



Can Do MS Podcast Transcript

Marijuana and MS

Episode 60

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Samantha Balistreri: Welcome, you're listening to episode number 60 of the Can Do MS Podcast. I'm your host Samantha Balistreri. Today, we have Dr. Michelle Cameron with us to discuss cannabis and MS. Dr. Cameron is both a physical therapist and a neurologist. She is a professor of Neurology at OHSU, the Oregon Health and Science University, and the VA Portland Healthcare System.

Her expertise focuses on patient care and treating people with MS. She has done research in many areas, including falls mobility and the use of cannabis and cannabinoids in people with MS. We're very lucky to have her here today to share her knowledge in the area of cannabis and MS. Thank you for joining us today. Dr. Cameron.

Dr. Michelle Cameron: Thank you. Thanks so much for inviting me. I'm excited to do this. We have an exciting topic.

Samantha: We do. Can you start by telling us a bit about yourself and your role with medicine and cannabis?

Dr. Cameron: Sure. So I'm a neurologist at Oregon Health and Science University, up in Portland, Oregon. And I mostly work with patients with MS. So, that's my area and I'm particularly interested in cannabis when I saw it close 10 years ago, now that we had pretty good evidence that cannabis could help people with MS with spasticity.

Samantha: Okay, great. Thanks. So, let's get this big question out of the way. What's legal versus what's not legal?

Dr. Cameron: Well, it's a big question. So federal law in America says, cannabis is schedule 1. That means it is illegal. There is no medical use for it. It has greater harms than benefits. So that's federal law. And then, as you go from state to state, you'll see varying state regulations. In some states, they've legalized the medical use of cannabis. And in some states, in addition, they've legalized the recreational use of cannabis. So the law varies.

And then just to add one more layer to that people's employ may have different rules and

regulations. Let's say for myself, if I use cannabis, I can be tested I can lose my job. So be aware of that for all of the listeners here, both for themselves. And if these are providers for their patients, the employers may have varied different points of view than either the federal government or the state government.

Samantha: Okay, that makes sense. And I don't expect you to be an expert on every country's laws and regulations, but can you speak briefly about maybe a couple of differences between the U.S. and somewhere outside the U.S. like Canada, if you know anything about them?

Dr. Cameron: I do a little bit. So mostly, I know about medical use, particularly in MS. So in Canada, the rules are a little bit different in that they have made it legal and approved a plant-based product that is for spasticity in MS. Specifically and can be prescribed. That's not the case here in the US.

Samantha: Thank you. That's very interesting and great to hear what our neighbors in the North are doing. So cannabis and MS, why does this conversation matter?

Dr. Cameron: Well, I think there are all sorts of information out there, some of it true, some of it not. We all know what the internet breathes. So I think it's really important, given the noise about it, the people with MS know as best we know what the facts are. What do we know about what cannabis does do, doesn't do benefits and risks? This isn't entirely harmless.

Samantha: Okay, is there any research that you can share regarding how many people with MS use cannabis?

Dr. Cameron: So, about a third of people with MS seem to use cannabis at any one time and most of those people when asked do so, at least daily basis. So, lots and lots of people are using cannabis. As I say, one in three probably, varies a little depending on the legality.

Samantha: Wow, that's a decent amount more than I expected.

Dr. Cameron: Yeah.

Samantha: So how is cannabis potentially helpful for individuals with MS?

Dr. Cameron: So when we look at the research, what we see, as the most prominent, is research on spasticity. And what we see there is particularly with specific cannabis preparations that are a one-to-one CBD THC combination, that it reduces patient-reported spasticity. It's a modest effect, but it's a pretty consistent effect. And we also see fair evidence that it may help reduce pain.

Samantha: Okay, so it's mostly symptom relief, not managing multiple sclerosis itself, as far as the research is concerned?

Dr. Cameron: Exactly. There's a little bit of research or a fair amount of research looking at the immune effects of cannabis, but this is all in animals. There's no research on people with MS to show any modifying effect. So this is entirely symptomatic and I a really good thing to separate.

Samantha: Okay. Can you speak to some of the potential benefits or risks of cannabis, just it may be in general, not even necessarily related to MS?

Dr. Cameron: I think when we speak to benefits, they tend to be disease-specific or condition-specific. So, as I said, spasticity, pain, the big areas, there is a whole world looking at CBD for epilepsy and specific forms of epilepsy in reducing seizure rates, but in very, very limited types of epilepsy.

So, all sorts of areas have been looked at with regards to risks, I think one huge area that is often underappreciated and would be true for anyone is drug-drug interactions. And what I mean by that is just like with other medications if you take two medicines together, they can affect each other. And so, if you thinking of using cannabis products, you need to speak with your provider to go, is this going to interact with any of my medications.

And then there's sort of some of the more obvious side effects I think that most people probably realize you probably don't think as well. And if you've got cognitive problems for your MS that could be even worse, you might be a little unsteady on your feet. You could feel sort of dizzy, a little confused, all of the sorts of things I think people think of if they're going to use cannabis. Oh, yeah, I may not be as smart or as think as well as I used to or while I was using it.

And we do know that if people use chronically so they use every day and then we test them that their cognitive status is not as good. They don't perform as well on cognitive tests, although fortunately if they stopped using for a month, they seem to improve again.

Samantha: Okay, and with fatigue, being one of the highest rates of a symptom of multiple sclerosis, is there any research you're aware of regarding fatigue and cannabis use?

Dr. Cameron: So again, an interesting, one cannabis can certainly make people drowsy. So more fatigued. Though some people use it for sleep with the hope that if they sleep better, they'll be less fatigued in the daytime. So that sort of can goes either way if you think of anything that's sedating a little depends on when you use it. If you use it in the daytime, then you're more fatigued. If you use it at night, there's a possibility, would be less fatigued. Although, that's not been studied.

Samantha: Okay, that makes sense. If someone lives in a state with both recreational and medical marijuana, does it matter where they purchase if they choose to use it?

Dr. Cameron: So it does vary a bit from state to state as to how those two go together. But basically, the product is the same. So whether you're buying medical marijuana, or buying recreational marijuana, you're buying the same stuff. So here in Oregon, there are two small differences.

One is if you're buying medical, you don't pay taxes on it. So it's cheaper and you can buy more of the time. And I think that varies a bit from state to state, I don't know every single State's rules. But basically, the differences is cost not what your product is. I do want to bring up the third version also, this medical marijuana, recreational, marijuana, potentially in the future, they may be FDA-approved cannabis products. Right now, the only FDA-approved already does synthetic or that CBD product we talked about that's for epilepsy.

Those will be very-, anything that's FDA-approved has to be manufactured exactly the same way, tested very rigorously, and is much more reliable as to what's on the label is exactly what you get. But the medical recreational, otherwise, same stuff, just how you buy. It might be a little different.

Samantha: Okay. Thanks. And what can you share about topicals and CBD?

Dr. Cameron: I know you mentioned CBD briefly in the study on epilepsy. But we've been seeing more varieties of CBD products for general use.

Dr. Cameron: So, I think on the upside with topicals side effect profile, it's probably safer because you get less in you. We don't have good data though on what it does for you. So, it's a little hard for me to say, my patients told me all sorts of things. I think it's a pretty safe way to start but unclear, if it'll help you or not. And with regards to CBD, only products, those get a little trickier because of the hemp regulations, those products come from all sorts of places.

And so, the labeling may be even less reliable. When you get mixed products at a marijuana dispensary, at least there are state laws about testing those, how well those are implemented may vary. But with the CBD-only products, those can be imported, they may be untested. So, what's on the bottle? What's written on the bottle? What's in the bottle, may or may not be the same.

Samantha: Okay, that's important and good to take into consideration. I know I was curious about that. So I'm sure some of our listeners were too. So looking forward, what do you know about ongoing your future research studies?

Dr. Cameron: That's a fair amount of research it is still in my human world, it focused on symptom control and MS. And again, mostly focused on looking at spasticity and trying to understand if there's a way to capture those changes objectively, or by someone other than the patient. So, it's to remove some of the bias in some of the studies or potential bias, also looking at pain and other conditions. And certainly ongoing basic science, looking at the immune effect of cannabis and then a whole world outside of MS. Maybe from cancer to rheumatology, there are all sorts of work that people are looking at that does not work that I know intimately.

Samantha: Okay. Yeah, so cannabis has come a long way in the past decade and it sounds like there's still a lot of room for us to learn about cannabis and the different laws and regulations that we may see in the future.

Dr. Cameron: Absolutely. And I think, we are still a challenge by those laws and regulations in doing the research. So because this is, we said at the beginning is a schedule 1 drug federally. You have to go through all sorts of hoops to do research on it. Just even have it in your lab-locked cabinets, tracking it all, and it's quite different than doing research with other products.

Samantha: Yeah, definitely. And not even just that but monitoring someone that you're having to use the none approved drug.

Dr. Cameron: Exactly. And most research is federally funded and so then you are subjected to Federal regulations.

Samantha: Is there anything else that you want our listeners to know or think about when it comes to cannabis?

Dr. Cameron: I think probably the most important thing is that they discuss this with their provider, as much as they may feel awkward or uncomfortable talking about using cannabis. But if it's something they're either doing or thinking of doing, let them discuss that with their provider so that provider knows and can advise them as best they can. And as I said, particularly with a concern for drug-drug interactions, if you're taking anything else you need to know, is it safe to combine these things.

Samantha: Okay. That makes sense. Yeah, and this is a hot topic that I don't think it's going anywhere. So I'm sure a lot of people are going to be interested in hearing what you have to say about it and learning from the expert here.

Dr. Cameron: Thank you.

Samantha: Thank you so much for joining the Can Do MS Podcast. On behalf of me and Can

Do Multiple Sclerosis, it was an honor to speak with you.

Dr. Cameron: Thank you so much for inviting me. It was a delight.

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Voice over: Thank you for joining us for this, fascinating discussion about cannabis and MS. This episode of the Can Do MS Podcast was brought to you by our sponsors, EMD Serono, Novartis Pharmaceuticals, Sanofi Genzyme, and Genentech.

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