



77. The use of cannabis in medical treatment

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The use of cannabis in the context of medical treatment raises ethical and professional questions among the medical community. The Bureau of Ethics appointed a committee to deal with the possible ethical implications of the use of cannabis in the context of medical treatment. The Committee examined and studied it from different angles and formulated the ethical position paper on the subject.

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Background

There is medical literature that supports the use of cannabis for the treatment and relief of patients suffering from a number of medical conditions. However, cannabis has not yet been defined as a drug in Israel, has not gone through the usual processes for registering preparations and drugs, and as of today is defined according to Israeli law as a dangerous drug.

One cannot ignore the fact that the medical system may be used, based on health indicators, to enable the normative use of a dangerous drug, the consumption of which is controversial in Israeli society and the world of medicine.

In addition, there may be an exploitation of medicine (medicalization), to legitimize the social consumption of a drug, the use of which has side effects that may harm the health of those who consume it, as well as the public. The decision-makers and professionals, who deal with the administration of cannabis in medical treatment, are required to consider the risk of abuse of cannabis treatment, especially with ambiguous labels and high doses, for the purpose of transferring the material for use by another person and even to trade in a dangerous drug. The danger of using pressure, threats and even violence against doctors in order to obtain cannabis should not be ignored. Unfortunately, this reality exists and affects the willingness of many medical centers and doctors to engage in this field, with all the implications thereof.

Cannabis is a natural substance that includes a group of about 400 active substances, and there is no uniformity in the chemical composition between the different strains. As long as a natural substance is used and the common way of administration is smoking, it is difficult to estimate the dose of the active substance given to the patient each time. The attending physician relies to a large extent on the subjective experience described to him by the patient, in the absence of any other information about the therapeutic effect and side effects caused by the treatment.

The medical community has to deal with a lack of reliable scientific information, which



is largely influenced by the fact that cannabis has not gone through the usual licensing process for drugs. In addition, there are different, even contradictory, professional medical opinions regarding the use of cannabis. There is also a lack of uniformity in the indications for giving cannabis.

We must also deal with "orphan diagnoses", for which it is sometimes not clear which medical specialty treats them. There is also great difficulty in determining the optimal dosage of the treatment, and there are patients who put a lot of pressure on doctors, partly for the reasons mentioned above.

In addition to the above, information and guidance to patients on how to use cannabis is provided unevenly and by different parties, including the manufacturing company or the pharmacy, some of which may have additional interests unrelated to the treatment of the patient's medical problem.

As of today, according to the information presented to the committee, cannabis treatment helps many patients in Israel deal with their medical condition. According to quite a few testimonies, cannabis treatment can significantly improve the health and well-being of many patients, including patients whose condition was not alleviated by other treatments. Along with the therapeutic benefits of cannabis for many patients, one must consider the many negative effects that may harm patients and their environment, such as: risk of addiction, damage to brain activity, onset of depression, anxiety, psychotic attacks, risk of suicide and more. In some cases, the side effects may be similar to the symptoms that are being treated with the help of cannabis, creating confusion and leading to mistaken thinking that the disease itself is worsening, rather than that the symptoms are due to the side effects of cannabis.

There is also unfortunate evidence that patients who used cannabis withdrew from others, stopped other medical treatments and even dropped out of medical rehabilitation programs.

One must also consider the health consequences to the patient and his environment as a result of smoking cannabis, which is the common way of consuming it today, regardless of the active substances found in the drug. There are ways to use cannabis other than smoking, but their use is relatively limited, and the medical system should encourage them due to the health damages of smoking.

Given these professional complexities, the doctor who offers a patient cannabis as part of the medical treatment for his illness must also consider the ethical questions and dilemmas that arise from this treatment, including the basic ethical obligations to act to benefit the patient and not cause him harm. The professional and ethical point of view should include a broader view of the effect of cannabis use on the occupational and social circles that surround the patient and support him.

In light of everything detailed above, the Ethic Bureau has determined that physicians should take a very careful approach during medical treatment with cannabis, and act in



accordance with the ethical principles below:

1. A doctor may refuse to provide a certain treatment if it is contrary to his professional position, his conscience, and his belief in the treatment.

All the more so, a doctor may refuse a request or demand to prescribe or extend a permit for cannabis, which is not defined as a medicine, whose dosage and therapeutic effects are not completely clear and whose common method of administration is known to harm health.

2. A doctor who recommends or authorizes a patient to use cannabis as part of medical treatment is required to have relevant and up-to-date knowledge on the subject and should constantly update his knowledge of the professional literature.
3. A doctor shall grant a license for cannabis or extend a license for cannabis only if he has undergone appropriate training and received permission to treat with cannabis, and if has the appropriate relevant knowledge to treat the medical indication for which the patient applied.
4. Along with the known benefits, the doctor must consider the limitations of the available information, the shortcomings, the risks and the consequences that may accompany treatment with cannabis, as part of his clinical and ethical judgment before recommending the start of substance usage or during its treatment.
5. A doctor who recommends that a patient use cannabis, or who extends his cannabis license, must present to the patient the full scientific and clinical picture, in order to allow the patient to make the most educated and informed decision possible regarding his willingness to use cannabis as part of the treatment.
6. Considering the set of risks and considerations detailed in the introduction to this position paper, a cautious approach must be taken when treating with cannabis, including prescribing the lowest dose suitable for treating the patient's medical problem, in terms of Start Low, Go Slow, Stay Low.
7. The doctor recommending, approving or extending a cannabis treatment authorization must make an effort to follow the patient in an orderly and consistent manner during the treatment. The doctor's impression or inability to follow up should be part of the considerations regarding the continuation of treatment with the substance.
8. In the event that a doctor fears that the cannabis treatment he prescribed for the patient has been used improperly, he shall report this to the Director General of the Ministry of Health or someone on his behalf.
9. The Ethics Bureau sees a fundamental problem in treatment that is delivered by means of smoking. It is appropriate for a doctor to warn his patients of the harms of smoking to them and their environment, and in appropriate cases offer treatment



with other methods of administration, especially if they allow better control of the dose and the therapeutic effect of the substance.

10. The doctor must take extreme caution regarding establishing relationships with companies that produce and market cannabis, beyond receiving scientific information. One must beware of situations that could put the doctor in danger of a conflict of interest, and one should not accept from these companies any perk or benefit that could be perceived as such.
11. In the current reality in Israel, the companies that produce and market cannabis are not defined as pharmaceutical companies. As long as cannabis is considered a dangerous drug in Israel, one should not ask for or receive sponsorship from these companies for medical projects or conferences.
12. In view of the great complexity, which was presented in the above document, it is appropriate to integrate the contents of medical ethics in the training of doctors to treat cannabis.
13. As the definition and classification of cannabis in the State of Israel changes in the future, updating this position paper will be considered accordingly.