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	Expert Opinion & Consultation Psychiatry, Psychopharmacology

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Disclaimers

- I receive no compensation from any industry
- I receive no compensation from any policy-advocacy groups
- I believe that any informed adult who wishes to use cannabis should be able to exercise the right of free choice in an open society that values liberty
- The thoughts, views, and opinions expressed in this presentation are my own and do not reflect or represent the policy or position of Northeast Ohio Medical University

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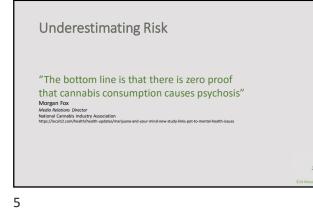
Objectives

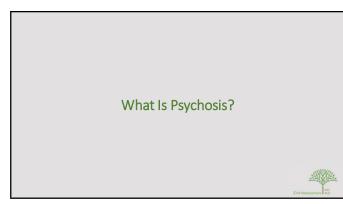
- Explain psychosis and schizophrenia
- Outline evidence that cannabis can cause psychosis
- Explain how cannabis pharmacology overlaps with psychosis biochemistry
- Explore links between cannabis use and persistent psychosis (schizophrenia)
- Discuss the meaning and significance of cannabis-induced psychosis



Underestimating Risk

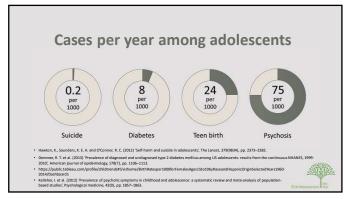
- One third of US adults believe that smoking or vaping cannabis promotes good health
 Kerlau 5 at 2008 'Bok and dended Mariana UK-A National Survey of U.S. Adults', Analy of
- Half of US adults say that cannabis is no potentially serious side effects Knyhol, S et al. (2019) Moranger (2019) unshibited advantaged unaversetite.
- Two thirds of youths aged 16 to 19 years are not at all worried that using marijuana will damage their health (Wadsworth et al., 2019) Wadworth, perception of hum, and Minigueder the influence in Canada, England & Lintee Stater, Addorches Network, 90, pp. 171-75.

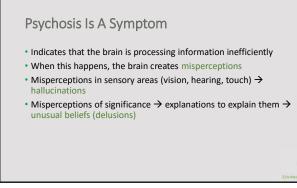


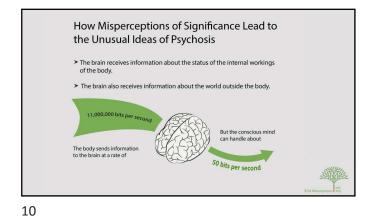


The most common problem that no one talks about





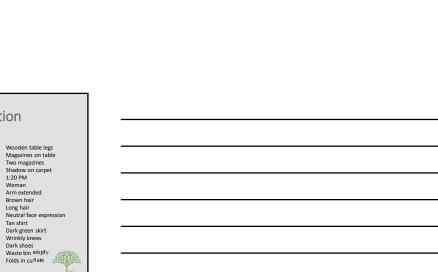




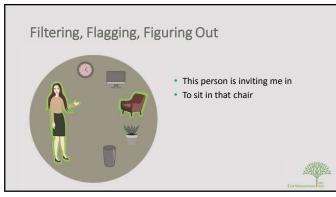
The Brain Receives A LOT of Information

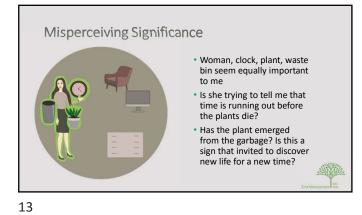
Brown clock housing Orange clock face 5 leaves Wall Clock 5 shadows Waste bin Computer screen Computer stand Desk Cabinet Drawers

Cabinet Drawers Drawer handles Green plan Gray pot Potting soil Desk Brown desktop White leg Blue curtain Window Unequal windowpanes Variations in light from window Purple rug Brown chair Soft cushions Brown pillow Tassels on pillow Tassels on pillow Tassels on pillow Glass tabletop Three table legs



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Summary

- Psychosis is a symptom
- It revolves around misperception
- May involve misperceived sensations (hallucinations)
- Misperceived significance may drive unusual ideas (delusions)
- Psychosis has many causes
 - Over 100 drugs
 - Over 50 medical diseases
 - At least 4 psychiatric conditions



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Schizophrenia

- A longer-term psychiatric condition characterized by
 - Persistent or recurring psychosis
 - Decline in ability to function
 - Not better explained by medical illness
- Affects about 1 in 100 people

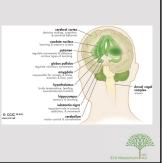


How Cannabis Can Cause Psychosis

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Pharmacology of THC

- The THC in cannabis mimics the action of a brain-made chemical messenger known as anandamide
- THC activates a specific protein (CB receptor)
- Nerve cells with activated CB receptors change their behavior
 Mostly by altering the output of neurotransmitter chemicals



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Dopamine

- Very important in the circuits that assign importance or significance to things or events
- Prominently involved in circuits that mediate reward signals or pleasure
- PET scan studies and other neurochemical studies show that many people with psychosis over-produce dopamine and release excessive quantities of dopamine
- Cannabis increases the release of dopamine in human brain

Cannabis Increases Dopamine Release

- Voruganti, L. N. et al. (2001) 'Cannabis induced dopamine release: an in-vivo SPECT study', Psychiatry research, 107(3), pp. 173–177.
- Mason, N. L. et al. (2019) 'Cannabis induced increase in striatal glutamate associated with loss of functional corticostriatal connectivity', European neuropsychopharmacology: the journal of the European College of Neuropsychopharmacology, 29(2), pp. 247–256.
- Bloomfield, M. A. P. et al. (2016) 'The effects of Δ 9-tetrahydrocannabinol on the dopamine system', Nature, 539(7629), pp. 369–377.



Cannabis, Dopamine, Psychosis

- Increased output of dopamine is a very well-known and very important neurochemical cause of psychosis.
- Cannabis can increase the output of dopamine in humans.



Glutamate

- Over half of the connections between brain cells use glutamate as their chemical message. In terms of number of connections, it's the #1 neurotransmitter
- Glutamate is like the gas pedal. It excites, activates nerve cells
- Critically involved in sensory perception
- Critically involved in shaping nerve circuits and forming memories
- Drugs that reduce the strength of the glutamate signal produce psychosis
- The primary action of THC is to inhibit the release of glutamate (like taking the foot off the gas pedal)

Glutamate: Caught In The Act

"Compared to individuals who were not sensitive to the psychotomimetic effects of Δ 9-THC, individuals who developed transient psychotic-like symptoms (\equiv 70% of the sample) had significantly lower baseline Glx and a 2.27-times higher increase following/0-THC administration."

• 70% of volunteers given THC experienced transient psychosis

- The ones susceptible to psychosis symptoms had:
 - higher baseline glutamate activity (gas pedal was more active)
 - greater inhibition of glutamate release (release of gas pedal was more pronounced)

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GABA

- \circ 30% to 40% of nerve cell connections use GABA to communicate. It's the #2 neurotransmitter.
- GABA is an inhibitory signal it's like the brake.
- THC inhibits the release of GABA (like taking the foot off the brake)
- If anxiety centers (like the amygdala) are under GABA's control, then "taking the foot off the brake" essentially revs up the anxiety engine.



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Taking The Foot Off The Brake in the Amygdala (the anxiety control center)

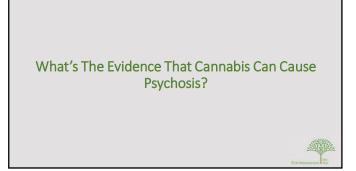
"The principal findings of this study are that a **modest dose** of delta-9-THC resulted in the **acute induction of anxiety symptoms in the healthy volunteers** studied here and the severity of anxiety induced by delta-9-THC was **directly correlated with the baseline availability of CB1 receptors in the amygdala**, a region that has been linked to anxiety and fear processing both in health, and under the influence of delta-9-THC."

Bhattacharyya, S. et al. (2017) 'Acute induction of anxiety in humans by delta-9-tetrahydrocannabinol related to amygdalar cannabinoid-1 (CB1) receptors', Scientific reports, 7(1), p. 15025.

• Differences in anxiety sensitivity to THC may be explained by the availability of CB receptors in the amygdala

Summary: Significant Overlap Pharmacological effects of THC Increasing dopamine release Decreasing glutamate release The most important biochemical changes consistently observed in psychosis Greater synthesis and release of dopamine Diminished responsiveness to glutamate

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Medical Textbooks from the Original Medical Marijuana Era

- The mid-19th to early 20th century was a very drug friendly time
- Cannabis was routinely used as a medicine
- Cannabis preparation, use, and side effects were described in medical textbooks
- Potentially severe mental status risks were routinely noted



Medical Textbooks from the Original Medical Marijuana Era

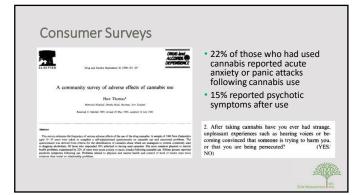
"Occasionally, a species of intoxication is induced, with hallucinations or complete delirium... Among those who use it habitually, it is said ultimately to impair the mental faculties" A Treatise on Therapeutics, and Pharmacology, or Materia Medica, 1858

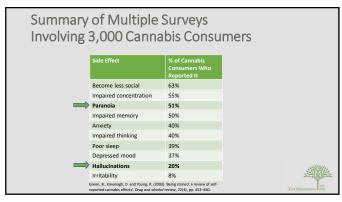
"In large doses it will produce hallucinations... Its habitual use will cause insanity." Materia Medica and Clinical Therapeutics, 1905 "Hallucinations occur, but they are not usually agreeable; they are often painful and are replaced by stupor" A Practical Treatise on Materia Medica and

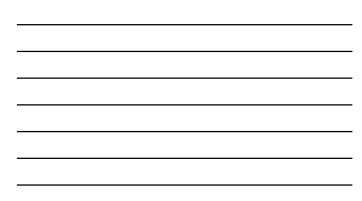
A Practical Treatise on Materia Medica and Therapeutics, 1893

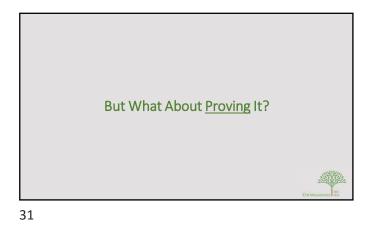
The mo	ost common en	lect,	
however	r, is the develop	pment of	
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A Textbook o Therapeutics	f Materia Medica, Phai , 1908	rmacology and	MO

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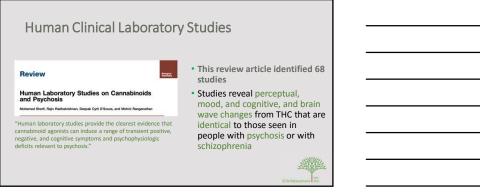




Human Clinical Laboratory Studies

- Administer THC or cannabis extracts to human volunteers (without mental illness)
- Observe if signs of psychosis emerge



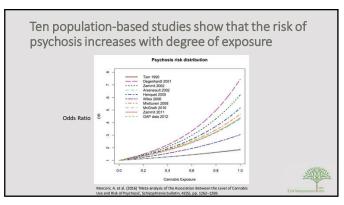


Placebo-Controlled Clinical Trials

- The double-blind, placebo-controlled clinical trial is the gold standard for medical evidence
- Participants are randomly assigned to active treatment (THC) or identical-appearing inactive treatment (placebo).
- Neither the patients taking the pills nor the doctors/study staff administering them and observing the effects know if the pills are active or placebo.
- This design eliminates biased experience and biased observation
- THC is an FDA-approved medication and has undergone this scrt of testing

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Common Adverse Reaction The following adverse reaction	tions were reported in clinical trials at an incidence greater than 1%.	
System Organ Class	Adverse Reactions	
General	Asthenia	
Cardiovascular	Palpitations, tachycardia, vasodilation/facial flush	
Gastrointestinal	Abdominal pain*, nausea*, vomiting*	
Central Nervous System	Dizziness [*] , euphoria [*] , paranoid reaction [*] , somnolence [*] , thinking abnormal [*] , amnesia, anxiety/nervousness, ataxia, confusion, depersonalization, hallucination	
* Actual incidence 3% to 1	0%	



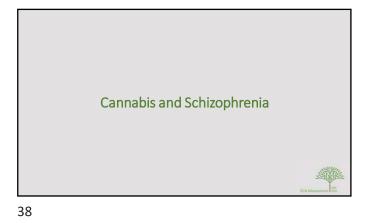


Summary: Cannabis Can Cause Psychosis

- Consumer surveys
- Human clinical laboratory studies
- Double-blind, placebo-controlled clinical trials
- Higher exposure (dose, duration of use) associates with higher risk of psychosis



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National Academies Report

• The National Academies of Sciences, Engineering and Medicine is an independent scientific advisory organization.

• Several legal marijuana states (AZ, AK, CA, OR, WA) were among the co-sponsors of the report.

The full-text report is at: https://www.nap.edu/read/24625/chapter/1

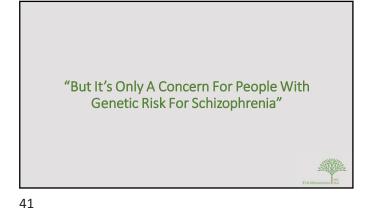


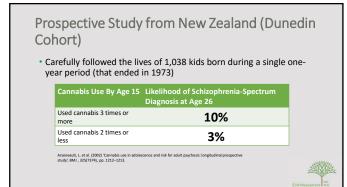
National Academies Report

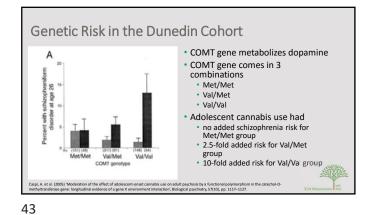
"CONCLUSION 12-1 There is substantial evidence of a statistical association between cannabis use and the development of schizophrenia or other psychoses, with the highest risk among the most frequent users."

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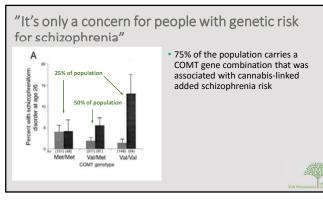












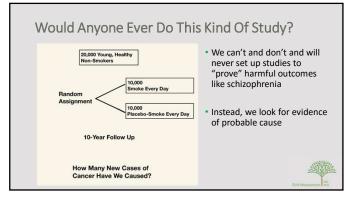




- It might be true that cannabis-associated schizophrenia is only a concern for people with genetic risk factors for schizophrenia
- But family history of mental illness is a very poor guide
- Schizophrenia risk genes are carried by many people without family history of mental illness
- An identical twin of someone with schizophrenia has 100% of their twin's genes, but only a 50% risk of developing schizophrenia
 Environmental triggers are important
 - Cannabis appears to be an environmental trigger
 - If true, then it's causing some schizophrenia cases that could have been avoided

But You Can't PROVE That Cannabis Can Cause Schizophrenia!

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Showing Probable Cause

- Is it biochemically plausible that cannabis could cause schizophrenia? (yes)
- Can we create schizophrenia-like changes in animals by giving them cannabis, or by tweaking their cannabinoid system? (yes)
- Can we create features of schizophrenia in human volunteers under controlled conditions in the clinical laboratory? (yes)
- Is there a relationship between cannabis use and schizophrenia in population studies? $(\ensuremath{\mathsf{yes}})$
- \bullet Does greater degree of cannabis exposure correlate with higher risk of schizophrenia? (yes)

The Significance of Cannabis-Induced Psychosis



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Forecasts Substantially Higher Risk of Developing a Persisting Severe Mental Illness

 46% likelihood of receiving a schizophrenia-spectrum diagnosis within 8 years, based on Finnish long-term followup study of 18,500 people first diagnosed with substance-induced psychosis Nem+/mtki, 1.4 et al. (2013) Substance-induced produces converting the schipphrenia: registerbased study 41/26 finelih patient etc. It becard of clauge/study. 24(1), etc. 44.4

 47% likelihood of being diagnosed with either schizophrenia or bipolar disorder after an initial diagnosis of cannabis-induced psychosis in a Danish study that followed 6,788 individuals.

Half of these conversions to schizophrenia or bipolar disorder occurred with 4.4 years after the initial substance-induced psychosis episode
 Starz, M. 3. _ Notestelt, M. and Hystrig, C. (2013) Mass and Prediction of Conversion to Schedymens or Bipate
 Today Scheduler, M. and Appendix, Telescond of opplane, 73(4), p. 14-150. Conversion

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Quitting vs Continuing After a Cannabis-Induced Psychosis

- "Patients who completely abstained from cannabis after the 1stepisode had no relapse of psychiatric illness.
- They showed marked improvement in socio-occupational functioning as well.
- All those who relapsed to cannabis use had a recurrence of illness.
- Half the patients with predominantly non-affective psychosis progressed to an independent psychiatric disorder within 5.75 years.
 Abstinence later in the course of illness did not improve outcome
- significantly.

This was a small sample (57 cases of CIP identified, 35 could be followed up)
 State, D. et al. (2017) 'Cannabis induced psychosis and subsequent psychiatric disorders', Asian journal of psychiatry, 30, pp.
 189–184.



Summary

 Having an episode of cannabis-induced psychosis proves that the affected cannabis consumer has:

- the genetic vulnerability, and/or
- the the psychological vulnerability, and/or
- the neurological wiring
- that makes psychosis possible.
- An episode of cannabis-induced psychosis signals extremely high risk (nearly 50%) of eventually progressing to schizophrenia or bipolar disorder.
- This would be a good time to reduce exposure to risk factors and to enhance resilience factors.

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Conclusions

- Cannabis can cause psychosis through its effects on dopamine, serotonin, glutamate, and GABA neurotransmitter signals
- Depending on dose and setting, between 1% to 20% of consumers may experience psychosis during cannabis use.
- Cannabis use is associated with approximately 3-fold increased risk of developing schizophrenia
- An episode of cannabis-induced psychosis means that
- the affected person's brain is capable of experiencing psychosis
- there may be up nearly 50:50 risk of progressing to schizophrenia or bipolar disorder

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Conclusions

- An episode of cannabis-induced psychosis means that
 - the affected person's brain is capable of experiencing psychosis
 - there may be up nearly 50:50 risk of progressing to schizophrenia or bipolar disorder
- The ability for cannabis to cause psychosis or schizophrenia is:
 - Biochemically plausible
 - Suggested by animal studies
 - Proven (for psychosis) by human clinical laboratory studies
 - Consistent with population studies
- This is something that should be as widely-known and publicized so that people have the chance to avoid finding out the hard way

