

AMA Section of Chronic Pain

Position Statement: Medical Cannabis and Chronic Pain

Recently the College of Family Physicians of Canada have released their preliminary guidelines on the use of medical cannabis for chronic conditions. We are also aware of the Pain Society of Alberta's position paper on medical cannabis and the CPSA's guidelines on prescribing medical cannabis.

We believe that all therapeutic options should be available for patients who suffer from chronic pain. We also recognize that only one third to one half of all chronic pain patients will respond to any particular medication. As a result the AMA Section of Chronic Pain recognizes the need for newer treatment strategies for the management of chronic pain.

Medical cannabis, while mostly untested in objective clinical trials, offers hope for many of our chronic pain patients who have failed standard therapies. Treatment with medical cannabis in chronic pain patients appears to be relatively safe with mostly modest side effects for most patients when taken orally or by vaporization. As such, we see medical cannabis as a reasonable option for some patients who cannot tolerate or fail to respond to drugs that have been more rigorously studied.

To be clear, the AMA Section of Chronic Pain recognizes that in most circumstances, medical cannabis should not be considered a first or second line agent in the management of chronic pain disorders at this time.

The AMA Section of Chronic Pain feels that caution should be exercised by physicians who wish to prescribe medical cannabis, and we generally support the guarded approach taken by the College of Family Physicians of Canada. Clearly medical cannabis for all its supporters and detractors needs to be more fully studied to better understand the risks and benefits associated with its use.

For now, the AMA Section of Chronic Pain feels that prescribers of medical cannabis should be limited to physicians with experience in the management of chronic pain and the recognition of substance abuse disorders.

The Section of Chronic Pain also believes that medical cannabis should only be considered after a comprehensive pain assessment and review of risk factors for addiction using standardized tools such as the opioid risk tool. Furthermore our section does not approve of the use of medical cannabis in individuals under the age of 25. We also do not support the use of smoked cannabis as opposed to vaporized or oral cannabis.

AMA Section of Chronic Pain
2015