



# **Cannabis in the Commonwealth**

The Basics of Caring for  
Medical Cannabis Patients

Amber Cann, PharmD, MBA, MS



[hello@ampercann.com](mailto:hello@ampercann.com)  
[ampercann.com](http://ampercann.com)

# Session Objectives

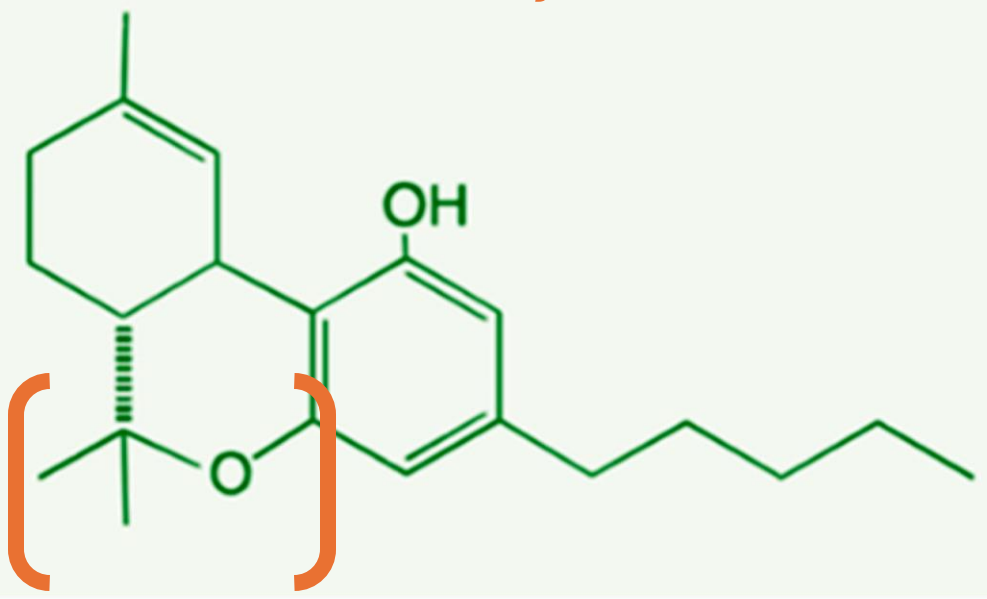
- Describe the endocannabinoid system and how exogenous cannabinoids interact with it to produce pharmaceutical effects.
- Identify the conditions for which cannabis may be recommended in Kentucky.
- Summarize the adverse effects, drug interactions, and contraindications of cannabis-based medicines.



# Major Cannabinoids: THC and CBD

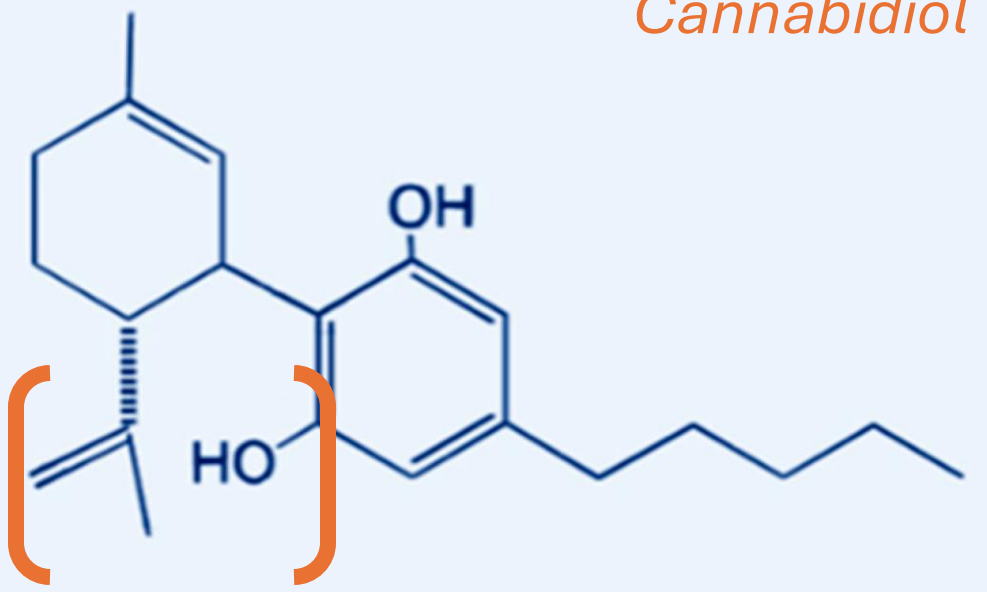
THC

*Tetrahydrocannabinol*



CBD

*Cannabidiol*



Small differences in the chemical structures of THC and CBD change the receptors to which these compounds bind.

# Cannabinoids on the Market

## Dronabinol

Synthetic THC capsules

*MARINOL*

## Nabilone

Synthetic THC analog capsules

*CESAMET*

## Nabixomols

Plant-derived 1:1 THC:CBD  
oral mucosal spray

*SATIVA*

## Cannabidiol

Plant-derived oral solution

*EPIDIOLEX*

# Endocannabinoid System

The ECS is a complex regulatory system that works alongside hormone and neurotransmitter signaling in *every* body system.

# Endocannabinoid System

## CB1 Receptors

- Brain/CNS
- Reproductive system
- Cardiovascular system
- Skeletal muscle
- GI tract and liver
- Adipose
- Nociceptive neurons

## CB2 Receptors

- WBCs
- Tonsils, spleen, thymus
- Brain/CNS

The ECS is a complex regulatory system that works alongside hormone and neurotransmitter signaling in every body system.

# Endocannabinoid System

## CB1 Receptors

Psychotropic effects  
Appetite  
Pain perception

## CB2 Receptors

Immune response  
Inflammation



# Routes of Administration

## Oral

**Tinctures** - moderate onset time

**Gummies** - slow onset time

*Active metabolite after 1<sup>st</sup> pass metabolism*

*Suited for long-acting relief of chronic symptoms*

## Inhalation

**Raw plant material** - fast onset

**Resins/extracts** – high THC content

*Ideal for immediate relief of acute symptoms*

# Routes of Administration

## Topical

Currently no reliable vehicle to deliver drug across multiple layers of skin for systemic absorption

## Ophthalmic

Similar barriers to topical delivery  
*Nanoparticle formulations in development*

# Chronic Pain

is the *most* common condition for which cannabis is recommended, and the most common condition for which patients report using cannabis.

# Cancer Pain

is the most common symptom reported among patients in palliative care.

# Chronic / Cancer Pain

*ECS modulates pain signaling in the CNS in several ways.*

- Blocks ascending pain signals to the brain
- Reduces stimulation of descending pain signals from the periphery
- Induces analgesic transmitter release

# Qualifying Conditions in KY

- **Cancer** of any stage or type
- Chronic, severe, intractable, OR debilitating **pain**
- **Epilepsy** or any other intractable seizure disorder
- Chronic **nausea** or cyclical vomiting syndrome
- **PTSD**

*Multiple* studies have demonstrated that adding cannabis-based medicine early in a chemotherapy regimen:

- Lowers opioid dose needed to manage pain
- Minimizes CINV
- Lowers pre-treatment anxiety

**Don't wait! Cannabis is not a 'last resort.'**



# Adverse Effects

Sedation (additive with CNS depressants)

Diminished motor coordination

Increased appetite

Nausea (at higher THC doses)

Paranoia/agitation (at higher THC doses)

Tachycardia

Brief spikes in blood pressure





**Higher THC ->  
increased AEs**

Balancing the CBD:THC ratio in a formulation may mitigate AEs.

Start new patients on 1:1 low THC-dose preparation, then titrate frequency of dosing.

# Pregnancy & Lactation

**The current consensus is cannabis should be completely avoided during pregnancy & lactation.**

The ECS forms in the early stages of fetal development, and neuronal connections flourish during infancy.

# Drug Interactions

CYP enzymes are responsible for metabolizing 60-80% of all pharmaceuticals.

Substances can inhibit, induce, competitively bind, or change the shape of CYP enzymes, potentially changing action of the drugs they metabolize.

- **Inhibitors** delay the metabolism of the target drug
- **Inducers** enhance the action of the enzyme on the target drug, hastening its metabolism

# Drug Interactions

To anticipate potential risks:

1. Check a OTC/Rx drug monograph for CYP enzyme info
2. Cross reference with the CYP enzymes affected by cannabinoids

Most studies on cannabis CYP interactions are pre-clinical (non-human models), so data is imperfect.

The route of administration significantly changes the likelihood of interactions.

# CYP Drug Interactions

1A

THC inhibits when inhaled

CBD inhibits when taken before another 1A drug

\*tobacco, caffeine, melatonin

2C

High polymorphism contributes to varied function

THC and CBD inhibit

\*anti-epileptics, NSAIDs, diazepam, warfarin, clopidogrel

3A

Cannabis interactions are substrate specific – may inhibit or induce

Most likely when CBD/THC is taken along with another drug

\*approx. 30% of all meds

# CYP Drug Interactions

2D6

THC/CBD are anxiolytics, often given alongside other psych meds

CBD can inhibit this enzyme at high doses

\*opiates, antipsychotics, TCAs, SSRIs, SNRIs, tamoxifen

Terpenes

Limited data suggest some naturally-occurring terpenes have the ability to modulate effect and enzyme activity

Entourage

Cannabinoids interact with each other, contributing to the "entourage" phenomenon

Route of administration will also change the likelihood and/or potency of interactions.



~~Indica~~

~~Sativa~~

Plants found growing wild may be genetically distinct, but cannabis sold for consumption is a result of decades of hybridization.

**SATIVA** VS **INDICA**

**THE LOOK**

long  
thin  
light green

fluffy

short  
wide  
dark green

dense

**THE PLANT**

1.2-2M

2-3M

**FLOWERING TIME**

**10-16 WEEKS**

**INDOOR** **OUTDOOR**

0.7-.15M

1-2M

**FLOWERING TIME**

**6-8 WEEKS**

**INDOOR** **OUTDOOR**



# Strain Names are Confusing



Hybrid

**Blue Dream**



Indica

**Lemon Cherry Gelato**



Sativa

**Horchata**



Hybrid

**OG Kush**



Hybrid

**22 Red**



Hybrid

**24K Blue Dream**



Hybrid

**24K Gold**



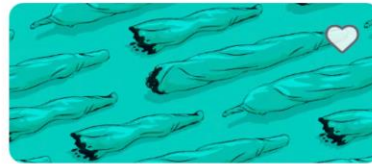
Hybrid

**2 Scoops**



Hybrid

**303 OG Kush**



Hybrid

**309 Og**



Hybrid

**33 Bananas**



Hybrid

**33 Mints**

<https://weedmaps.com/strains>

# Chemovars & Chemotypes

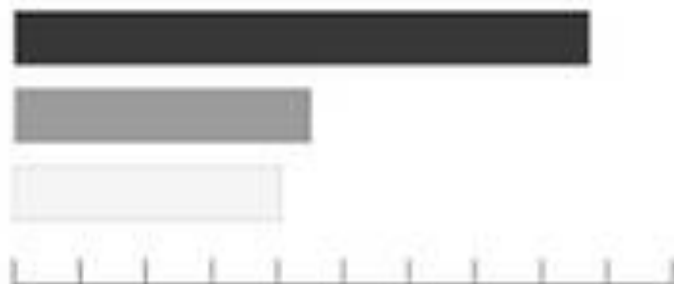
- Cannabis is a diverse crop
- Over 100 aromatic and psychoactive compounds
- The cannabinoid and terpene mix creates a distinct *experience*
- Patients and cannabis clinicians need detailed info about a product's components
- Dispensaries and producers should make COAs readily accessible

## GENERAL

Cannabinoids: 26.13%

Terpenoids: 1.34%

Moisture: 12.1%



Scan this QR code  
for the complete test  
results from DC Labs

Class: LCU1G

Sample Type: Flower

Business Name: Brand XYZ  
Cannabis

License Number: 100000N000

Sample ID: 123456N789

Date Collected: 01/10/2021

Date Issued: 01/12/2021

## CANNABINOIDS

Total THCA 25.0  
Total CBGA 1.0



Ratio of top two cannabinoids

Cannabinoids	Weight %
THCA	24.2%
CBGA	0.9%
THC	0.5%
THCVA	0.1%
CBG	0.1%
CBDA	0.1%



## FLAVOR



## EFFECTS\*



## AROMA



■ Aroma ■ Flavor

## ENTOURAGE

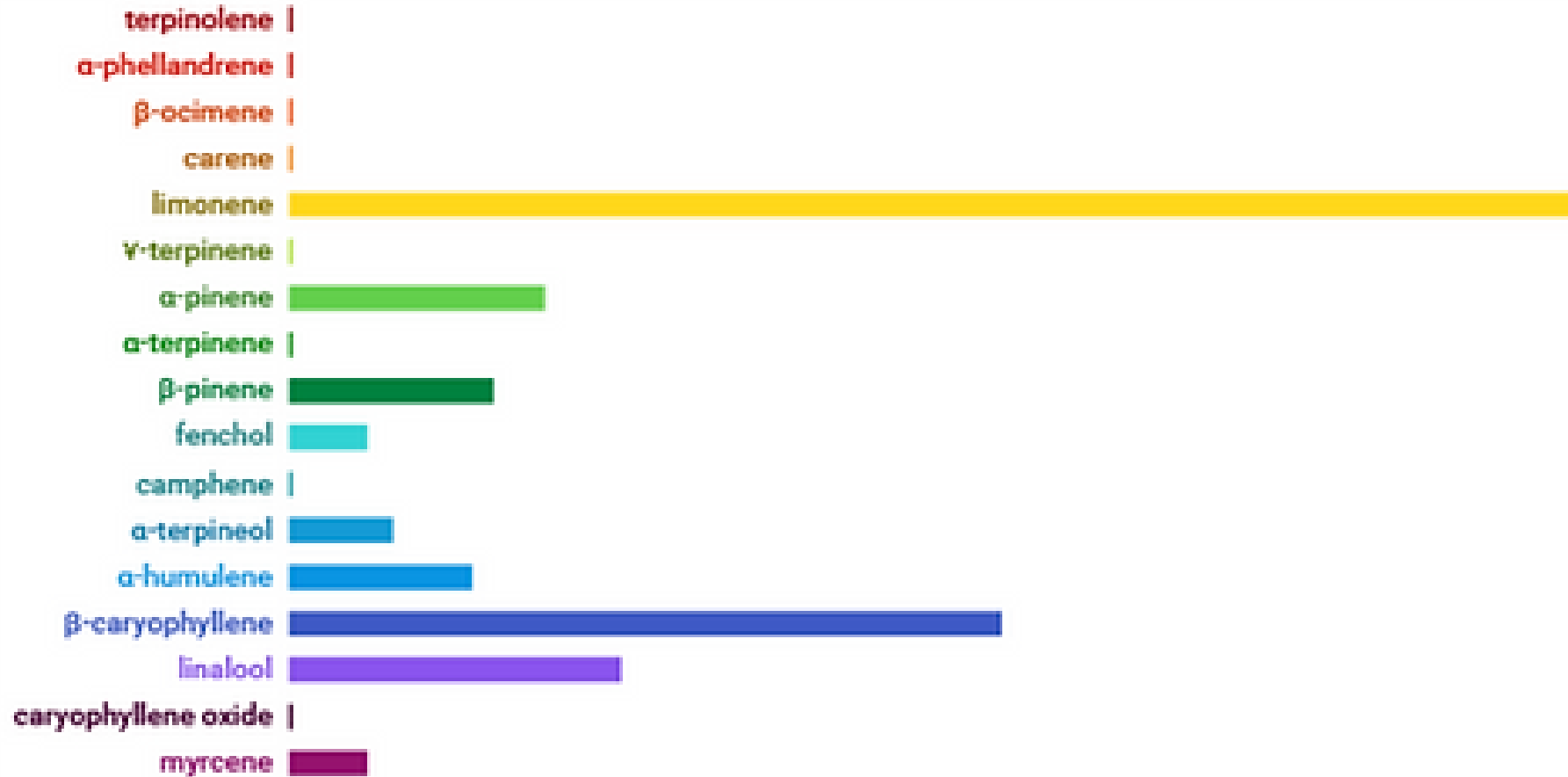


Calm

Inspiration

\*May vary with individual, dose, and time after administration.

## PHYTOPRINT®





**Company Name**  
1234 Hemp Lane #10  
Fort Lauderdale, FL 33062  
(999) 999-9999  
client email

# Certificate Of Analysis

ISO/IEC 17025:2017 Accreditation #103104



**Order #:** 99999  
**Order Name:** FT - FLOWER 40 - DRIFT INDICA - 3.5G LAC  
**Batch #:** 999999999  
**Received:** 07/20/2020  
**Complete:** 08/24/2020

**Sample Analysis**  
**Date/Time:** 07/22/2020 09:53:50  
**Tech:** Jazmine Adams (2332)  
**SOP:** 400.01  
**Final weight/volume:** 0.19500/40

**Sample Prep**  
**Date/Time:** 07/25/2020 11:30:46  
**Tech:** putri prawita (3359)  
**SOP:** 400.01

**Internal Batch** 99999  
**Batch Number** 99999  
**Date:** 07/25/2020

## CANNABINOID PROFILE:

Shimadzu Integrated UPLC-PDA

**THC Label Claim**  
17%

**CBD Label Claim**  
1%

Cannabinoids	LOQ	Dilution	12% moisture	Actual %	Dry weight(%)	mg/g
D9-THC	10 PPM	400	0.484%	0.492%	0.550%	4.921
THCA	10 PPM	400	11.099%	11.283%	12.613%	112.834
CBD	10 PPM	400	N/D	N/D	N/D	N/D
CBDA	20 PPM	400	0.033%	0.034%	0.038%	0.340
CBDV	20 PPM	400	N/D	N/D	N/D	N/D
CBC	10 PPM	400	0.022%	0.022%	0.025%	0.223
CBN	10 PPM	400	N/D	N/D	N/D	N/D
CBG	10 PPM	400	0.022%	0.022%	0.025%	0.220
CBGA	20 PPM	400	0.263%	0.268%	0.299%	2.676
D8-THC	10 PPM	400	0.057%	0.057%	0.064%	0.575
THCV	10 PPM	400	N/D	N/D	N/D	N/D
TOTAL THC					10.387%	103.876
TOTAL CBD					0.030%	0.298
TOTAL CANNABINOIDS					12.178%	121.789

**10.387%**  
Total THC

**38.90%**  
THC Label Accuracy %

**0.030%**  
Total CBD

**97.00%**  
CBD Label Accuracy %

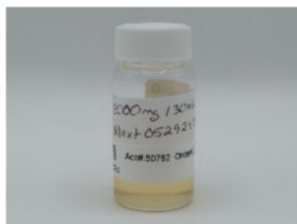
Abhaya Holding Co.

PO Box 3052  
Clarksville, IN 47130  
abhayaholdingco@gmail.com  
502-640-3439

Sample: 06-04-2024-50782

Sample Received: 06/04/2024;  
Report Created: 06/05/2024; Expires: 06/05/2025

3000mg / 30mL FSD Mext 05292436-01  
Ingestible, Tincture



0.019 %

Total THC

0.019 %

Δ-9 THC

10.221 %

Total Cannabinoids

10.115 %

Total CBD

## Cannabinoids

(Testing Method: HPLC, CON-P-3000)  
Date Tested: 06/04/2024

Complete

Analyte	LOD	LOQ	Mass	Mass	
	%	%	%	mg/g	
Δ-8-Tetrahydrocannabinol (Δ-8 THC)	0.0099	0.0148	0.032	0.317	
Δ-9-Tetrahydrocannabinol (Δ-9 THC)	0.0099	0.0148	0.019	0.191	
Δ-9-Tetrahydrocannabinolic Acid (THCA-A)	0.0099	0.0148	ND	ND	
Δ-9-Tetrahydrocannabinophorol (Δ-9-THCP)	0.0099	0.0148	ND	ND	
Δ-9-Tetrahydrocannabivarin (Δ-9-THCV)	0.0099	0.0148	ND	ND	
Δ-9-Tetrahydrocannabivarinic Acid (Δ-9-THCVA)	0.0099	0.0148	ND	ND	
R-Δ-10-Tetrahydrocannabinol (R-Δ-10-THC)	0.0099	0.0148	ND	ND	
S-Δ-10-Tetrahydrocannabinol (S-Δ-10-THC)	0.0099	0.0148	ND	ND	
9R-Hexahydrocannabinol (9R-HHC)	0.0099	0.0148	ND	ND	
9S-Hexahydrocannabinol (9S-HHC)	0.0099	0.0148	ND	ND	
Tetrahydrocannabinol Acetate (THCO)	0.0099	0.0148	ND	ND	
Cannabidiavin (CBDV)	0.0099	0.0148	0.034	0.337	
Cannabidiavinic Acid (CBDVA)	0.0099	0.0148	ND	ND	
Cannabidiol (CBD)	0.0099	0.0148	10.115	101.149	
Cannabidiolic Acid (CBDA)	0.0099	0.0148	ND	ND	
Cannabigerol (CBG)	0.0099	0.0148	ND	ND	
Cannabigerolic Acid (CBGA)	0.0099	0.0148	ND	ND	
Cannabinol (CBN)	0.0099	0.0148	ND	ND	
Cannabinolic Acid (CBNA)	0.0099	0.0148	ND	ND	
Cannabichromene (CBC)	0.0099	0.0148	0.022	0.217	
Cannabichromenic Acid (CBCA)	0.0099	0.0148	ND	ND	
<b>Total</b>			<b>10.221</b>	<b>102.211</b>	



# Key Points

Many patients you care for are  
**ALREADY** using cannabis!

Take away the stigma – ask about  
cannabis use in every interaction.

Patience is required to find the right  
formulation and dose.



[hello@ampercann.com](mailto:hello@ampercann.com)  
[ampercann.com](http://ampercann.com)



Bridgeman MB, Abazia DT. Medicinal cannabis: history, pharmacology, and implications for the acute care setting. *P T*. 2017;42(3):180-188.

Bruni N, Della Pepa C, Oliaro-Bosso S, Pessione E, Gastaldi D, Dosio F. Cannabinoid delivery systems for pain and inflammation treatment. *Molecules*. 2018;23(10):2478. doi:10.3390/molecules23102478  
Kentucky Medical Cannabis Program. <https://kymedcan.ky.gov/>

Devitt-Lee A. A primer on cannabinoid-drug interactions. Project CBD: 2018. Published 2018 Sept 25; updated 2018 Oct 11.

Liechtenstein, SD. THC, CBD, and anxiety: a review of recent findings on the anxiolytic and anxiogenic effects of cannabis' primary cannabinoids. *Curr Addict Rep*. 2022 Dec; 9(4): 473-485. doi:10.1007/s40429-022-00450-7

Nathan DL. Setting the standard for cannabis labeling: introducing the universal cannabis product symbol and the Universal Cannabis Information Label. *Cannabis Science and Technology*. 2020;3(6):44-52.

Registered Medical Cannabis Patient Population. Americans for Safe Access. Accessed June 5, 2024.  
[https://www.safeaccessnow.org/patient\\_population](https://www.safeaccessnow.org/patient_population)

## References

Roitman P, Mechoulam R, Cooper-Kazaz R, Shalev A. Preliminary, open-label, pilot study of add-on oral delta-9-tetrahydrocannabinol in chronic post-traumatic stress disorder. *Clin Drug Investig*. 2014; 34:587-591. doi:10.1007/s40261-014-0212-3.

Saraiva SM, Martín-Banderas L, Durán-Lobato M. Cannabinoid-based ocular therapies and formulations. *Pharmaceutics*. 2023;15(4):1077.

Watts S. Indica and sativa labels are largely meaningless when it comes to cannabis complexities. *Dalhousie News*. <https://www.dal.ca/news/2022/01/07/cannabis-labels-study-indica-sativa.html>

Zylla DM, Eklund J, Gilmore G, et al. (2021). A randomized trial of medical cannabis in patients with stage IV cancers to assess feasibility, dose requirements, impact on pain and opioid use, safety, and overall patient satisfaction. *Supportive Care in Cancer*, 29(12), 7471–7478.

## References