

Cannabis and ALS

FACT SHEET | WWW.ALS.CA

Some people with amyotrophic lateral sclerosis (ALS) use cannabis to help treat their symptoms, while others may use it simply to relax and enjoy the euphoria. Still others are not interested in using cannabis.

Cannabis use is safe for people with ALS, as long as it doesn't interact with any of your medications. People with ALS may prefer a smokeless way to consume cannabis, such as vaporizing, ingesting oils or using edibles.

There is limited peer reviewed research about the effects of cannabis on people with ALS, but more research is currently underway.

WHAT ARE THE COMPONENTS AND EFFECTS OF CANNABIS?

Cannabis has two major active compounds that contribute to its effects: Tetrahydrocannabinol (THC) and cannabidiol (CBD. There are a number of cannabis products that contain only CBD or TCH or that have a combination of both, depending on the therapeutic effect that you desire. On their own each one provides benefits and they also work together to create benefits.

The effects of cannabis include:

- Euphoria
- Relaxation
- Pain relief
- Relief for muscle spasms
- Increased appetite
- Heightened sensory experiences
- Sleep aid
- Wound healing
- Mood regulator

The side-effects include:

- Anxiety
- Confusion
- Impaired ability to concentrate or remember things
- Sedation

RESEARCH ON CANNABIS USE AND ALS

There has been very little peer reviewed research about the effects of cannabis on people living with ALS, but more is in the works.

One survey found that cannabis may be effective at reducing certain symptoms. These included appetite loss, pain, depression, spasticity, and drooling. It did not appear to be effective for treating speaking and swallowing troubles. The effect on sexual dysfunction is still being studied.¹

There is some evidence that cannabis can augment the pain-relieving effects of opioid pain medications, which are commonly used among ALS patients.²

The effects of cannabis on multiple sclerosis (MS) has been studied more than ALS. Several studies have found that cannabis can treat spasticity in MS. This may indicate that cannabis can help with spasticity in people living with ALS.

As of 2020, a randomized, placebo-controlled, double-blind study of the effects of cannabis in people with ALS is underway.

IS CANNABIS SAFE FOR PEOPLE WITH ALS?

Cannabis use is generally safe for people with ALS, but there are certain considerations to take into account.

Cannabis can interact with certain medications, so it is a good idea to discuss cannabis use with your doctor before starting to use it. If you already use cannabis, you may wish to make your doctor aware of your use.

Some people with ALS may have breathing symptoms, which can make smoking cannabis uncomfortable. Vaporizing may be easier. A vaporizer heats cannabis to the point where the active compounds vaporize into a smokeless gas. This tends to irritate the lungs less than smoke.

Edible cannabis products are another good option for those who are not able to, or who do not wish to vaporize cannabis. These products include edible foods, such as cannabis cookies or brownies, as well as cannabis liquids, oils, and capsules.

Cannabis oils can be placed under the tongue. This can be helpful for people who cannot easily chew and swallow foods. Edible cannabis can have a different effect than inhaled cannabis, so when using edibles, it's important to follow the rule of "start low and go slow".

MEDICAL AND RECREATIONAL CANNABIS USE

Because recreational cannabis is legal in Canada now, the line between medical and recreational cannabis use is blurred. People no longer require an authorization to access lab-tested, regulated cannabis products. This can make it easier for people with ALS to experience the potential benefits of cannabis.

Medical cannabis use is when a person uses cannabis under the guidance of a physician, with the intention of

REFERENCES & ADDITIONAL RESOURCES

²Survey of cannabis use in patients with amyotrophic lateral sclerosis ²Cannabinoid–Opioid Interaction in Chronic Pain Health effects of cannabis ALS Guide: A resource for people living with ALS treating the symptoms of a disease or disorder. One of the most common medical uses of cannabis is to treat pain.

Recreational cannabis use is when a person uses cannabis to relax, or to enjoy the effects of the drug without necessarily treating a condition.

People with ALS may use cannabis medically or recreationally, or a combination of the two. While cannabis may help treat some of the symptoms of ALS, it is not a cure and it cannot stop the disease progression.

A doctor, nurse practitioner or registered health care clinician (RN, RPN, Pharmacist) can provide useful guidance about dosing, as well as ensure the cannabis is not interfering with any medications.

SUMMARY

- People with ALS may use cannabis for a variety of reasons, including symptom relief, and as a way to promote relaxation and stress management.
- There are different cannabis products available that contain both CBD and THC, or CBD alone and THC alone.
- Limited research shows that cannabis may be effective at reducing certain symptoms, like appetite loss, pain, depression, spasticity, and drooling.
- As of 2020, a randomized controlled trial of cannabis in ALS patients is currently underway.
- This research may help reveal if cannabis could be a helpful treatment for ALS.

Study protocol for a randomised, double-blind, placebo-controlled study evaluating the efficacy of cannabis-based Medicine Extract...

Do cannabis-based medicinal extracts have general or specific effects on symptoms of multiple sclerosis?

KNOW THAT WE ARE HERE TO HELP I For people and families living with ALS in Ontario, ALS Canada can assist in connecting you to support services, equipment, and ALS clinics. Whether you are a person living with ALS, a family member or a caregiver, we will strive to support you along this journey. If you live outside of Ontario, please contact your provincial ALS Society for information on support available in your region. Learn more at www.als.ca.

Disclaimer: The information in this publication has come from sources that the ALS Society of Canada deems reliable and is provided for general information purposes only. It is not intended to replace personalized medical assessment and management of ALS. The ALS Society of Canada disclaims any liability for the accuracy thereof, and does not intend to disseminate either medical or legal advice.

Special thanks to everyone who helped write and review this fact sheet.

^{*} Last updated 10/2020