Medical Marijuana (Cannabis) Research

Many barriers prevent comprehensive medical research because of its status as a Schedule 1 controlled substance. Patients may be unaware of viable treatment options, providers may be unable to prescribe effective treatments, and policy makers may be blocked from developing evidence based policies, thus creating more barriers.¹

Recent studies find stronger evidence for medical cannabis and other preliminary studies suggest medical potential benefits of cannabis. The best studies are meta-analyses and longitudinal studies based on health outcomes rather than self-reporting.

Medical Care

A systematic review and meta-analysis in *Journal of American Medical Association* found evidence suggesting that cannabinoids were associated with improvements in nausea and vomiting due to chemotherapy, weight gain in HIV infection, sleep disorders, and Tourette syndrome.²

Five years later the *Journal American Medical Association, Internal Medicine* (2020) confirmed additional conditions for the medical use of specific cannabinoids: spasticity related to multiple sclerosis, rare forms of childhood epilepsy, and modestly reduces pain, especially nerve pain.³

The *Journal of Pain Management* reported improvements in pain, quality of life, and a variety of symptoms, for cancer patients, finding statistically significant improvements in ability to cope with pain and experiences with sleep.⁴

Contrary to the myth that cannabis is a gateway drug, the RAND Corporation found in a national study that the use of cocaine dropped 50 percent as cannabis use increased 30 percent.⁵

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The *Journal of Clinical Medicine* reported that medical cannabis appears to be a safe and effective alternative for the treatment of fibromyalgia symptoms.\(^6\)

Research reported in the *Journal of the American Medical Association* found a reduction of both opioid addiction and opioid overdose deaths in states with legalized cannabis.\(^7\)

The *Journal of Psychopharmacology* provided preliminary epidemiological evidence that cannabis use may reduce post-traumatic stress disorder (PTSD), severe depressive and suicidal states.\(^8\)

*Health Economics* tied a nearly 7% decline in workers' compensation claims in states with medical marijuana. When claims were filed they were on average for shorter periods of time.\(^9\)

The *American Academy of Neurology* found that smoked cannabis effectively relieved chronic neuropathic pain from HIV-associated sensory neuropathy. The findings are comparable to oral drugs used for chronic neuropathic pain.\(^10\)

The *Journal of American Medical Association, Internal Medicine* provided preliminary evidence supporting the self-medication of cannabis use for Attention Deficit Hyperactivity Disorder, suggesting further studies.\(^11\)

A *Journal American Medical Association, Psychiatry* longitudinal study of cannabis use for up to 20 years is not associated with physical health problems in early midlife, other than possible periodontal disease.\(^12\)

Research published in *Journal of American Medical Association, Psychiatry* studied differences in brain structure in cannabis users concluded common pre-dispositional factors, genetic, or environmental explains differences.\(^13\)

**Conclusion**

The *Journal of American Medical Association* printed an article that concluded, “if a patient has tried many medications or procedures to treat a medical condition and none has worked, it is reasonable to try medical cannabis after a conversation between the patient and clinician about its potential risks and benefits.”\(^14\)

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\(^6\) J Clin Med. 2019 Jun; 8(6): 807; Published online 2019 Jun 5. Pg 1
\(^7\) JAMA Internal Medicine. 2018;178(5):673-79. jamanetwork.com/journals/jamainternalmedicine/fullarticle
\(^8\) Journal of Psychopharmacology “Evidence from a population-based cross-sectional study of Canadians: Does cannabis use modify the effect of post-traumatic stress disorder on severe depression and suicidal ideation?” November 5, 2019
\(^9\) Reuters Health Access to medical marijuana tied to reduced workers' comp claims Friday, February 07, 2020 3:29 p.m. CST By Linda Carroll
\(^10\) American Academy of Neurology “Cannabis in painful HIV-associated sensory neuropathy: A randomized placebo-controlled trial” February 13, 2007; 68 (7)
\(^11\) European Neuropsychopharmacology “Cannabinoids in attention-deficit/hyperactivity disorder: A randomised-controlled trial” Volume 27, Issue 8, August 2017, Pages 795-808;