Treating Minoritized youth with Cannabis Use Disorder in The Era of Legalization

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Disclosure Information

- Presenter 1: Dafna Rubin-Kahana, MD, Child & Adolescent Psychiatrist, The Centre for Addiction and Mental Health (camh), Assistant professor, Department of Psychiatry, University of Toronto, Toronto, Ontario, CA.
 - Salary Support: O'Brien Scholar and Margaret and Wallace McCain Centre for Child, Youth, and Family Mental Health. No commercial or industry disclosures
- Presenter 2: Amit Rotem, Child & Adolescent Psychiatrist, The Centre for Addiction and Mental Health (camh), Assistant professor, Department of Psychiatry, University of Toronto, Toronto, Ontario, CA.
 - No Disclosures



Learning Objectives

- To describe clinical cases of minority youth using cannabis and discuss common challenges.
- To demonstrate evidence-based approaches to cannabis use and concurrent mental health disorders among minority youth.
- 3. To describe the SAPACCY model of care for minority youth with Cannabis Use Disorder.



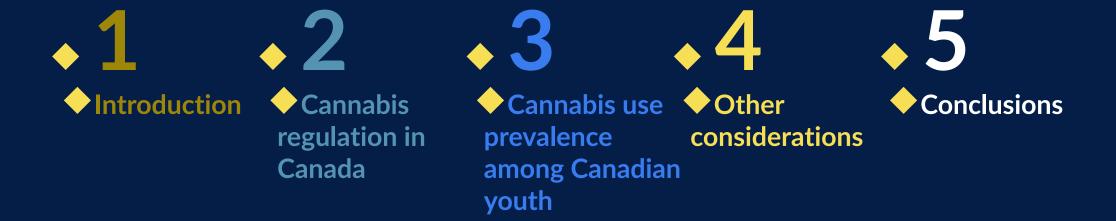
The impact of cannabis legalization for recreational purposes on

youth: A narrative review of the Canadian experience

Dafna Sara Rubin-Kahana ^{1,2}, Jean-François <u>Crépault</u> ^{3,4}, Justin Matheson ⁵ and Bernard Le Foll-^{2,5-9}



AGENDA





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Introduction



EDITORIAL

Cannabis legislation fails to protect Canada's youth

Diane Kelsall MD MEd

■ Cite as: CMAJ 2017 May 29;189:E737-8. doi: 10.1503/cmaj.170555



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Information for Authors

Medical knowledge that matters Des connaissances médicales d'envergure

CMAJ. 2017 Jul 24; 189(29): E970.

doi: 10.1503/cmaj.733187

Cannabis prohibition harms Canada's youth

Matthew M. Elrod



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Medical knowledge that matters Des connaissances médicales d'envergure

CMAJ. 2017 Jul 24; 189(29): E971-E972.

doi: 10.1503/cmaj.733215

Cannabis use, legalization and youth health

Benedikt Fischer, PhD and Jürgen Rehm, PhD



Cannabis Legalization and Regulation



Cannabis is now legal.

The <u>Cannabis Act</u> creates a strict legal framework for controlling the production, distribution, sale and possession of cannabis across Canada. The Act aims to accomplish 3 goals:

- keep cannabis out of the hands of youth
- keep profits out of the pockets of criminals
- protect public health and safety by allowing adults access to legal cannabis





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Canada's lower-risk cannabis use guidelines



Taken from: https://www.canada.ca/en/health-canada/services/drugs-medication/cannabis/resources/lower-risk-cannabis-use-guidelines.html

Cannabis Regulation in Canada



Federal regulation of Cannabis

- Minimum age (18 and above)
- Underage possession
- Maximum possession (30 gram and below)
- Home cultivation
- Public smoking limitations
- Public/private/hybrid retail system
- Retail locations (varies between communities as well)
- Municipalities might opt out of hosting cannabis stores
- Advertising outside of point of purchase in not allowed
- Plain packaging with minimal brand elements
- THC and CBD content and a standard health warning are required





Packaging Requirements



- The standardized cannabis symbol
- The brand name of the cannabis product
- THC and CBD content
- 4. Health warning message
- Other brand element



- 6. Other required information about the cannabis product
- 7. Non-required information about the cannabis product
- Nutrition facts table
- 9. List of ingredients
- Bar code

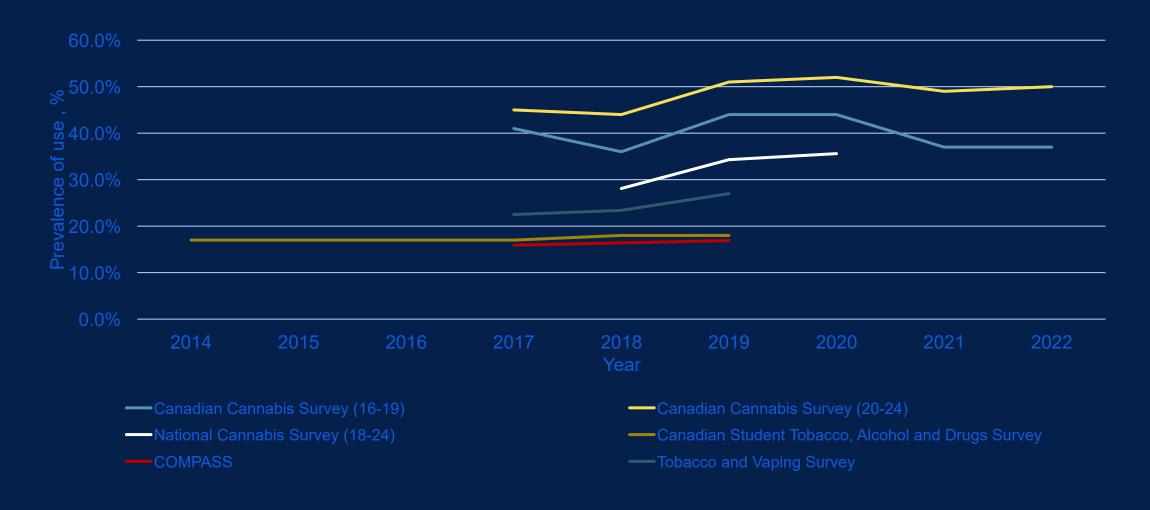


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Cannabis use prevalence among Canadian youth



Prevalence of Use, by Year





Prevalence of Use - Sources

- 1. Health Canada. Canadian Cannabis Survey 2018 Summary Canada.ca [Internet]. [cited 2021 Oct 3]. Available from: https://www.canada.ca/en/services/health/publications/drugs-health-products/canadian-cannabis-survey-2018-summary.html
- 2.2019 Canadian Cannabis Survey (Ccs). 2019.
- . Health Canada. 2020 Canadian Cannabis Survey (CCS). 2021.
- 4. Rotermann M. Looking back from 2020, how cannabis use and related behaviours changed in Canada. Health Reports. 2021.
- 5. Health Canada. Summary of results for the Canadian Student Tobacco, Alcohol and Drugs Survey 2018-19 Canada.ca [Internet]. [cited 2021 Oct 3]. Available from: https://www.canada.ca/en/health-canada/services/canadian-student-tobacco-alcohol-drugs-survey/2018-2019-summary.html
- Zuckermann AME, Gohari MR, Romano I, Leatherdale ST. Changes in cannabis use modes among Canadian youth across recreational cannabis legalization: Data from the COMPASS prospective cohort study. Addictive Behaviors. 2021 Nov 1;122:107025.
- ✓ Hammond D, Wadsworth E, Reid JL, Burkhalter R. Prevalence and modes of cannabis use among youth in Canada, England, and the US, 2017 to 2019. Drug and Alcohol Dependence. 2021;219(December 2020):108505



Minoritized Youth

◆ 58.8% of white young adults (20-24) reported past-12-month use, compared to 40.3% of Black young adults

Table 2. Past 12-month cannabis use, by sexual orientation, sex and age group, Canada, 2021

	Overall (%)	Females (%)	Males (%)	16-19 (%)	20-24 (%)	25+ (%)
Heterosexual (straight)	23.6	19.6	27.6	33.0	44.0	21.6
	[22.6-24.5]	[18.4-20.9]	[26.2-29.0]	[29.5-36.8]	[40.6-47.5]	[20.6-22.6]
Lesbian or Gay	41.3	39.2	42.6	#	51.5↑	37.6
	[35.2-47.6]	[30.4-48.7]	[34.5-51.0]		[39.2-63.7]	[30.1-45.7]
Bisexual	54.8	54.6	55.1	51.1	63.4	51.8
	[50.1-59.3]	[49.2-60.0]	[46.2-63.7]	[43.1-59.0]	[55.9-70.2]	[44.5-59.1]
Other	47.5↓	46.1	#	#	75.6	#
	[37.5-57.6]	[34.9-57.6]			[60.8-86.1]	



Other considerations

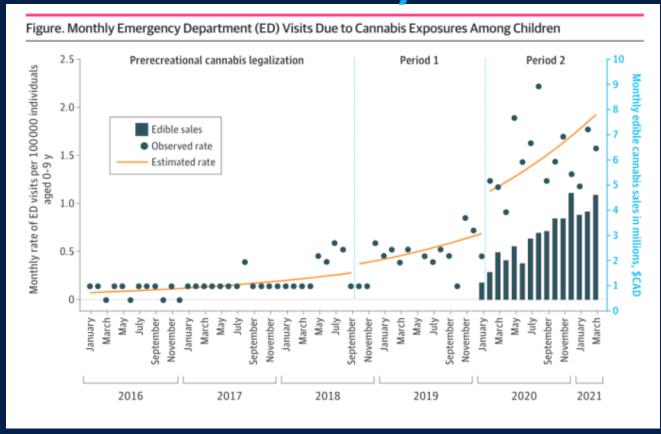


Cannabis use parameters

- Cannabis potency: higher-potency cannabis has gained popularity; however, there is no available data about changes in potency before and after legalization
- Changes in modes of cannabis use: extended modes of cannabis use, including more potent forms of cannabis (such as vaping and edibles). No data about obtaining it from a legal or illegal source. This distinction is important, as legal edibles, extracts, and topical products are subject to THC limits
- Age of initiation: the limited data available suggest that the age of initiation of cannabis use might have increased slightly from preto post-legalization but has likely not decreased



Cannabis-related hospitalizations and emergency department (ED) visits among Canadian youth





Myran DT, Cantor N, Finkelstein Y, Pugliese M, Guttmann A, Jesseman R, et al. Unintentional Pediatric Cannabis Exposures After Legalization of Recreational Cannabis in Canada. JAMA Network Open. 2022 Jan 4;5(1):e2142521-e2142521

Increase in cannabis use disorder among patients approaching psychiatric ED

Table 4. Comparison of Variables Associated with Cannabis Use by Age Category.

Severity of Use	Age (years)	Pre (%)	Post (%)	$\textit{OR}\;(CI=\mathbf{95\%})$	P
Active use of cannabis	18 to 24	37.9	52.3	2.32 (1.25 to 4.35)	0.008**
	25 to 44	38.9	49.2	1.72 (1.13 to 2.62)	0.012*
	45 to 64	15.7	19.0	1.50 (0.76 to 2.95)	0.240
	65 and \pm	1.5	5.0	3.47 (0.38 to 31.85)	0.270
Cannabis use disorder (mixed or not)	18 to 24	17.3	25.9	2.27 (1.17 to 4.40)	0.015*
,	25 to 44	25.6	30.6	1.30 (0.88 to 1.94)	0.190
	45 to 64	9.6	9.6	1.66 (0.76 to 3.64)	0.204
	65 and $+$	0	1.1	1.64 (0.15 to 18.53)	0.686

Note. CI = confidence interval; OR = odds ratio.

Vignault C, Massé A, Gouron D, Quintin J, Asli KD, Semaan W. The Potential Impact of Recreational Cannabis Legalization on the Prevalence of Cannabis Use Disorder and Psychotic Disorders: A Retrospective Observational Study: L'effet potentiel de la légalisation du cannabis récréatif sur la prévalence du trouble d'utilisation du cannabis et des troubles psychotiques : une étude observationnelle rétrospective. Can J Psychiatry [Internet]. 2021



^{*}P < 0.05. **P < 0.01.

Cannabis-involved driving

- Young adults (aged 18 to 24 years) reporting driving within two hours of using cannabis in the past 3 months decreased following legalization, from 16.4% pre- to 9.7%

 (Rotermann M. Health Reports What has changed since cannabis was legalized?. 2020)
- CCS data; In 2018, 26.7% of youth aged 16-19 who used cannabis in the past 12 months reported having driven within two hours of using cannabis, compared to 16.0% who reported having driven within two hours of smoking or vaping cannabis in 2019, which was nearly identical in 2020 (16.1%) (Health Canada. 2020 Canadian Cannabis Survey (CCS) Detailed Tables. 2021)
- One study found no significant association between cannabis legalization and traffic injury ED visits among youth drivers (aged 14 to 17 years in the province of Alberta, 16 to 18 years in the province of Ontario)

 (Coret A. Rowan-Legg A. Unintentional cannabis exposures in children pre- and post-legalization: A retrospective review from a Canadian paediatric hospital. Paediatrics & Child Health. 2022)
- However, a recent study utilizing data collected from four trauma centres in the Canadian province of British Columbia between January 2013 and March 2020 indicated an increased prevalence of injured drivers under age 30 with a THC concentration of at least 2 ng/mL in blood, which is a threshold to define cannabis-impaired driving in some jurisdictions (Brubacher JR, Chan H, Erdelyi S, Staples JA, Asbridge M, Mann RE. Cannabis Legalization and Detection of Tetrahydrocannabinol in Injured Drivers. New England Journal of Medicine. 2022 Jan 13;386(2):148-56)



Legal encounters

- Black and Indigenous people in five major Canadian cities were significantly more likely to be arrested for cannabis possession than white people
- Significant decrease in police-reported cannabis-related criminal offences among youth aged 12 to 17 years
- No association was observed between the implementation of the Cannabis Act and property crimes or violent crimes among youth



Callaghan RC, Heiden J vander, Sanches M, Asbridge M, Hathaway A, Kish SJ. Impacts of Canada's cannabis legalization on police-reported crime among youth: early evidence. Addiction [Internet]. 2021
(Owusu-Bempah A, Luscombe A. Race, cannabis and the Canadian war on drugs: An examination of cannabis arrest data by race in five cities. Int J Drug Policy. (2021) 91:102937. doi: 10.1016/j.drugpo.2020.102937)



5

Conclusions



Conclusions

- Results regarding the youth prevalence are **mixed**. Most studies show no pronounced increase, a few studies suggest an increase, and the latest national survey suggest a decline in youth cannabis use
- Data on legalization-related changes in cannabis-attributable harms among youth are limited and mixed, with evidence suggesting an increase in youth hospitalization and ED visits as a result of cannabis legalization
- There are indications that provinces and territories with looser retail regulations have seen a higher increase in use, compared to those with stricter rules
- The Canadian model differs from other jurisdictions which legalized recreational cannabis use in a number of aspects: level of regulation, public health perspective, packaging and labelling limitations, government's endorsement of lower-risk cannabis use guidelines
- The Cannabis Act includes a requirement that the federal government review the legislation three years after it comes into effect. According to the Act, the review must prioritize the impact of cannabis legalization on "public health and, in particular, on the health and consumption habits of young persons in respect of cannabis use"



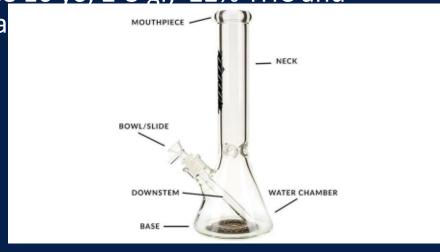
Core beliefs, legalization and youth minorities "Can you help me, please?"

AB is 17 yo, referred by Family Physician to consult daily cannabis use.

• Cannabis Use: Initiated at 14 yo, became daily user since 16 yo, 2-3 gr, 22% THC and

Tobacco, in a bong, throughout the day. Purchasing in a

- No other substance use was reported.
- Medical Hx: Non- significant.
- Mental Health Hx: Depression, ADHD.
- No medications.





Please reflect on the following:

- 1. How soon would you prefer to see this client? why?
- 2. Any considerations while targeting the Cannabis Use of the patient?

while considering the following patient's descriptions:



Patient 1

- Jamila, identified as a Female of Afro-American origin, had one charge of shoplifting a year ago.
- Cannabis Use: Initiated at 14 yo, became daily user since 16 yo, 2-3 gr, 22% THC and Tobacco, in a bong, throughout the day. Purchasing in a local dispensary with a fake ID.
- No other substance use was reported.
- Medical Hx: Non- significant.
- Mental Health Hx: Depression, ADHD.
- No medications.

- 1. How soon would you prefer to see this client? why?
- 2. Any considerations while targeting the Cannabis Use of the patient?



Patient 2

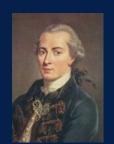
- Aden, identified as Trans Female to Male, Caucasian, reporting recurrent self-cutting over the past year.
- Cannabis Use: Initiated at 14 yo, became daily user since 16 yo, 2-3 gr, 22% THC and Tobacco, in a bong, throughout the day. Purchasing in a local dispensary with a fake ID.
- No other substance use was reported.
- Medical Hx: Non- significant.
- Mental Health Hx: Depression, ADHD.
- No medications.

- 1. How soon would you prefer to see this client? why?
- 2. Any considerations while targeting the Cannabis Use of the patient?



Stigma and Negative stereotypes

- Individuals with mental health and substance use disorders suffer stigmatization, discrimination, and negative stereotypes, which is a direct affront to dignity and may have enduring health impacts.
- Stigma influences treatment seeking, choice of treatment, treatment retention, and treatment adherence, negatively influencing individual and population health.
- Public stigma, structural stigma, courtesy stigma, and self-stigma are interrelated in a multi-level system



We do not see things as they are, but as we are"

Immanuel Kant



Recommendations for Support & Treatment

Education: Complications: Psychosis, mood/anxiety disorders, memory/cognitive impairment

Withdrawal: Restlessness, anxiety, dysphoria, irritability, insomnia, anorexia, muscle tremors, hyperreflexia, autonomic hyperactivity (dose dependent) • Onset ~12 h; peak ~48 h; duration ~7 days

Harm reduction counselling

- Choose lower-THC products; balance CBD.
- Avoid if personal/family Hx of psychosis, if pregnant/breastfeeding, if age <16.
- Avoid synthetic cannabinoids/dabbing (concentrated THC extracts), mixing Tobacco.
- Avoid combustible products (choose vaping/edibles over smoking). more intense high with edibles; use no more than 2.5 mg THC per edible; up to 4 h to take effect, can last 12–24 h.
- Avoid deep inhalation/breath-holding.
- Use occasionally (e.g. max 1 day/week).
- No driving 6 h post-use

CBT, motivational interviewing



the Blunt Truth

Useful tips about safer ways to use cannabis

This resource has been developed for youth by youth. We did the boring research so you don't have to! (You're welcome.)

You have the choice whether you want to use cannabis* (weed, pot), but you should know that there are different ways of using and some are safer than others. This resource gets down to the blunt truth about cannabis, and lets you know what science recommends to help reduce some of the risks to your health and well-being if you do choose to use cannabis.

* See back for definitions

Watch out for synthetic cannabis products, like K2 or Spice. Synthetics are designed to copy the effects of THC. The contents of most synthetics are unknown.

untested and can change from tow CAN I USE MORE SAFELY?

They can range from being real Synthetic cannabis use has bee irregular heartbeat, panic attac tions and in some cases, death. cannabis products and avoid sy

> CBD? SPICE? THC?

Smoking cannabis (in joints, bongs, etc.) is the most harmful way of using cannabis because it affects your lungs. Try vaping instead. You can also eat edibles, but be careful. When you eat edibles, your high is delayed. Pacing yourself can help you avoid what some might call a "bad high." Try to avoid smoking cannabis, and instead, try to vape or eat edibles. But remember that no method is entirely risk-free.

Who should be more carefu

Using cannabis when you're you mean teenagers, and definitely increase the risk of problems wit and social life. (These things are keep in mind that there are specified age of cannabis use in each pro using cannabis until you're olde

Some people try to increase their high by deeply inhaling or holding their breath when smoking. Evidence is mixed about whether this method increases your high, but we do know that more toxic material is absorbed into your lungs when you smoke this way, and it can cause lung problems. Try to avoid deeply inhaling or holding your breath when smoking.

s like memory in Fewer people experience psycholic ther mental health problems when using as a higher CBD content. Try to choose

products with town THC content, or higher CBD compared to THC content.

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References

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- 4. Corrigan P. W., Schomerus G., Shuman V. et al. "Developing a research agenda for understanding the stigma of addictions Part I: Lessons from the mental health stigma literature,". American Journal of Addiction. 2017;26(1):59–66. pp.



Thank you!

