

## POSITION STATEMENT

### Cannabis-Based Medicinal Products for the Management of Patients with Chronic Pain

#### Recommendation:

**The use of cannabis-based medicinal products in chronic pain is not recommended – RAG status ‘Black’**

This guidance does not apply to the use of Sativex<sup>®</sup> (delta-9-tetrahydrocannabinol and cannabidiol) oromucosal spray as an adjunct treatment for moderate to severe spasticity in multiple sclerosis.

#### Background

In June 2018 the Home Office launched a review into the scheduling of cannabis and cannabis-based products for medicinal purposes. The Chief Medical Officer (CMO) for England and Chief Medical Advisor to the UK Government, assessed the therapeutic and medicinal benefits of cannabis-based products for medicinal use in humans on prescription and found that there is conclusive evidence of therapeutic benefit for certain medical conditions, and reasonable evidence in several other medical conditions. Following these recommendations, The Advisory Council on the Misuse of Drugs recommended that “*cannabis-derived medicinal products of the appropriate standard*” be moved from Schedule 1 to Schedule 2 of the Misuse of Drugs Regulations, subject to further refinement of the definition of cannabis-based products for medicinal use. [1]

#### Guidance for the prescribing of cannabis-based products for chronic pain

The National Institute for Health and Care Excellence (NICE) was requested by the Department of Health and Social Care to produce a clinical guideline for the prescribing of cannabis-based products for medicinal use in humans. NICE Guideline 144 was published on 11<sup>th</sup> November 2019. [2] NICE made the following recommendations relating to chronic pain:

*‘Do not offer the following to manage chronic pain in adults:*

- *nabilone*
- *dronabinol*
- *THC (delta-9-tetrahydrocannabinol)*
- *a combination of cannabidiol (CBD) with THC.*

*Do not offer CBD to manage chronic pain in adults unless as part of a clinical trial.*

*Adults who started cannabis-based medicinal products to manage chronic pain in the NHS before this guidance was published should be able to continue treatment until they and their NHS clinician think it appropriate to stop'. [2]*

The Royal College of Physicians (RCP) has developed additional advice around prescribing of cannabis-based products for medicinal use in chronic pain.

The RCP recommendations state [3]:

***“There is no robust evidence for the use of CBPM (cannabis-based products for medicinal use) in chronic pain and their use is not recommended.”***

This RCP recommendation is supported by a Cochrane review in March 2018 which concluded, “There is a lack of good evidence that any cannabis-derived product works for any chronic neuropathic pain.” It also concluded that “The potential benefits of cannabis-based medicine in chronic neuropathic pain might be outweighed by their potential harms.” [3] [4]

Also, a comprehensive meta-analysis of pharmacotherapy for neuropathic pain recommended against the use of cannabinoids in neuropathic pain, the reasons being: negative results, potential misuse, diversion, and long-term mental health risks of cannabis particularly in susceptible individuals. Only two of nine trials of nabiximols in neuropathic pain were positive. [3] [5]

Internationally, reports from the USA, [6] Australia [7] and Ireland [8] all comment on the lack of good quality evidence regarding short and long-term outcomes for both benefit and harm of medicinal cannabis products. [3]

## References

- [1] NHS England, "Guidance to clinicians: Cannabis-based products for medicinal use," 31 October 2018. [Online]. Available: <https://www.england.nhs.uk/wp-content/uploads/2018/10/letter-guidance-on-cannabis-based-products-for-medicinal-use..pdf>. [Accessed 16 November 2018].
- [2] National Institute for Health and Care Excellence, "Cannabis-based medicinal products NICE guideline [NG144]," NICE, Manchester, 2019.
- [3] Royal College of Physicians, "Recommendations on cannabis-based products for medicinal use," October 2018. [Online]. Available: [www.rcplondon.ac.uk/projects/outputs/recommendations-cannabis-based-products-medicinal-use](http://www.rcplondon.ac.uk/projects/outputs/recommendations-cannabis-based-products-medicinal-use). [Accessed 16 November 2018].
- [4] M Mucke et al, "Cannabis-based medicines for chronic neuropathic pain in adults," *Cochrane Database of Systematic Reviews*, p. Art. No.: CD012182. doi: 10.1002/14651858., 2018; 3.
- [5] NB Finnerup et al, "Pharmacotherapy for neuropathic pain in adults: a systematic review and meta-analysis," *Lancet Neurol*, vol. 14, pp. 162-173, 2015.

[6] National Academies of Sciences, Engineering, and Medicine, "The health effects of cannabis and cannabinoids: The current state of evidence and recommendations for research," The National Academies Press, Washington, DC, 2017.

[7] Department of Health Therapeutic Goods Administration, "Medicinal cannabis clinical guidance document," Australian Government, 29 May 2018. [Online]. Available: <https://www.tga.gov.au/medicinal-cannabis-guidance-documents>. [Accessed 19 November 2018].

[8] Health Products Regulatory Authority, "Cannabis for Medicinal Use," <https://www.hpra.ie/docs/default-source/publications-forms/newsletters/cannabis-for-medical-use---a-scientific-review.pdf?Status=Master&sfvrsn=7>, Dublin, 2017.

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### Version Control

Version Number	Date	Amendments Made	Author
1.0	January 2019	New document	PT, AG
1.1	December 2019	NICE NG144 added.	AG

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