Petition for Anxiety Disorder as qualifying medical condition under Lynn and Erin Compassionate Use Act Dedam and Richmond

Index

- Introductory narrative of individuals requesting inclusion of new medical condition
 Proposal that includes medical benefits
- 3. References

Petition for Anxiety Disorder as qualifying medical condition under Lynn and Erin Compassionate Use Act Dedam and Richmond

Introductory narrative of individuals requesting inclusion of new medical condition

Petition for Anxiety Disorder as qualifying medical condition under Lynn and Erin Compassionate Use Act

Stephanie Richmond 2400 Tucker Road NE Albuquerque, NM 87131 505-385-5636 Jean-Paul Dedam 4901 Lang Avenue NE Albuquerque, NM 87109 505-842-8171

PA-C Richmond and Dr. Dedam are both members of the New Mexico Medical Advisory Board and each have a professional interest as medical providers in the inclusion of this diagnosis for the Lynn and Erin Compassionate Use Act to assist their patients and provide quality healthcare with medical cannabis.

Proposal and medical benefits

Generalized Anxiety Disorder (GAD), social anxiety disorder, medication-induced anxiety, panic disorder, specific phobias and anxiety disorder due to another medical condition incredibly common medical conditions affecting as much a 25% of the population in some meta-analyses (Baxter 2013). These conditions can cause significant disruption in the lives of those who suffer from them, as well as having severe negative consequences on that person's health.

While many good medical treatments exist, they don't always work for every patient, leaving as much at 40% of patients without relief (Bystrisky 2006). Some common treatments of anxiety, such as benzodiazepines, carry a significant risk for abuse, dependence and dangerous withdrawal syndromes. Mental health resources in this state are also severely limited and many patients lack access to care.

Self-medication and patient reports of cannabis use for treatment of anxiety disorders are also common and effective. One study tracking 1399 Medical Cannabis users found a 58% reduction in anxiety and stress symptoms that did not diminish overtime (Cuttler 2018).

While currently there have been no large randomized controlled trials, an observational study of 368 Medical Cannabis user again demonstrated improvement in anxiety symptoms as well as improved sleep (Martin 2021).

Despite the lack of studies, there is also amply basic science evidence to support the use of Medical Cannabis for anxiety. Activation of the Cannabinoid type 1 Receptor (the receptor stimulated by THC) in the brain has been for decades to have an anxiolytic effect at low and moderate does (Lutz 2015). While high doses can actually cause a paradoxical increase in anxiety, with proper medical guidance and supervision this can be easily avoided with dosing and concomitant CBD administration. This biphasic effect has been used an argument against the use of Medical Cannabis for anxiety. However, since cannabis is now legalized recreationally and it makes far more sense to have this treatment under qualified medical supervision.

Medical cannabis has also been proven safe, is less addictive than benzodiazepines and is safer in both accidental and intentional overdose to all current conventional pharmacologic treatments.

To draw upon my own clinical experience in working with hundreds of cancer patients here in New Mexico, relief of stress and anxiety, be it from a pre-existing diagnosis or secondary to their cancer diagnosis or the treatment of their cancer, remains on the most consistent patient reported benefits.

Petition for Anxiety Disorder as qualifying medical condition under Lynn and Erin Compassionate Use Act Dedam and Richmond

References:

Baxter AJ, Scott KM, Vos T, Whiteford HA. Global prevalence of anxiety disorders: a systematic review and meta-regression. Psychol Med. 2013 May;43(5):897-910. doi: 10.1017/S003329171200147X. Epub 2012 Jul 10. PMID: 22781489.

Bystritsky A. Treatment-resistant anxiety disorders. Mol Psychiatry. 2006 Sep;11(9):805-14. doi: 10.1038/sj.mp.4001852. Epub 2006 Jul 18. PMID: 16847460.

Cuttler C, Spradlin A, McLaughlin RJ. A naturalistic examination of the perceived effects of cannabis on negative affect. J Affect Disord. 2018 Aug 1;235:198-205. doi: 10.1016/j.jad.2018.04.054. Epub 2018 Apr 6. PMID: 29656267.

Martin EL, Strickland JC, Schlienz NJ, Munson J, Jackson H, Bonn-Miller MO, Vandrey R. Antidepressant and Anxiolytic Effects of Medicinal Cannabis Use in an Observational Trial. Front Psychiatry. 2021 Sep 9;12:729800. doi: 10.3389/fpsyt.2021.729800. PMID: 34566726; PMCID: PMC8458732.

Lutz B, Marsicano G, Maldonado R, Hillard CJ. The endocannabinoid system in guarding against fear, anxiety and stress. Nat Rev Neurosci. 2015 Dec;16(12):705-18. doi: 10.1038/nrn4036. PMID: 26585799; PMCID: PMC5871913.