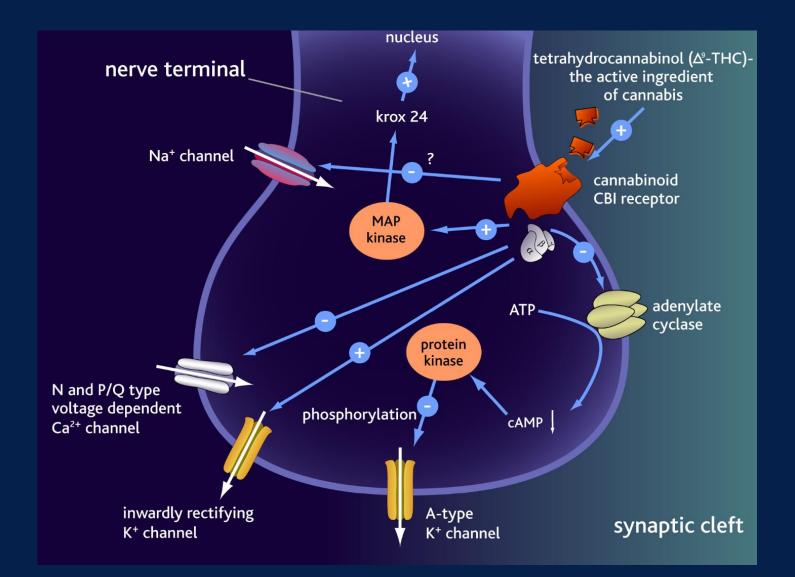














Intoxication Features

Desired Effects

- Euphoria
- Relaxation
- Enhanced sensations
- Slowed time
- Physical Signs
 - Conjunctival injection
 - Dry mouth
 - Raised heart rate & blood pressure
 - Orthostatic hypotension
 - Impaired motor coordination

<u>Undesired Effects</u>

- Social withdrawal
- Impaired judgment
- Short-term memory loss
- Anxiety, Paranoia, Psychosis





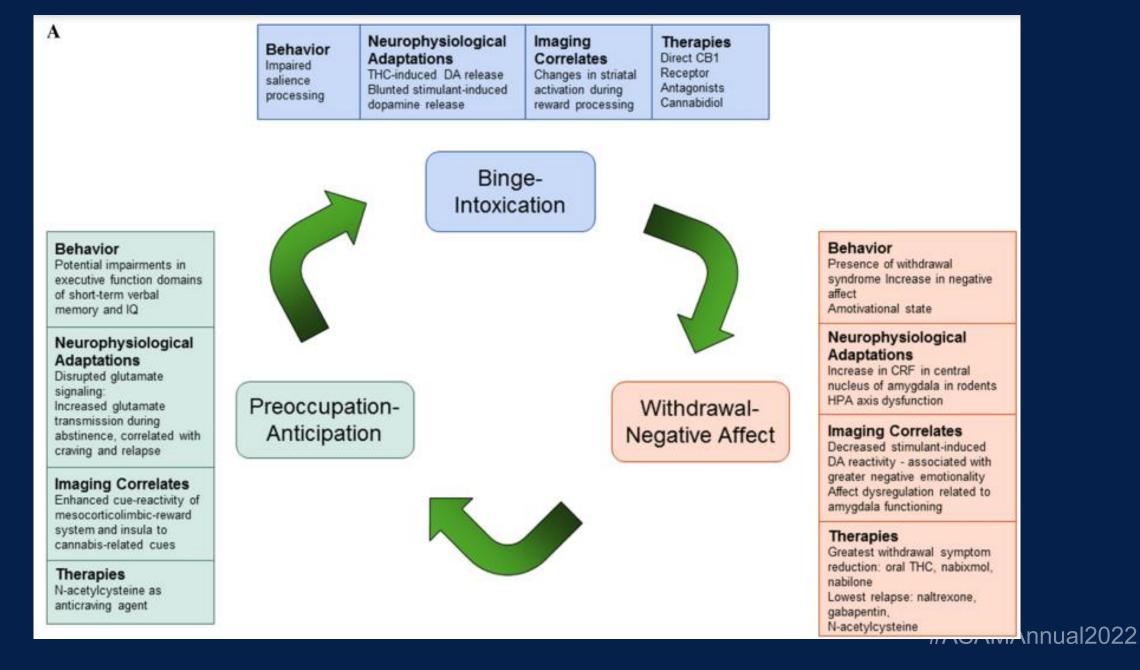
Potential Benefits

- Stimulate appetite severe weight loss in AIDS
- Suppress nausea & vomiting chemotherapy
- Alleviate spasticity multiple sclerosis
- Decrease eye pressure glaucoma
- Suppress seizures epilepsy in children









Cannabis Use Disorder

- Cannabis dependence occurs when the brain adapts to large amounts of the drug by reducing production of and sensitivity to its own endocannabinoid neurotransmitters
- 30% of those who use marijuana may have some degree of Cannabis Use Disorder (CUD)
- People who begin using marijuana before the age of 18 are 4-7x more likely to develop a CUD than adults
- People who use marijuana frequently often report irritability, mood and sleep difficulties, decreased appetite, cravings, restlessness, and/or various forms of physical discomfort that peak within the first week after quitting and last up to 2 weeks



Hasin DS, et al. JAMA Psychiatry. 2015;72(12):1235-1242. doi:10.1001/jamapsychiatry.2015.1858 Morgan CJA, et al. Br J Psychiatry J Ment Sci. 2013;202(5):381-382. doi:10.1192/bjp.bp.112.121178 Budney AJ, Hughes JR. Curr Opin Psychiatry. 2006;19(3):233-238. doi:10.1097/01.yco.0000218592.00689.e5 Gorelick DA, et al. Drug Alcohol Depend. 2012;123(1-3):141-147. doi:10.1016/j.drugalcdep.2011.11.007 National Institute on Drug Abuse. Research Report: Marijuana Research Report. https://www.drugabuse.gov/publications/research-reports/marijuana/what-marijuana. Accessed July 16, 2021.

Cannabis Withdrawal: DSM-5

- Cessation of cannabis use that has been heavy and prolonged (ie, usually daily or almost daily use over a period of at least a few months).
- Three or more of the following signs and symptoms that develop within 1 week after abrupt reduction or the cessation of prolonged cannabis use:
 - 1. Irritability, anger, or aggression
 - 2. Nervousness or anxiety
 - 3. Sleep difficulty (eg, insomnia or vivid dreaming)
 - 4. Decreased appetite or weight loss
 - 5. Restlessness
 - 6. Depressed mood
 - 7. At least one of the following physical symptoms that causes discomfort: abdominal pain, shakiness/tremors, sweating, fever, chills, or headache
- The signs or symptoms cause clinically significant distress or impairment in social, occupational, or other important areas of functioning



First-Episode Psychosis: Cooccurring Conditions



- Cannabis is a risk factor for developing or exacerbating psychosis. Some studies suggested early cannabis use is a causal factor in developing Schizophrenia
- Retroactive study of 404 youths with first break psychosis:
 - 50% had any life-time SUD use
 - 34.7% used Cannabis, vs.
 11% in general population



Di Forti M, et al. Lancet 2019;6(5);427-436 Addington J, et al. Acta Psychiatr Scand. 2007;115(4):304 Brunette MF, et al. Schizophr Res. 2018;194:4 Couwenbergh C, et al. Eur Child Adolesc Psychiatry. 2006 Sep;15(6):319-28 Skehan B, et al. Approach to treating schizophrenia in children and adolescents. Uptodate. Nov. 2020 Arendt M, et al. Br J Psychiatry. 2005;187:510 Moore TH, et al. Lancet. 200;370(9584):319

Cannabinoids with FDA approval





Pharmaceutical Cannabinoids

- Cannabinoids with FDA approval are:
 - Dronabinol (Marinol, Syndros)
 - Nabilone (Cesamet)
 - Cannabidiol (Epidiolex)
- Nabiximols (Sativex) is approved for use in UK, other European markets, and in Canada
 - In Phase III trials in the US for oncology pain
- For non-prescription use, cannabidiol derived from industrial hemp is legal at the federal level, but legality and enforcement varies by state



Dronabinol

- Indications in adults: Anorexia in patients with AIDS, Chemotherapy-induced nausea and vomiting refractory, Obstructive sleep apnea (off-label use for moderate/severe sxs)
- Mechanism of Action: Synthetic delta-9-THC. Activates cannabinoid receptors CB1 and CB2

CB1 produces marijuana like effects on psych and circulation



FDA and Cannabis: Research and Drug Approval Process | FDA. Accessed August 6, 2021 Lexicomp: Dronabinol: Drug Information. Accessed August 8, 2021

Nabilone

- Indications for adults: Nausea and vomiting (refractory) associated with cancer chemotherapy
- Mechanism of Action: Antiemetic activity may be due to effect on cannabinoid receptors (CB1) within the central nervous system



Cannabidiol (Epidiolex)

Indications in adults:

- Seizures associated with Dravet Syndrome
- Seizures associated with Lennox-Gastaut Syndrome
- Seizures associated with Tuberous Sclerosis Complex

Monitoring Parameters:

 ALT/AST/total bilirubin to be checked at baseline, 1mo, 3mo, 6mo, then periodically

Mechanism of Action: unknown



Nabiximols

- Approved in Canada and various European Markets under brand name Sativex. Not approved in the US.
- Approved for Spasticity associated with multiple sclerosis
- Buccal spray

 Mechanism of action: Stimulates cannabinoid receptors CB1 and CB2 in the CNS and dorsal root ganglia as well as other sites in the body. Cannabinoid receptors in the pain pathways of the brain and spinal cord mediate cannabinoid-induced analgesia. Peripheral CB2 receptors modulate immune function through cytokine release



THC & CBD Drugs in the Pipeline



THC & CBD Drug Products in the Pipeline

Over 100 trials:

- Cannabidiol 133mg + Cannabigerol 66mg + Tetrahydrocannabinol 4mg vs.
 Placebo as Adjuvant Treatment in Chronic Migraine
- Oral or Oral spray of THC and CBD
- THC and CBD in osteoarthritis of the knee
- Does Cannabidiol attenuate the acute effects of THC intoxication in individuals diagnosed with Schizophrenia?
- Effect of THC and CBD on Human Episodic Memory Function
- Comparing CBD to THC and Alprazolam
- "Do adolescents and adults differ in their acute response to Cannabis?"

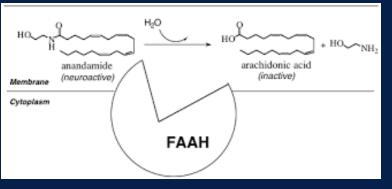


THC & CBD Drug Products in the Pipeline

- Studies in Bipolar, Schizophrenia, Anxiety Disorders, ADHD, PTSD, etc.
- THC & CBD oil in adults with chronic back/neck pain
- THC & CBD in Crohn's Disease
- Effects of THC-free CBD oil on agitation in patients with Alzheimer's Disease
- THC & CBD in Multiple Sclerosis
- THC and CBD combination with Temozolomide and radiotherapy in patients with newly diagnosed Glioblastoma
- A double-blinded, randomized, placebo control experimental study
- Inhaled cannabis for acute migraine treatment
- THC & CBD in advanced cancer and associated cachexia
- Medical Cannabis in patients with spasticity with severe forms of cerebral palsy
- Cannabis for essential tremor



FAAH Inhibitors



- There are trials of an FAAH-Inhibitor PF-04457845 to treat cannabis withdrawal.
 - Study description: Blocking the degradation of Anandamide by fatty acid amide hydrolase following discontinuation of cannabis could reduce withdrawal symptoms by increasing the brain's capacity to make its own endocannabinoids.

 In a Phase II placebo-controlled trial involving 46 male participants, there was reduced withdrawal symptoms, reduced self-reported cannabis use, and reduced urine THC concentration over a four-week treatment trial.



D'Souza DC, Cortes-Briones J, Creatura G, Bluez G, Thurnauer H, Deaso E, Bielen K, Surti T, Radhakrishnan R, Gupta A, Gupta S, Cahill J, Sherif MA, Makriyannis A, Morgan PT, Ranganathan M, Skosnik PD. Efficacy and safety of a fatty acid amide hydrolase inhibitor (PF-04457845) in the treatment of cannabis withdrawal and dependence in men: a double-blind, placebo-controlled, parallel group, phase 2a single-site randomised controlled trial. Lancet Psychiatry. 2019 Jan;6(1):35-45. doi: 10.1016/S2215-0366(18)30427-9. Epub 2018 Dec 6. PMID: 30528676.

Psychotherapy & Cannabis Use Disorder (CUD)

Evidenced-based psychotherapies demonstrated effectiveness in reducing frequency and quantity of cannabis use.

- Motivational Enhancement Treatment (MET): Effective at engaging people who are ambivalent about treatment
- Cognitive Behavioral Therapy (CBT): Enhance abstinence following treatment (preventing relapse)
- Contingency Management (CM): Lead to longer periods of abstinence during treatment by incentivizing abstinence
 - Including financial based incentives or vouchers

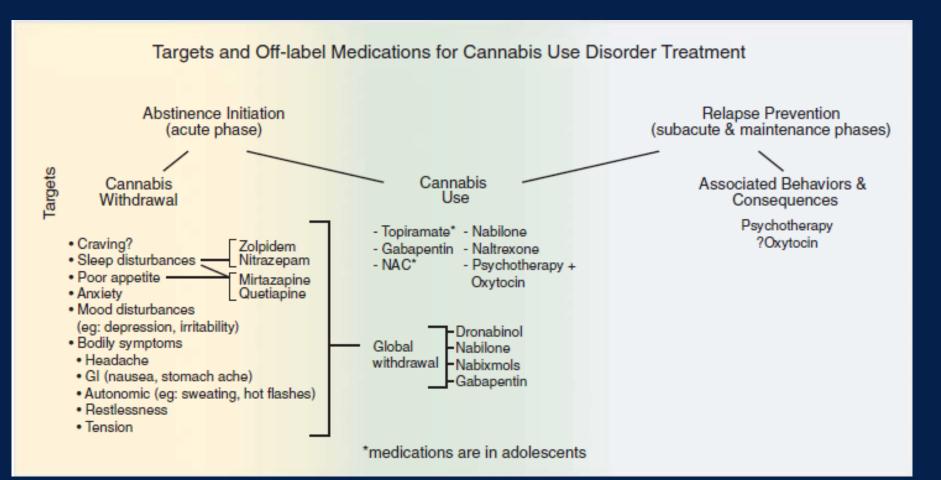
Access to psychotherapy and compliance are main issues



Brezing CA, et al. Am Col of Neuropsychopharm. 2018(43),173-194 Budney AJ, et al. J Consult Cln Psychol 2006;74:307-316

To date, there are no FDA-approved medication treatments for CUD







- Mirtazepine and Quetiapine reduce some symptoms of cannabis withdrawal, though these medications do not affect cannabis use
- Zolpidem and possibly benzodiazepines, like nitrazepam, may be useful in short term reductiosn in sleep disturbances as a result of cannabis withdrawal in adults
- Oral THC, such nabixmols, and nabilone, have evidence for targeting global cannabis withdrawal
- Topiramate (though poorly tolerated in adolescents), Gabapentin, NAC, and Naltrexone have demonstrated reductions in cannabis use and extension in abstinence in small (eg Gabapentin) or age-specific patient samples (eg, NAC in adolescents) but NAC has not yet shown efficacy in larger trials involving adults



Dronabinol: Oral THC

- Has FDA indications for the treatment of 1) anorexia associated with AIDS and 2) second line treatment for nausea/vomiting associated with cancer chemotherapy (20mg/daily)
- At dose 80mg/daily, decrease withdrawal symptoms, including craving, appetite suppression, mood disturbance
- Failed to separate from placebo for cannabis abstinence



Haney M, et al. Psychopharmacology. 2008(197): 157-168 Brezing CA, et al. Am Col of Neuropsychopharm. 2018(43),173-194

- GABA-A agonist sleep agents and other medications with GABA-A activity, such as Gabapentin and Topiramate, show promise in the treatment of CUD to target difficulties with sleep as a result of withdrawal and/or maintenance treatment of CUD by decreasing cannabis use, respectively.
- Larger, fully powered placebo-controlled trials need to be completed



Rimonabant



Cannabinoid antagonist with inverse agonist properties.

- Removed from the global market, and no longer under development following two deaths by suicide were reported in patients taking Rimonabant for obesity.
- Associated with dangerous psychological side effects, including anxiety, depression, and suicidality (Sam, 2011).



am AH, Salem V, Ghatei MA. Rimonabant: From RIO to Ban. J Obes. 2011;2011:432607. doi: 10.1155/2011/432607. Epub 2011 Jul 6. PMID: 21773005; PMCID: PMC3136184. tp://www.ncbi.nlm.nih.gov/pmc/articles/pmid/21773005

Cannabidiol Versus Risperidone For Recent-Onset Psychosis with Cannabis Use

Ongoing study: N=130 patients. Age: 18-64.

- Recent diagnosis of psychosis, comorbid cannabis use and currently not treated with antipsychotics.
- Randomized to 7 weeks of treatment. Either Cannabidiol (CBD) 300mg BID or Risperidone 2mg BID.
- Primary measures: cessation of cannabis use and psychotic symptom severity
- Outcomes: PENDING



Final Takeaways/Summary

- There is increasing availability of regulated cannabis in a widely proliferating variety of formats across the United States.
- Cannabis regulations vary from state to state.
- Chronic cannabis use is associated with cannabis use disorder and withdrawal, and cannabis use increased the risk for developing a psychotic disorder.
- Psychotherapy is a mainstay of CUD treatment, and there are medications which can help patients, off-label, with cannabis withdrawal and cannabis use disorder



Questions?

Thank you!

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