

MEDICINAL CANNABIS FOR PLHIV

The Victorian AIDS Council (VAC) supports the availability of medicinal cannabis products to alleviate the symptoms of people living with HIV (PLHIV) or AIDS who experience severe pain from their condition, or side effects from treatment.

NATIONAL ACCESS SCHEMES

Medicinal cannabis products are currently available via a doctor through two schemes managed by the Therapeutic Goods Administration: the Special Access Scheme, or if the doctor is an authorised prescriber, the Authorised Prescriber Scheme.¹

These schemes are complicated. Approval to prescribe medicinal cannabis products is often subject to case-by-case assessments, different state and territory rules, and import licences and permits that cause significant delays to access.

In order to reduce delays, the Federal Government has started warehousing imported medicinal cannabis products, which is intended as an interim measure until local cultivation is able to meet demand.² In 2016, the Federal Government amended the *Narcotic Drugs Act 1967* to legalise the growing of cannabis for medical and scientific purposes.³ The change in federal law has also allowed state and territory governments to determine their own access schemes.

VICTORIAN ACCESS SCHEME

In April 2016, the Victorian Parliament passed the *Access to Medicinal Cannabis Act 2016*, which allows certain groups of people to access approved cannabis products for medical purposes. Though eligibility under the Victorian scheme has initially been restricted to children with severe and intractable epilepsy, the Independent Medical Advisory Committee, which provides information and advice to the Health Minister and Department of Health and Human Services, may recommend expanding the scheme to include other groups, such as people experiencing symptoms of HIV/AIDS, or side effects of their treatment. This recommendation has already been made by the Victorian Law Reform Commission in its 2015 report on medicinal cannabis, in which it recommended that people with HIV or AIDS who experience severe pain from their condition, or side effects from treatment, should be given access to medicinal cannabis.⁴

Within the Department of Health and Human Services, the Office of Medicinal Cannabis has been established to develop a medicinal cannabis framework. It has been over a year since the *Access to Medicinal Cannabis Act 2016* was passed in Victoria, and we still don't have a Victorian framework in place that provides access to medicinal cannabis. When it is finally implemented, the Victorian scheme will provide access to lawful, quality assured products.

EVIDENCE

Most researchers are rightly hesitant to make broad and assertive claims about the therapeutic benefit of medicinal cannabis products without first subjecting them to the same

scrutiny as other medications and pharmaceutical agents. Anecdotally at least, cannabis has been reported as having therapeutic benefits for people with symptoms of HIV or AIDS and associated co-morbidities. There is also mounting evidence that cannabis can help relieve particular symptoms, such as loss of appetite and neuropathic pain, with few side effects of its own.⁵ However, there is a need for rigorous clinical trials that test the efficacy of particular methods of administration, dosage, and long-term effects of the use of medicinal cannabis products in PLHIV

MEDICINAL CANNABIS & PEOPLE LIVING WITH HIV

PLHIV have long used cannabis therapeutically to address a range of issues, primarily symptoms of HIV/AIDS, as well as side effects of HIV treatments and treatments associated with co-morbidities and opportunistic illnesses.⁶ The symptoms commonly treated include nausea, vomiting, decreased appetite, headaches, pain, insomnia, depression, anxiety, and weight loss.

VAC believes that, to the greatest extent possible, people should have agency with regard to their own health care. This includes, in consultation with appropriate medical practitioners, decisions about the best course of treatment. People experiencing chronic medical conditions may prefer the symptom and pain relief provided by medicinal cannabis to other medications that have worse side effects.

RECOMMENDATIONS

PLHIV, whose symptoms and treatment side effects may be alleviated by the use of medicinal cannabis products, should be granted access to these products through the Victorian Medicinal Cannabis Scheme.

The Victorian and Commonwealth Governments should fund clinical trials to determine the appropriate strengths, doses, and methods of administration for medicinal cannabis products, as well as clinical trials to assess their efficacy, in PLHIV.

REFERENCES

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- ⁵ Furler, M., et al. (2004). Medicinal and recreational marijuana use by patients infected with HIV. *AIDS Patient Care and STDs*, 18(4): 215-230; Grotenhermen, F., and Muller-Vahl, K. (2016). Medicinal uses of marijuana and cannabinoids. *Critical Reviews in Plant Sciences*, 35(5-6): 378-405; Murnion, B. (2015). Medicinal Cannabis. *Australian Prescriber*, 38(6): 212-215; Woolridge, E. et al. (2005). Cannabis use in HIV for pain and other medical symptoms. *Journal of Pain and Symptom Management*, 29(4): 360-363.
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