

Cannabis and CRPS

*Pot might be legal
But this ain't Cheech and Chong
So, check with your doctor
Before you spark up that bong*

That goes for gummies, too!

Complex Regional Pain Syndrome (CRPS) is a chronic pain condition that is difficult to treat. While some patients have reported positive results using cannabis to manage their symptoms, the medical and scientific evidence supporting its effectiveness is limited but there is solid evidence that use without proper medical supervision can be downright dangerous.

CRPS is a serious condition that is treated with powerful drugs. Introducing another drug with known, strong psychoactive components that can depress physiologic processes such as breathing where the interactions are unstudied and largely unknown is risky and reckless without professional guidance.

This is not to say that cannabis does not show promise. An Australian [biotech company](#) just received FDA approval to begin Stage 1 Human trials on a novel blend of THC, the psychoactive component of cannabis, specifically targeting treating CRPS pain flares.

There have been nearly two dozen studies that suggest that cannabis helps to relieve pain and improve the quality of life for people in chronic pain, including those with CRPS. However, these studies are limited in size and methodology, and there are just not enough to be statistically significant to draw a definitive conclusion. For example, a 2020 review of 18 randomized controlled trials found that CBD was effective in reducing chronic pain in patients with conditions such as neuropathic pain, fibromyalgia, and osteoarthritis. Another study published in the Journal of Pain Research in 2021 reported that a combination of CBD and THC was effective in reducing pain and improving sleep in patients with chronic pain conditions.

While the effectiveness of cannabis for conditions like CRPS is promising, risks related to its legal status around the world are not. Use can have serious consequences depending on where you live including the United States.

First, let's explore how cannabis works medically. It contains two primary active compounds known as cannabinoids: delta-9-tetrahydrocannabinol (THC) and cannabidiol (CBD).

Both THC and CBD have potential medical applications, but the effects and benefits differ. THC is commonly used for pain relief, muscle spasticity, nausea, and appetite stimulation, whereas CBD is often used for its anti-inflammatory and calming properties. The ratio of THC to CBD and other cannabinoids can also affect the overall effects of cannabis products, leading to varying therapeutic outcomes. It is essential to consult with a healthcare professional before using any cannabis products for medical purposes particularly when used in combination with other medications like opioids and benzodiazepines.

There is some science to support how CBD may work.

One theory is that CBD interacts with the body's endocannabinoid system (ECS), which plays a role in regulating various physiological processes, including pain, inflammation, mood, and sleep. CBD has been shown to interact with both CB1 and CB2 receptors in the ECS, as well as other non-cannabinoid receptors, leading to a range of effects on the body.

Another theory is that CBD may modulate the activity of serotonin receptors in the brain, which are involved in regulating mood, anxiety, and pain perception. CBD has been shown to increase serotonin levels in the brain, which may contribute to its anxiolytic (calming) and analgesic effects.

Additionally, CBD has been found to have antioxidant and anti-inflammatory properties, which may help to reduce oxidative stress and inflammation in the body. This could be particularly relevant in conditions such as CRPS, where inflammation plays a significant role in pain and tissue damage.

However, it is important to note that the exact mechanisms of action of CBD are still not fully understood, and further research is needed to fully elucidate its effects on the body.

THC works slightly differently but with dramatically different effects.

Yes, there are several scientific theories as to how THC may work to produce its pain-relieving effects.

One theory is that THC interacts with the body's endocannabinoid system (ECS), specifically by binding to CB1 receptors in the brain and central nervous system. This leads to the release of neurotransmitters, such as dopamine and serotonin, which can modulate pain perception and produce feelings of pleasure and relaxation.

Another theory is that THC may work by activating the body's natural opioid system. THC has been shown to stimulate the release of endogenous opioids, which are similar to drugs like morphine and are involved in pain relief.

Additionally, THC has been found to have anti-inflammatory properties, which may be beneficial in reducing pain associated with inflammatory conditions. THC can also reduce muscle spasms and improve sleep, which may further contribute to its pain-relieving effects.

However, it is important to note that THC also has psychoactive effects, which may not be desirable for some patients. The optimal ratio of THC to other cannabinoids, such as CBD, and the appropriate dosage of THC for pain management, may vary depending on individual factors such as age, weight, and the specific condition being treated. As with any medication, it is essential to consult with a healthcare professional before using THC or any cannabis-based products for pain management because there are dangers in combining THC and CBD in combination with other medications, especially opioids and benzodiazepines.

Both THC and opioids can produce sedative effects, and using them together can increase the risk of respiratory depression, which can be life-threatening. Therefore, it is essential to use caution when combining these medications and to consult with a healthcare professional before using them together.

Benzodiazepines are another class of medication that may interact with THC and CBD. Benzodiazepines are commonly used to treat anxiety and insomnia, but they can also produce sedative effects and increase the risk of respiratory depression when used with other depressant drugs. CBD can increase the

levels of benzodiazepines in the blood, which can lead to increased side effects such as dizziness, drowsiness, and impaired coordination.

It is important to inform your healthcare professional about all medications you are taking, including THC and CBD, to ensure that there are no potential interactions or contraindications. They can advise you on the safest and most effective treatment options for your specific condition.

Furthermore, one of the most significant risks associated with using cannabis in combination with other medications is the potential for drug interactions. For example, cannabis can interact with drugs metabolized by the liver enzymes CYP3A4 and CYP2C9, which are involved in the breakdown of many medications, including certain antidepressants, blood thinners, and anti-seizure medications. This can lead to increased side effects or reduced efficacy of these medications.

In addition, chronic cannabis use has been associated with respiratory problems, cognitive impairment, and an increased risk of mental health disorders, including psychosis and schizophrenia. These risks may be particularly relevant for chronic disease patients who may already be at higher risk of these conditions.

Another concern is the potential for cannabis use to exacerbate symptoms of certain chronic conditions, such as cardiovascular disease, diabetes, and chronic obstructive pulmonary disease (COPD). For example, smoking cannabis can lead to increased heart rate and blood pressure, which can be dangerous for patients with cardiovascular disease.

In summary, chronic disease patients who are taking other drugs to treat their conditions should consult with a healthcare professional before using cannabis for medical or recreational purposes. It is essential to consider potential drug interactions and side effects, as well as the risks associated with chronic cannabis use.

All in all, it is simple. Use cannabis under medical supervision and only use medical grade cannabis so that the downsides can be minimized, and the upsides can be maximized.

The Next to the Last Thing: Is Cannabis safe?

It depends on several factors, including the dose, the method of use, and your health status. While cannabis has a relatively low risk of causing a fatal overdose, it can have short-term and long-term side effects.

Short-term effects of cannabis can include dry mouth, red eyes, impaired memory and concentration, increased heart rate, and altered judgment and coordination. These effects can be more pronounced in individuals who are new to using cannabis or who consume it in high doses.

Long-term use of cannabis has been associated with a range of health risks, including respiratory problems, decreased lung function, and an increased risk of psychotic disorders in vulnerable individuals. Additionally, regular use of cannabis can lead to dependence, and withdrawal symptoms can occur when use is discontinued.

Again, do so under the guidance of a healthcare provider, especially if you have a pre-existing medical condition or are taking other medications. It is also important to use cannabis responsibly and to avoid driving or operating heavy machinery while under its influence, so, keep that bulldozer in the garage.

One Last Thing

As to the legal risks, ensure that you follow local laws and statutes. The legal status of cannabis varies widely across states and countries, and there may be restrictions on its use or availability in some places. Additionally, while medical cannabis is legal in many states, it is still not approved by the U.S. Food and Drug Administration (FDA) for the treatment of any specific medical condition, including CRPS.

Use a search engine to ensure you have the most current information as to how to procure medical cannabis legally.

Here is a list of states, territories, and districts where medical cannabis is legal as of April 2023 in alphabetical order:

1. Alaska
2. Arizona
3. Arkansas
4. California
5. Colorado
6. Connecticut
7. Delaware
8. District of Columbia
9. Florida
10. Guam
11. Hawaii
12. Illinois
13. Louisiana
14. Maine
15. Maryland
16. Massachusetts
17. Michigan
18. Minnesota
19. Mississippi
20. Missouri
21. Montana
22. Nevada
23. New Hampshire
24. New Jersey
25. New Mexico
26. New York
27. North Dakota

28. Ohio
29. Oklahoma
30. Oregon
31. Pennsylvania
32. Puerto Rico
33. Rhode Island
34. South Dakota
35. Tennessee
36. Utah
37. Vermont
38. Virginia
39. Virgin Islands
40. Washington
41. West Virginia