The Journal of American Medical Association recently published a meta-analysis and review of studies concerning medicinal cannabis use. This study was introduced to the Subcommittee on March 13th by Senator Kimpson. Each individual study of interest is summarized below with links to the full research paper itself.

**Analysis on Adolescent Use of Medicinal Cannabis**

This longitudinal study took from under the age of 18-32. The meta-analysis reviewed 11 studies of 23,317 individuals to come to the conclusion that preadolescent and adolescent cannabis use is associated with an ***increased*** risk of developing depression or suicidality in young adulthood. The study found no association with anxiety as defined by DSM IV criteria.

**Cancer**

Link: <https://www.ncbi.nlm.nih.gov/pubmed/29482741>

This study stated that Cannabis as a palliative treatment for cancer patients seems to be well tolerated, effective, and safe option to help patients cope with the ***malignancy*** related symptoms.

**Positive HIV Status**

Link: <https://www.ncbi.nlm.nih.gov/pubmed/29194121>

The study concluded that components of Cannabis, including THC, may decelerate peripheral monocyte processes that are implicated in HIV-associated neuroinflammation. As well, the study finds that cannabinoids help promote antiviral effects that target the HIV virus.

**Amyotrophic Lateral Sclerosis (ALS) (Lou Gehrig ’s disease)**

Link: <https://www.ncbi.nlm.nih.gov/pubmed/28197175>

This study found that cannabinoids are helpful in delaying ALS progression and prolong survival. However, most of the specifics into the neurodegenerative effects of ALS and how medicinal cannabis would help these symptoms, were performed in animal models. Much more research is needed into clinical trials before this evidence can be highly supported.

**Parkinson’s**

Link: <https://www.ncbi.nlm.nih.gov/pubmed/27723182>

Medicinal Cannabis improved motor scores and pain symptoms in Parkinson’s patients, together with a dissociate effect on heat and cold pain thresholds. These therefore modulate Peripheral and Central Nervous System Pathways.

**Multiple Sclerosis (MS)**

Link: <https://www.ncbi.nlm.nih.gov/pubmed/22791906>

The study showed that Cannabis extract was superior to the placebo in treatment of muscle stiffness in MS patients. Adverse events in participants who were treated with cannabis were consistent with the known side effects of cannabinoids.

**Epilepsy**

Link: <https://www.ncbi.nlm.nih.gov/pubmed/27568641>

Patients with uncontrolled epilepsy or nonepileptic events had a high rate of cannabis use with associated perceived improvements in seizure control, stress, sleep, and drug side effects.

**Inflammatory Bowel Disease**

Link: <https://www.ncbi.nlm.nih.gov/pubmed/23648372>

An eight week 11 patient trial displayed that THC-rich cannabis produced significant clinical, steroid free benefits to 10 of the 11 patients with active Crohn’s disease (a specific IBD). These patients did not display side effects however larger studies with more subjects need to take place.