

# Cannabis

Cannabis-based medicinal products could help thousands of people with MS. November 2018 saw a change in the law on using cannabis as a medicine in the UK. After specialists like neurologists have considered other options, they're now able to prescribe cannabis-based products to a very small number of people. This factsheet looks at what the change in the law actually means, and how cannabis might help with MS symptoms.

## Background

Following a campaign to change the law, from 1 November 2018 some doctors have been able to prescribe cannabis-based products ('medicinal cannabis'). But they've been advised to do this for only a very small number of patients. GPs (family doctors) can't prescribe these products. Only specialist doctors like neurologists or pain specialists can do this.

## Now the law's changed, can I get cannabis for my MS?

Specialist doctors have been given interim (temporary) guidance on prescribing cannabis-based products. They'll be asked to follow this until final guidance from the National Institute for Health and Care Excellence (NICE) is ready by October 2019.

### Pain

The guidance is very restrictive in how cannabis based products can be prescribed. For example, it doesn't say doctors can give cannabis products to help with chronic (long-lasting) pain. This is one of the two symptoms for which there's evidence that using cannabis could benefit people with MS.

### Five things you should know about cannabis, MS and the law

1. Products made from cannabis have been shown to help with MS pain and spasticity (muscle spasms and stiffness)
2. Around 10,000 people in the UK with MS pain and spasticity could benefit from cannabis-based products
3. From November 2018, if all other treatments have been considered, specialist doctors can legally prescribe cannabis-based products to help with spasticity caused by MS
4. The restrictive guidelines given to doctors on prescribing these products mean people will probably find it no easier to get them than before the law changed
5. Buying 'street cannabis' or growing or using it yourself is still against the law, even if you say it's to help with MS symptoms

## Spasticity

Evidence shows people with MS could also benefit from using cannabis-based products for muscle stiffness and spasms (spasticity).

But in the interim guidance about prescribing cannabis-based products, no specific recommendations were made on spasticity. To fill this gap, the Association of British Neurologists has been asked to make recommendations on this by January 2019.

The current guidance says that if all other treatments for spasticity have been considered, a neurologist could look at cannabis-based products to help you.

But the main other treatment option (and the only drug with a licence to be used for MS spasticity) is a drug based on cannabis called Sativex. That drug is only available on the NHS in Wales. If you live in Scotland, England and Northern Ireland you basically can't get it. Read more about Sativex on page 3.

### So has anything really changed?

In the short term, even though the law has changed, people with MS will probably find it no easier to get cannabis-based products. This is because the guidance given to doctors is so restrictive, and because Sativex still isn't available on the NHS in most of the UK.

But now that cannabis-based products can be seen legally as medicines, this could lead to more research into these products. That means we could get more evidence about their benefits.

We still don't know exactly what kind of cannabis-based products doctors will be allowed to prescribe. We hope this will be clearer when NICE publish their guideline on cannabis by October 2019.

Given the health risks of smoking tobacco, it's most likely that the products allowed will be capsules or oils.

## What are cannabis-based products?

These are preparations or products that are (or have in them) cannabis, cannabis resin or cannabidiol (or an ingredient made from cannabidiol).

Cannabidiols are chemicals in cannabis. The two you're most likely to find in these products are tetrahydrocannabinol (THC) and cannabidiol (CBD). THC gets you 'high'; CBD doesn't. Of the chemicals in cannabis that might help with MS symptoms, these two have been studied the most.

The cannabis-based medicinal products that the change of the law allow doctors to prescribe include oils, such as ones you spray into your mouth (or you put some drops of it under your tongue). They also include capsules that you can swallow.

The change in the law doesn't mean home grown or street cannabis can be used legally as medicine. The law rules them out as cannabis-based products that can be used as medicinal cannabis.

The drug Sativex, which is made from cannabis plants, isn't included in this change in the law or the current guidelines. Read more about this drug on page 3.

## Time line

**1 Nov 2018** - the law changed. Cannabis products rescheduled from being a Schedule 1 drug (with no medical value) to being a Schedule 2 drug. Specialist doctors are able to prescribe cannabis-based products to treat some medical conditions.

NHS England and the Royal College of Physicians publish interim guidance on prescribing cannabis.

**January 2019** - the Association of British Neurologists publishes recommendations on prescribing cannabis-based products to treat spasticity in MS.

**By October 2019** - final guidelines for doctors covering England expected from NICE.

Wales, Scotland and Northern Ireland are expected to follow what happens in England.

# What do people with MS use cannabis and cannabis-based products for?

When we surveyed nearly 4,000 people with MS in 2014, one in five said they'd used cannabis to help with their symptoms. One in 14 (7%) were using it at the time. Many had been put off using it because it's against the law. Seven in ten people felt cannabis for medicinal use should be legal.

People told us cannabis helped most with their pain (68%) and spasticity (62%), but also to sleep better.

Four in ten people who were using cannabis told us this was because they couldn't get a prescription for a licensed drug to treat their symptoms. The licensed drug for spasticity, Sativex, isn't available on the NHS in most parts of the UK. There are treatments available on the NHS for pain or spasticity that aren't based on cannabis (such as gabapentin or baclofen), but these don't work for many people.

For these reasons some people have turned to breaking the law to buy and use cannabis. This is despite the lack of controls on the quality, safety and strength of cannabis that people get illegally.

## Different ways of using cannabis

### Cannabis-based products with medical licences already

**Epidiolex**, a drug to treat rare types of epilepsy in children, is expected to be licensed early in 2019. Until then there are just two cannabis-based drugs that already have a medical licence in the UK:

**Cesamet** (the brand name for nabilone) – a drug cancer patients take to stop them feeling sick during chemotherapy. Nabilone has an artificial version of THC in it. It doesn't have a licence to be used for MS, but some doctors prescribe it for MS pain or muscle spasms.

**Sativex** (the brand name for the drug nabiximols) – the only drug made from cannabis that's currently

licensed specifically for people with MS (for their spasticity). It's a mouth spray made from an equal mix of THC and CBD.

### More about Sativex

The National Institute for Health and Care Excellence (NICE) decides which drugs are available on the NHS in England. They ruled in 2014 that the benefits of Sativex are too small to justify what it would cost the Health Service.

But in 2014 the All Wales Medicines Strategy Group, who decide which medicines are available on the NHS there, said Sativex was cost-effective, and could be given to people in Wales when other anti-spasticity drugs don't work.

So you can't get this drug on the NHS in most parts of the UK, except Wales. And it can even be difficult to get Sativex in Wales. Our medical experts say special requests to the NHS to pay for a patient to get Sativex (Individual Funding Requests) are nearly always turned down.

A doctor anywhere in the UK can give you a private prescription for Sativex. But this costs over £500 for a month's supply. The drug's makers and NICE can't agree on a lower price for the drug. We want to see Sativex made available on the NHS to more people with MS who could benefit from it.

### Cannabis-based products without medical licences at the moment

For some time products have been on sale that have CBD in them. These won't get you 'high' because there's little or no THC in them.

CBD-based products include oils and capsules that you take by mouth (for example, under your tongue or with a mouth spray). You can also vaporise the oil, which gives a faster effect but for a shorter time.

The law says these products can't be sold in the UK for medicinal use without a medical licence. You might see them sold as 'food supplements'. It's never been against the law for you to have these products if they only have CBD in them (and no THC).

### Recreational cannabis (still illegal after November 2018)

Cannabis that's grown and sold illegally comes as:

- **marijuana** or '**weed**'. This is the plant's dried leaves and flowers. Recent years have seen

skunk become by far the most common type. That's a very strong strain with high levels of THC

- **hash.** This is the drug in a resin form ready to be smoked. These days only a very small amount of street cannabis is this weaker type
- **cannabis oils.** These can have any level of CBD or THC in them. They're smoked, vaporised (breathed in after heating it), baked in things like cakes, or taken by mouth.

## How cannabis helps with some MS symptoms

People's symptoms are eased by chemicals in cannabis called cannabinoids. The two that have been studied most are THC and CBD.

Evidence from our medical experts points to cannabis having the potential to help around 10,000 people with MS with pain and spasticity symptoms. These are the people that existing licensed treatments won't work for.

In our 2014 survey the two symptoms people said they used cannabis most for were pain and spasticity. The evidence that cannabis products have an effect is strongest for these two symptoms. Many people also told us lack of sleep made their MS symptoms worse, and cannabis helps them to sleep.

People told us they also used cannabis for (in order of popularity) problems with walking, fatigue, depression/anxiety, poor balance and coordination, tremor, general bladder problems, sexual difficulties, poor attention, memory and problem solving, bowel problems, eyesight problems, swallowing and speech difficulties. There's no strong evidence for cannabis helping with these MS symptoms.

## The negative effects of cannabis

If you buy cannabis illegally, you can't be sure how strong cannabis is or what it might be mixed with. So the effects of street cannabis won't always be the

same. As well as effects that you might want, cannabis can cause less welcome changes such as dizziness, sleepiness, feeling drunk, impaired driving, and feeling sick. High doses may slow down reaction time, change your blood pressure and heart beat, and affect your sight and coordination.

If you or your family have a history of mental health problems (such as schizophrenia, bipolar disorder, anxiety and depression), using street cannabis can trigger these or make these worse.

Smoking cannabis can affect your breathing, give you bronchitis and might raise your risk of a heart attack. It's not yet clear if it makes you more likely to get diabetes, lung diseases or have a stroke. There's no evidence it causes cancer. You can become dependent on cannabis, especially if you use it regularly.

Some studies have found that when people with MS use cannabis, soon afterwards it affects for a while how their brains work. It makes their cognition (memory and thinking) poorer. But this isn't seen in people who use the cannabis-based drug Sativex, even though it has THC in it.

## Risks of smoking cannabis with tobacco

Most people smoke cannabis in 'joints' mixed with tobacco. Our 2014 survey showed more than eight in ten people smoked their cannabis. If you smoke it with tobacco, not only do you have the well-known smoking risks (cancers, stroke, heart disease and so on), but there are extra risks for people with MS. Smoking tobacco can:

- give you more relapses, more lesions (areas of damage in your brain or spinal cord) and make you more disabled sooner
- speed up how fast you go from relapsing MS to secondary progressive MS
- make some MS drugs (disease modifying therapies) work less well.

Read more about smoking and MS at [mssociety.org.uk/smoking](https://www.mssociety.org.uk/smoking)

For these reasons we recommend that people don't smoke cannabis. There's less harm if you:

- take it by mouth by putting drops of cannabis oil under your tongue
- swallow capsules
- use a mouth spray

Vaping (heating the oil and breathing in the vapour) is another way of taking cannabis without smoking it. But for people with MS there may be added risks from breathing in vapour that we don't yet know about.

## What the research says

The evidence to back the use of cannabis for medicinal reasons isn't overwhelming. But our medical experts feel there's enough to say cannabis is likely to benefit up to one in ten people with MS in the UK (around 10,000 people) with pain or spasticity when other licensed treatments don't work.

We looked at the trials into cannabis and cannabis-based drugs for treating MS. This included two big reviews from the US into the research from around the world, one from 2014 and the latest from 2017. It also included a review by Dame Sally Davies, Chief Medical Officer for England and Chief Medical Advisor to the UK Government, which backed legalising medicinal cannabis.\*

### Smoking cannabis

The review from 2014 didn't find enough evidence that smoking cannabis was safe or effective against MS symptoms such as pain or spasticity.

### Cannabis products

Both reviews found that people with MS who used cannabis-based products (pills or sprays with cannabis or THC or CBD in them) felt less pain. They also found people felt their spasticity had improved. But when their spasticity was tested, it wasn't clear that it had actually got any better – the evidence for this was weak.

The reviews found no evidence that cannabis products helped with tremor or overall bladder problems. The 2017 review found some evidence that cannabis or cannabis products helped people sleep.

Our own medical experts feel there's enough evidence that cannabis products can help with pain and spasticity. But they don't feel there's enough evidence to show they can help with bladder, tremor or any other MS symptoms.

## Cannabis and the law

The law on cannabis as a medicine has changed, but it's still a Class B drug under the Misuse of Drugs Act in the UK. Even if you say it's to help with your MS, it's still against the law to have it, grow it or supply it. 'Supply' includes sharing the drug with someone or giving it (even for free) to friends or relatives.

Raw cannabis, despite the recent change in the law, is not classed as a medicine. The law still doesn't allow you to use the fact you were using street cannabis to help with your MS symptoms as a defence.

We don't recommend people break the law to get cannabis, especially now people with MS might be able to access cannabis products for medicinal use when other licensed treatments haven't worked. We've made this factsheet because we believe people should have information on legal types of cannabis products. That way they can weigh up their possible benefits against the risks.

## More information

You'll find more on this topic at [mssociety.org.uk/cannabis](https://mssociety.org.uk/cannabis)

You can read the NHS guidance for patients about medicinal cannabis at:

[nhs.uk/conditions/medical-cannabis/](https://nhs.uk/conditions/medical-cannabis/)

If you'd like references for anything we say in this factsheet, call **0300 500 8084**.

\* 'Summary of evidence-based guideline: Complementary and alternative medicine in MS' by the American Academy of Neurology. 2014. [aan.com/Guidelines/home/GetGuidelineContent/650](https://aan.com/Guidelines/home/GetGuidelineContent/650)

'The Health Effects of Cannabis and Cannabinoids' by the National Academies of Sciences, Engineering and Medicine. 2017. [nap.edu/resource/24625/Cannabis\\_committee\\_conclusions.pdf](https://nap.edu/resource/24625/Cannabis_committee_conclusions.pdf)

Davies, SC, "Cannabis Scheduling Review Part 1, The therapeutic and medicinal benefits of cannabis based products – a review of recent evidence" London: Department of Health and Social Care (2018) [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/722010/CMO\\_Report\\_Cannabis\\_Products\\_Web\\_Accessible.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/722010/CMO_Report_Cannabis_Products_Web_Accessible.pdf)

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## MS Helpline

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### FS 30

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