Medical Cannabis Use in Patients Attending Rheumatology Clinics in Ontario

Carter Thorne (Southlake Regional Health Centre, Newmarket); Edward Keystone (University of Toronto, Toronto); Patricia Ciaschini (Group Health Centre, Sault Ste. Marie); Vandana Ahluwalia (William Osler Health System, Ontario Rheumatology Association, Brampton); Arthur Lau (McMaster University, St. Joseph's Healthcare, Hamilton); Julie Brophy (Guelph Medical Place, Toronto); Viktoria Pavlova (McMaster University, Hamilton); Gerald Major (Toronto); Emmanouil Rampakakis (JSS Medical Research Inc, Montreal); Xiuying Li (University Health Network, Toronto); Angela Cesta (University Health Network, Toronto); Mohammad Movahedi (University Health Network, Toronto); Carol Mously (University Health Network, Toronto); Claire Bombardier (University of Toronto, Toronto)

Objectives: To determine the prevalence of medical cannabis use and the symptoms being treated in patients attending rheumatology clinics in Ontario.

Methods: Eight rheumatology clinics, currently participating in the Ontario Best Practices Research Initiative (OBRI), each recruited approximately 100 consecutive patients to complete a medical cannabis survey. Regardless of their diagnosis, patients were eligible to participate if they were 18 years of age or older and English speaking. The Student's t-test and Chi-square test were used to compare medical cannabis users (currently or within the past two years) to patients who reported never having used medical cannabis.

Results: A total of 858 surveys were completed. 179 (21%) patients reported ever medical cannabis use of whom 163 (19%; 95% CI: 16.5%-21.8%) were either currently using medical cannabis or had used it within the past two years. No significant differences were observed between medical cannabis users and non-users in mean (SD) age (56.7 (14.2) vs 59.5 (15.3)) and gender (% female) (72.8% vs 71.0%). The most common rheumatologist assigned diagnoses amongst users were osteoarthritis (40.5%) and rheumatoid arthritis (37.4%). Compared to the never used group, patients reporting medical cannabis use were more likely to be currently taking opioids (16.0% vs 7.2%, p=0.0005) and anti-depressants (25.8% vs 13.5%, p=0.0001), have psychiatric (23.9% vs 10.9%, p<0.0001) and gastrointestinal disorders (30.7% vs 21.2%, p=0.01), have used cannabis for recreational purposes (60.7% vs 31.8%, p<0.0001), and be at least somewhat knowledgeable of medical cannabis (81% vs 25.6%, p<0.0001). Mean (SD) physician and patient global scores (0-10 VAS) were higher in medical cannabis users (2.9 (1.8) vs 2.1 (2.0), and 6.0 (2.6) vs 4.2 (3.0), p<0.0001) as were mean (SD) pain scores (0-10 VAS) (6.2 (2.5) vs 4.7 (3.0), p<0.0001). Amongst medical cannabis users, pain was the most common symptom being treated (73.0%), followed by anxiety (49%) and difficulty sleeping (49%). Overall, less than half the users (44.8%) reported medical cannabis to be effective or very effective in treating their symptoms. When asked whether changes had been made to their prescribed medications while using medical cannabis, 9.2% reported that they had their prescribed medications lowered and 6.1% that they had their prescribed medications stopped.

Conclusion: Based on our findings, it is not uncommon for patients being seen by rheumatologists to use medical cannabis and most are using it to reduce their pain symptoms. Less than half of the patients reporting medical cannabis use found it to be effective in relieving their symptoms and only 15% reported changes to their prescribed medications.