What is Already Available in Utah

-HB105: Allows kids under 18 who have intractable seizures from epilepsy to participate in a U of U study using Cannabidiol (CBD oil).

-SCR 11: Asked researchers at U of U, USTAR, U of U Med, Huntsman Cancer Institute, and the VA Medical Center to collaborate on a formal study of the medical benefits of Marijuana and report back to the Legislature.

-HB130: Allows IRB approved studies and possession of cannabis and cannabis products if a person is participating in a study.

-HB195: Allows the terminally ill, life expectancy of six months or less, to get cannabis-based products in medicinal format.

-HB197: Allows the Dept. of Agriculture to produce the cannabis-based medicines for HB195 and for any studies done by institutions and IRBs in Utah.

-SB130: Allows the cultivation, and certification of cannabidiol (CBD oil) by the Utah Dept. Of Ag. and the dispensing of that CBD oil. Including pharmacies if the DEA gives a waiver. The CBD oil must contain no more than 1/10 THC to CBD in the oil.

FDA-APROVED MARIJUANA PRODUCTS

Marinol, Syndros (Dronabinol)

Cannabinoid product for adults for the treatment of "anorexia associated weight loss in patients with AIDS; nausea and vomiting associated with cancer chemotherapy in people who have failed to respond adequately to conventional antiemetic treatments.

Cesamet (Nabilone)

For "the treatment of nausea and vomiting associated with cancer chemotherapy in patients who have failed to respond adequately to conventional antiemetic treatments."

Epidiolex (Cannabidiol - CBD oil)

An oral solution of cannabidiol (99% CBD and less than 0.1% THC) approved June 2018 initially, for severe, orphan, early-onset, treatment-resistant epilepsy syndromes including Dravet syndrome, Lennox-Gastaut syndrome, Tuberous Sclerosis Complex and Infantile spasms.

In Development

Sativex (Nabiximols)

Oromucosal spray of CBD/THC in a 1:1 ratio. Sativex for MS and cancer pain. Currently awaiting FDA approval.

CR845, DR701, ZYN001 & 02

Drugs in FDA process.



Cannabis Educational Information & Resources

Is Marijuana Medicine?

The FDA has not recognized the marijuana plant as medicine. However, there are two main cannabinoids from the plant that are of medical interest – CBD oil and THC.

The FDA has approved medicines containing these two cannabinoids.

(https://www.drugabuse.gov/publications/drugfacts/marij uana-medicine) NIDA. Rev 4/2017



What is Cannabis?

Cannabis is derived from the cannabis sativa plant. It is used in three main forms: marijuana, hashish and hash oil. It is made from the flowers and leaves of the plant.

(http://learnaboutmarijuanawa.org/factsheets/whatiscann abis.htm)

Facts

Marijuana is Addictive

Neuroscientists have stated that Marijuana affects the brain's reward center the same way as other known drugs of addiction, so it is important to be careful with recommending marijuana.

(https://www.csam-asam.org/marijuanas-addictive-potential-general-public)

Marijuana's Impact on Mental Health

Marijuana use has been linked to the following mental health conditions and more:

- Depression and Anxiety
- Psychotic episodes
- Schizophrenia

(http://learnaboutmarijuanawa.org/factsheets/atrisk.htm)

Secondhand Exposure to Marijuana Smoke

Recent studies suggest that secondhand cannabis smoke impacts arteries in a comparable way to tobacco smoke exposure. Secondhand smoke is also carcinogenic, according to the WHO and the California Office of Environmental Health and Hazard Assessment, and it cannot be eliminated through air ventilation systems or cleaning technologies.

 $\underline{(http://LearnAboutMarijuanaWA.org/factsheets/secondhand.htm)}$

Facts

Is Marijuana a substitute for Opioids – conflicting studies

Some studies show increased use of opioids and death and other studies show no correlation or decreased use in some instances – We need more research into pros and cons.

(https://doi.org/10.1176/appi.ajp.2017.17040413)

(https://www.ncbi.nlm.nih.gov/pubmed/29599661)

(https://jamanetwork.com/journals/jamainternalmedicine/article-abstract/2676999)

Marijuana and Other Drugs

2016 National survey of Drug Use and Health (NSDUH)

Estimated that about half of people age 12 and over currently drink alcohol and about 9% currently use marijuana. Among people who currently drink alcohol, estimates of co-use range from 10-27% and among people with an addiction to alcohol (AUD), estimates of co-use range from 23-58%.

Co-use may be higher for key populations, specifically, young adults. More than 20% of people aged 18-29 currently use marijuana, and estimates of co-use range is from 50-70%

(http://learnaboutmarijuanawa.org/factsheets/alcohol.htm)

For more cannabis information resources go to www.utahmed.org/cannabis

Facts

Marijuana Use: What do we Really Know?

Marijuana is the most widely used illegal substance in America. There is a mismatch between demand for accurate information and availability of scientific knowledge that has created exaggerations and complacent dismissals of the short and long-term risks of using marijuana.

(http://adai.uw.edu/pubs/pdf/2015mjwhatdoweknow.pdf)

Marijuana Affects Pregnant Women & Children

THC is known to pass from the mother to the developing fetus through the placenta. Some associations have been found between Marijuana use during pregnancy and future developmental disorders in children. ACOG recommends not using marijuana when pregnant.

(http://learnaboutmarijuanawa.org/factsheets/reproduction.htm)

Marijuana in the Workplace

Marijuana can cause a greater risk of an accident occurring due to the poor performance of even the most simple manual tasks. Regular intake of Marijuana can lead to loss of energy and interest in work.

http://learnaboutmarijuanawa.org/factsheets/workplace.htm