

# Talking Ethics



## By Prescription: Integrating Use of Medical Cannabis into the Medical Health Review

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In answer to your question, “Any changes to your medical health, Mr. X?” your 75-year-old client responds, “Yes. I have been prescribed and am taking cannabis every day to relieve chronic pain caused by the herpes zoster infection I had last year.”



On August 5, 2016, the federal Controlled Drugs and Substances Act was amended to include the Access to Cannabis for Medical Purposes Regulation (SOR/2016-230) (ACMPR).<sup>1</sup> The process documented in the ACMPR is more transparent, and patients are now able to legally obtain, use, and carry cannabis for medical purposes after registering with Health Canada.

- Dental hygienists uphold the principles and standards of the profession with clients, colleagues and others with whom they are engaged [in cases of clients taking medical cannabis, the contact professional may be a physician or authorized nurse practitioner]
- Dental hygienists maintain and advance their knowledge and skills in dental hygiene through lifelong learning
- Dental hygienists promote workplace practices and policies that facilitate professional practice in accordance with the principles, standards, laws and regulations under which they are accountable<sup>3</sup>

However, the regulations surrounding medical cannabis use continue to evolve; the ACMPR is not complete and will be amended as the federal government determines how best to regulate the cultivation of cannabis for personal use and the consumption of “edible products”<sup>2</sup>. How will Canadian dental hygienists incorporate the evolving information on use of medical cannabis into their professional practice? What terminology will dental hygienists require to document the dose and frequency of the medical cannabis used by their clients?

Ethically speaking, in the context of inquiring about the use of medical cannabis, CDHA’s *Code of Ethics* articulates the professional responsibilities of dental hygienists under the principle of *Integrity*. Specifically:

Legally, when collecting personal health information from clients, dental hygienists must be mindful that the Personal Information Protection and Electronic Documents Act (PIPEDA) mandates that collection of personal information be limited to what is necessary and that consideration be given to why and how the information will be used.<sup>4</sup>

Your clients are not required to show you their Marijuana for Medical Purposes Regulations (MMPR) medical document issued by Health Canada. However, as with all medication, you should obtain the following information during the medical history review:

- name of the medication
- active ingredient
- dose and frequency
- condition for which the medicine was prescribed

## NAME OF MEDICATION

There are natural and synthetic forms of medical cannabis, which can be used to treat disease or alleviate symptoms. Natural forms of medical cannabis originate from three species: *Cannabis sativa*, *Cannabis indica*, and *Cannabis ruderalis*.<sup>5</sup> Personal preference appears to dictate the delivery method for medical cannabis: combusting (smoking) or vaporizing (portable or desktop varieties) produces faster onset action<sup>2</sup>; ingestion of home-made edible products<sup>2</sup> and the use of cannabis oil or cannabis-infused oils have slower onset and longer acting metabolic effects.<sup>6</sup>

Synthetic forms of medical cannabis are prescribed by a physician and dispensed by a pharmacist. They include *Marinol*<sup>®</sup> (dronabinol capsules), *Cesamet*<sup>®</sup> (nabilone capsules), and Oro-mucosal *Sativex*<sup>®</sup> (spray nabiximols).<sup>6,7</sup>

## ACTIVE INGREDIENT

The active ingredients in medical cannabis are called phytocannabinoids or natural cannabinoids.<sup>6</sup> Delta-9-Tetrahydrocannabinol (THC) is the primary psychoactive component and is responsible for the “high” experienced after ingesting or inhaling cannabis.<sup>6</sup> Cannabidiol (CBD) contributes to many of the pharmacological actions<sup>6</sup> without producing a psychoactive effect. Other natural cannabinoids include cannabigerol, cannabivarin, and cannabichromene but at much lower levels than THC and CBD.<sup>6</sup>

## DOSE AND FREQUENCY

Trituration of the dosing is important to achieve the desired medical effects without the psychoactive effects, and is authorized by the client’s physician.<sup>8</sup> Dose and frequency of use are expressed in grams of dried cannabis per day. According to the Canadian Medical Protective Association the licensed producer who sells or provides the product will determine [calculate] the dosage prescribed by the physician.<sup>8</sup>

## CONDITIONS TREATED BY MEDICAL CANNABIS

While scientific research on the therapeutic benefits of medical cannabis is limited, cannabis and cannabinoids are approved for use in Canada for relief and prevention of nausea and vomiting caused by anti-cancer and anti-HIV chemotherapy; stimulation of appetite in AIDS patients with a severe loss of body weight; relief of neuropathic pain (due to disease of the nervous system [*Sativex*<sup>®</sup>]); reduction of pain and spasticity (muscular stiffness) due to multiple sclerosis; and treatment of severe pain due to advanced cancer.<sup>6</sup>

Some public awareness literature from licensed cannabis dealers and producers states that medical cannabis may also be used to treat migraines, symptoms of Crohn’s disease, eating disorders, irritable bowel syndrome, colitis, chronic pain, cancer, lupus, shingles, insomnia, arthritis, psoriasis, glaucoma, and liver disease.<sup>5</sup>

## CONCLUSION

Dental hygienists have an ethical obligation to record all aspects of their client’s medical history and to be familiar with the side effect profiles of prescribed medicines, particularly if they have the potential to affect the client’s ability to consent to treatment. Will clients freely disclose their medical cannabis prescription information during regular dental visits? Will the medical history documents be updated to include a question about medical cannabis use? I expect that ethical professionals will document prescribed medical cannabis use in the same way that other prescription medicines are recorded.

## References

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