



Vol. 9, Issue 6
July 2017

CANNABINOID CHRONICLES

Medical Cannabis News and Information

Some Employee Benefit Plans to Include Medical Cannabis

According to employee benefit plan insider Mike Sullivan while at a recent meeting with some of his clients, who represent private companies with benefit plans that cover about three million Canadian workers across a range of industries, medical cannabis is being considered for coverage.

"This group that was in attendance, the No. 1 topic of discussion was medical cannabis," said Sullivan, who is president of Cubic Health, which provides analytics to employers who sponsor health benefit plans.

The insurance industry itself has been hesitant to cover medical cannabis, according to Sullivan. But that doesn't matter to medium- and large-sized Canadian employers, Sullivan said. They generally use insurance companies to administer their employee health benefit plans while paying the costs of coverage themselves, an arrangement known as a self-insured, self-funded or "administrative services only" plan.

Self-insured companies get to choose what their benefit plans cover, and some of their workers want medical cannabis to be covered.

Those employers, said benefits expert Mike Sullivan, are seeking the answer to a question: "Can they do a better job of getting people back to work sooner, and staying at work," by covering medical cannabis?

Many questions exist about paying for medical cannabis, especially in safety-sensitive industries such as construction or resource extraction. However, workers in those industries are already using employer-covered drugs, said Sullivan, especially opiates and benzodiazepines.

"I think it's a very naive argument for employers to say, 'Well, we don't want to open up the door here,'" he said. "The door is already open."

When medical cannabis does get covered, patients shouldn't expect blanket approvals; coverage will have to be approved on a case-by-case basis, said Sullivan.

Jonathan Zaid, executive director of Canadians For Fair Access to Medical Marijuana, convinced the University of Waterloo student union to cover his medical cannabis under its health benefit plan in December 2014. A small number of other self-insured Canadian health benefit plans already cover medical cannabis in certain circumstances. Veterans Affairs Canada also reimburses a growing number of veterans for medical cannabis.

Loblaw Companies is covering medical cannabis for employees through their health benefit plans, but only for MS and chemotherapy patients, leaving out the potentially large population of chronic pain patients.

Cannabis has not been assigned a Drug Identification Number from Health Canada, which makes it difficult for insurers to process claims. But some licensed producers are laying the groundwork for employers to cover their cannabis products by assigning them Product Identification Numbers instead.

Philippe Lucas of licensed producer Tilray said that customers are already getting their costs covered by major insurance plan companies like Great West Life, Sun Life and Wawanesa by way of employees' individual healthcare spending accounts, which allow discretionary spending of an annual amount on medical expenses.

Source: www.cbc.ca/news/business/medical-marijuana-employee-health-benefit-1.4132562

Crude Drugs

Angelica Root
(Foreign and Domestic)
Balm Gilead Buds
Spiknard Root
Aloe
Benzoin
Bryonia Root
Buckthorn Bark
Cannabis
Cantharides
Insect Powder
Cinchona Bark

J. L. HOPKINS & CO.
DISTRIBUTE
CRUDE DRUGS
TRADE MARK

Elder Flowers
Cramp Bark True
Corn Silk
Saw Palmetto Berries
Damiana
Lavender Flowers
Liverwort Herbs
Wild Cherry Bark
(all grades)
Stillingia Root
Stramonium Herb
Senega
Sarsaparilla Root

J. L. HOPKINS & CO., 100 William St., New York

International Association for Cannabinoid Medicines (IACM) Bulletin

Human: Cannabis reduced symptoms of ADHD in a small clinical study

In a small placebo-controlled study with 30 adults with ADHD (attention deficit hyperactivity disorder), a cannabis extract (Sativex) reduced their symptoms. Participants were randomly assigned to receive either cannabis or placebo. Results were published by researchers from King's College London and other scientific institutions of the UK.

Cannabis was associated with a significant improvement in hyperactivity/impulsivity and a cognitive measure of inhibition, and a trend towards improvement for inattention and emotional lability. Researchers wrote that "adults with ADHD may represent a subgroup of individuals who experience a reduction of symptoms and no cognitive impairments following cannabinoid use."

Source: <http://www.ncbi.nlm.nih.gov/pubmed/28576350>

Human: Cannabis is used as a substitute for prescription drugs according to a large survey

According to an online survey with 2774 participants, who reported having used cannabis at least once in the previous 90 days about a half said that they used cannabis as a substitute for prescription drugs. This is the result of research by scientists of the Center for Medical Cannabis Education in Del Mar, Bastyr University Research Institute in Kenmore and the Department of Medical Research, Center for the Study of Cannabis and Social Policy in Seattle, USA.

A total of 1,248 (46%) respondents reported using cannabis as a substitute for prescription drugs. The most common classes of drugs substituted were narcotics/opioids (35.8%), anxiolytics/benzodiazepines (13.6%) and antidepressants (12.7%). A total of 2,473 substitutions were reported, or approximately two drug substitutions per substituting respondent. Authors wrote that "these patient-reported outcomes support prior research that individuals are using cannabis as a substitute for prescription drugs, particularly, narcotics/opioids, and independent of whether they identify themselves as medical or non-medical users."

Source: <https://www.ncbi.nlm.nih.gov/pubmed/28439004>

Human: Migraine is not associated with a generalized deficiency of endocannabinoids

In a study with 26 healthy women and 38 with migraine, there were no differences in blood concentrations of endocannabinoids. Authors wrote that "it is concluded that migraine is not associated with a generalised (as opposed to localised) deficiency in these lipids."

Department of Chemistry, Umeå University, Sweden.

Source: <http://www.ncbi.nlm.nih.gov/pubmed/28515018>

Human: CBD reduces blood pressure in healthy people

In a study with nine healthy male volunteers, a single dose of 600 mg cannabidiol (CBD) significantly reduced blood pressure, researchers of the Universities of Nottingham and Oxford, United Kingdom, Royal Derby Hospital Centre, Derby, United Kingdom, wrote in the Journal of Clinical Investigation Insight. They were given 600 mg of CBD or placebo in a crossover study.

CBD reduced resting systolic blood pressure (-6 mmHg) and stroke volume (-8 ml), with increased heart rate (HR) and maintained cardiac output. Subjects who had taken CBD had lower blood pressure (-5 mmHg, especially before and after stress), increased heart rate (+10 bpm), decreased stroke volume (-13 ml). Authors wrote that their "data shows that acute administration of CBD reduces resting BP and the BP increase to stress in humans, associated with increased HR. These hemodynamic changes should be considered for people taking CBD."

Source: <http://www.ncbi.nlm.nih.gov/pubmed/28614793>

Animal: Beta-caryophyllene may suppress the development of atherosclerosis

Beta-caryophyllene (trans-caryophyllene) inhibited macrophage infiltration to the aortic surface and reduced total serum levels of cholesterol and triglycerides in animals. It also inhibited the production of a molecule (VCAM-1), which promotes atherosclerosis. Authors wrote that beta-caryophyllene "might have a capacity to suppress the development of atherosclerosis."

First Affiliated Hospital of Jilin University, Jilin, China.

Source: <https://www.ncbi.nlm.nih.gov/pubmed/28624443>

Human: Cannabis users show fewer reactions to stressful situations

In a study with 40 cannabis users and 42 non-users who underwent a stress test, "subjective stress ratings and cortisol levels were significantly higher in non-users in the stress condition relative to non-users in the no stress condition. In contrast, cannabis users demonstrated blunted stress reactivity; specifically, they showed no increase in cortisol and a significantly smaller increase in subjective stress ratings."

Source: <https://www.ncbi.nlm.nih.gov/pubmed/28567696>

Cells: Effects of radiation on glioblastoma cells were increased by CBD

CBD (cannabidiol) increased the effects of radiation on the killing of human glioblastoma cells. Glioblastoma is an aggressive brain cancer. Columbia U., New York, USA.

Source: <https://www.ncbi.nlm.nih.gov/pubmed/28599319>

For more info visit: www.cannabis-med.org

Cannabinoid Has Potential to Unlock New Treatment for Schizophrenia

IHMRI (Wollongong, NSW, Australia) researchers have discovered that an active compound in cannabis plants may alleviate cognitive impairment, providing a vital opportunity in the treatment of schizophrenia.

Cannabidiol (CBD) can influence learning, memory and attention, offering potential solutions to several core symptoms of schizophrenia that can be a challenge to alleviate with existing medicines, such as cognitive impairment.

The researchers hope to use this knowledge to develop new and improved medications for schizophrenia—a debilitating mental illness that ranks among the top 10 causes of disability in developed countries worldwide.

Although current antipsychotic medications are effective against the delusions and hallucinations of schizophrenia, they are less effective in treating the cognitive and negative symptoms, such as social withdrawal and blunted emotional expression. Current medications can also have negative side effects, such as weight gain and movement disorder.

PhD candidate Ashleigh Osborne and her supervisors, Dr Green and Professor Solowij from the University of Wollongong (UOW), initially uncovered the insights about the therapeutic potential of CBD during a detailed review of 27 existing studies.

“From this review, we found that CBD will not improve learning and memory in healthy brains, but may improve aspects of learning and memory in illnesses associated with cognitive impairment, including Alzheimer’s disease, as well as neurological and neuro-inflammatory disorders,” project leader, Dr Katrina Green said. “Evidence suggests that CBD is neuroprotective and can reduce cognitive impairment associated with use of delta-9-tetrahydrocannabinol (THC), the main psychoactive component of cannabis.”

This evidence inspired Ms. Osborne to investigate whether CBD can improve cognitive impairment in a rodent model of schizophrenia, “We found that CBD was able to restore recognition and working memory, as well as social behaviour to normal levels,” she said.

“These findings are interesting because they suggest that CBD may be able to treat some of the symptoms of schizophrenia that are seemingly resistant to existing medications. In addition, CBD treatment did not alter body weight or food intake, which are common side effects of antipsychotic drug treatment.” The study review was published in the journal, *Neuroscience and Biobehavioral Reviews*.

Source: <https://ihmri.uow.edu.au/about-ihmri/news/UOW233018.html>
<https://www.ncbi.nlm.nih.gov/pubmed/27884751>

Is Cannabigerol (CBG) The Cannabinoid Against Colon Cancer?

When it comes to cannabinoids, it is THC and CBD that tend to get the most attention and research. However, whilst these two are the most prolific beneficial cannabinoids, they are by far not the only ones.

New research suggests that Cannabigerol (CBG), one of the lesser known cannabinoids found within cannabis and hemp, can help treat and prevent colon cancer.

CBG is a non-psychoactive cannabinoid that has already been shown to help relieve the symptoms of such ailments as glaucoma and irritable bowel syndrome.

This latest bit of research comes courtesy of the US National Institute of Health, an organization that has previously focused on trying to research and discover negative aspects of cannabis instead of looking at its benefits.

They published their research in the Oxford journal *Carcinogenesis*, which details how they administered CBG to animals to observe its effects on xenograft tumours as well as chemically-induced colon carcinogenesis.

It was found that CBG interacted with specific targets, including the tumorous cells, inhibiting their growth and progression.

Normally, research like this would suggest that it is still early days, and that much more comprehensive testing is required; but the researchers here go as far as to say that CBG should seriously be considered trans-nationally in the prevention and treatment of colon cancer.

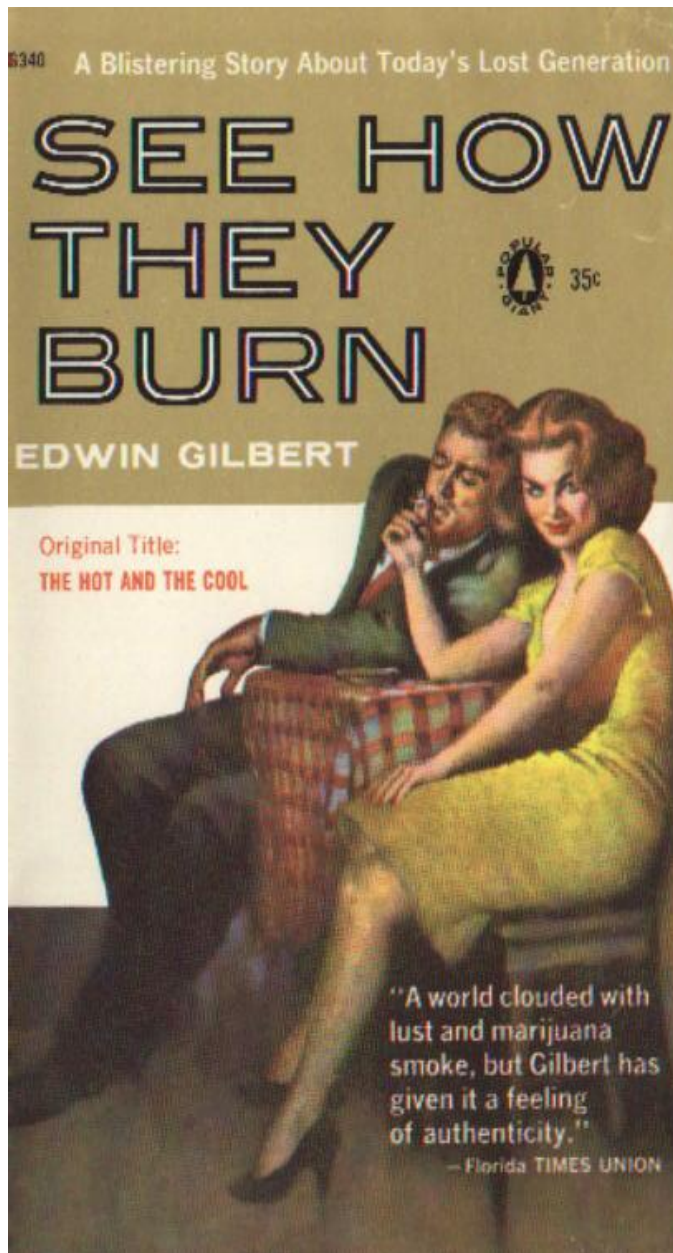
Considering this is research from the National Institute of Health, it is an important declaration.

It is worth noting that due to the fact that CBG is non-psychoactive, it is not considered an illegal substance in most countries, and can be grown in abundance in legal industrial hemp. CBG tends to be found in naturally higher concentrates within industrial hemp than it does in most strains of cannabis.

Source: <https://www.ncbi.nlm.nih.gov/pubmed/25269802>



Image: <https://elixinol.com/blog/cbg-cannabigerol/>



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Cannabis Arrests Depend Upon Where You Live

Recreational cannabis is illegal for now, but there are better ways to transition to a legalized system than the status quo. While the numbers of possession charges and convictions have dropped since Trudeau was elected in October 2015 (estimated at around 15,000 versus the up-to-60,000 annual busts from previous years), prosecutions have continued.

"The fact remains that we still have people receiving criminal convictions for a substance that the government intends to legalize," said NDP justice critic Alistair MacGregor, who requested the figures tabled in the House of Commons in early June. "(The Liberals) realize the effect a criminal record has on people's lives."

The NDP has been urging the government to decriminalize cannabis as an interim measure until it's legalized.

"I have always maintained that (prosecutions are) a sincerely unfair practice to continue on the road to legalization," MacGregor said.

The lower numbers are just because certain police detachments have become more lenient about enforcing cannabis laws, MacGregor said, including in his home riding on Vancouver Island.

In other places, he said, "the police are coming down still quite hard on marijuana possession charges," which he finds unfair.

"The justice that is meted out to you depends on where you are in Canada."

During a forum with VICE Canada in April, Prime Minister Justin Trudeau hinted that the government might consider pardoning some Canadians with cannabis convictions after it is legalized.

Source: <http://www.vancouver.sun.com/news/national/more+than+2c000+people+charged+with+possession+since/13420009/story.html>

RESOURCE DIRECTORY:

AIDS Vancouver Island
3rd Fl- 713 Johnson St, Victoria
250-384-2366

VIPWA
101-1139 Yates Street, Victoria
250-382-7927

The Action Committee of People with Disabilities
948 View Street, Victoria
250-383-4105

Victoria Brain Injury Soc.
830 Pembroke St., Victoria
(250) 598-9339

HepC BC
2642 Quadra Street, Victoria
250- 595-3892

BC Cancer Agency
2410 Lee Ave, Victoria
(250) 519-5500

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www.safeaccess.ca

John W. Conroy, Q.C.
1-877-852-5110 (toll free)
www.johnconroy.com

Kirk Tousaw, Barrister
604-836-1420
www.tousawlaw.ca

DrugSense
www.drugsense.org

BC Coalition of People With Disabilities
1-800-663-1278

Health Canada
<http://www.hc-sc.gc.ca/dhp-mps/marihuana/index-eng.php>

Drug Policy Alliance
www.drugpolicy.org

Media Awareness Project
www.mapinc.org

Together Against Poverty Society
302-895 Fort Street, Victoria
250-361-3521

"It's all about money, not freedom. You think you're free? Try going somewhere without money."

-- Bill Hicks (comedian, 1961-1994)