CANNABIS USE DISORDERS: LATEST DATA ON CANNABINOID FORMULATIONS, ROUTES OF ADMINISTRATION AND TREATMENT

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Cannabis is the most frequently used illicit drug worldwide, and treatment admissions for cannabis use disorders have risen considerably in recent years. In addition, with broader societal acceptance of recreational and ‘medical’ cannabis in many countries, there are rapid changes in the formulation and route of administration, which have important implications for abuse liability.

This presentation will first describe the range of ways cannabinoids are currently abused: smoking plant-based cannabis, vaporization, oral formulations, synthetic cannabinoids. Second, we will describe the latest research on potential treatments for cannabis use disorder. Although psychosocial strategies improve treatment outcome, relapse rates remain high so the development of an approved medication for the treatment of cannabis dependence is a priority. Double-blind, placebo-controlled studies testing potential pharmacotherapies will be presented. This will include strategies to directly reduce cannabis intoxication, cannabis withdrawal (i.e., irritability, anxiety, disrupted sleep) and relapse to cannabis. To date, the most promising medications include a slow onset, long-duration oral CB1 receptor agonist, nabilone, an anti-hypertensive, lofexidine in combination with the oral cannabinoid, dronabinol, an opioid antagonist, naltrexone, and the GABAergic agonist, gabapentin.

These recent findings suggest that more treatment options may soon be developed for those seeking treatment for cannabis-related problems. Supported by NIDA (DA09236, DA19239, DA031005)