

Cannabis Use,
Medication
Adherence, and
Symptom Intensity:
Exploring the
Complex Interplay

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Cannabis & FEP

- Cannabis use is common in First Episode Psychosis (FEP)
- Cannabis use is a risk factor for psychosis
- Cannabis use increases psychotic symptoms
- Cannabis use impacts the outcome of FEP
- Dopamine is implicated in substance use and substance craving
 - Antipsychotics may have a role in treating substance use









Dopamine and Drugs

- Dopamine is a central player in drug reward and drug conditioning (Wise, 2004)
- D2 antagonists block the re-enforcing effect of stimulants in animals (Dewit & Wise, 1977)
- Case series, retrospective analyses, and open label trials suggest utility of atypicals in SUD
 - RCTs show less consistent evidence
 - One study showed Clozapine-users had less cannabis craving vs. Risperidone (Machielsen 2012)









Research Objectives

- How many PEPP patients use cannabis? How many stop?
- Do patient characteristics or illness severity at baseline predict which cannabis users will cease to consume?
- Does outcome differ between those with persistent use and those who stop using?
- Is medication adherence, medication choice, or medication dose associated with cessation of marijuana use?









Sample/Methods

- 192 Consecutive Admissions to PEPP Montreal
 - 186 with complete baseline data & SCID available
 - 145 (75%) with sufficient data after 12 month
- Followed for 12 Months as per usual PEPP protocol
 - PANSS, BPRS, Calgary Depression etc.
 - SCID at baseline and 12 months
 - THC Abuse/Dependence from SCID diagnoses











How Many Use?

	<i>n</i> (n=186)	%
Any lifetime SUD	104	55.9
Any active SUD	70	37.6
THC Use disorder, lifetime	93	50.0
THC Use disorder, active	62	33.3
THC Abuse	27	14.5
THC Dependence	35	18.8
Polysubstance Use d/o	11	5.9









How Many Stop? Who?

- Of 48 Subjects with a THC Use Disorder
 - 28 (58.3%) continued THC Use
 - 20 (41.7%) stopped THC Use
- Likelihood of stopping predicted by drug severity score
- Diagnosis, Demographics, Symptom severity at baseline not associated w/ likelihood of ceasing THC use

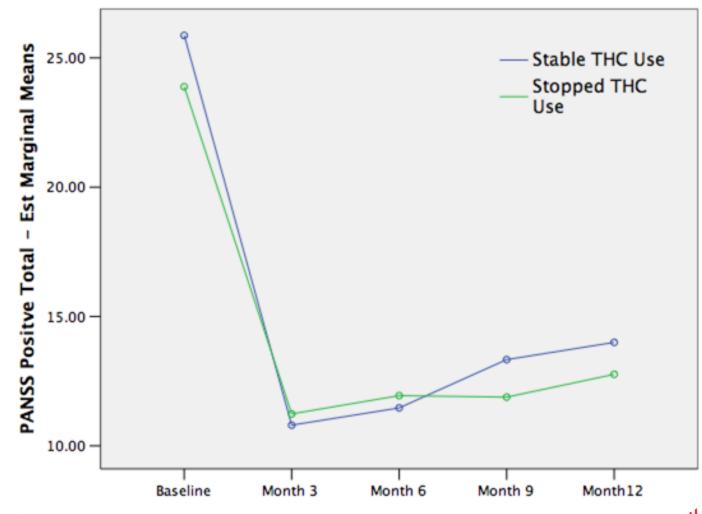






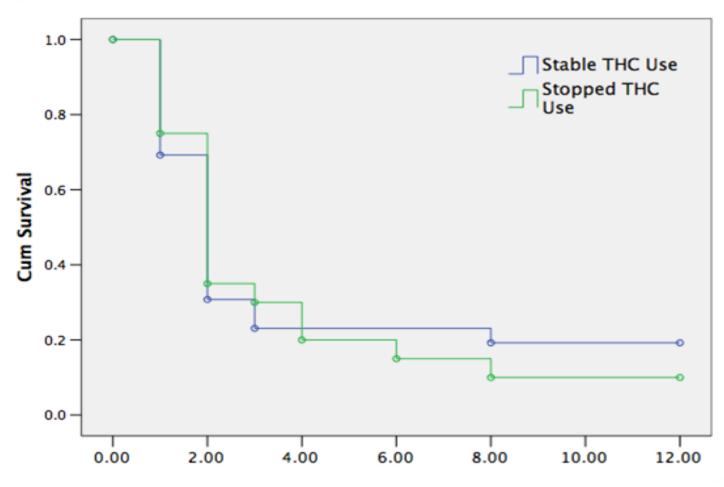


Is Outcome Better?





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INTERVENTION PRÉCOCE ET PRÉVENTION DES PSYCHOSES FARLY INTERVENTION IN PSYCHOSIS

THC and Medication Adherence

• At 12 months, stable users are more likely to be compliant to their medications compared to those who stopped

	Stable Use	Stopped Use
Compliant	23 (92%)	8 (40%)
Non-Compliant	2 (8%)	12 (60%)

Fisher's Exact p = .014









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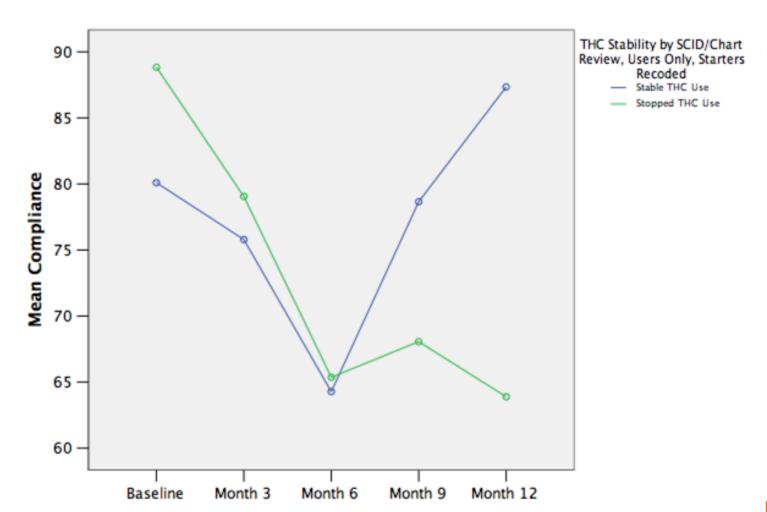


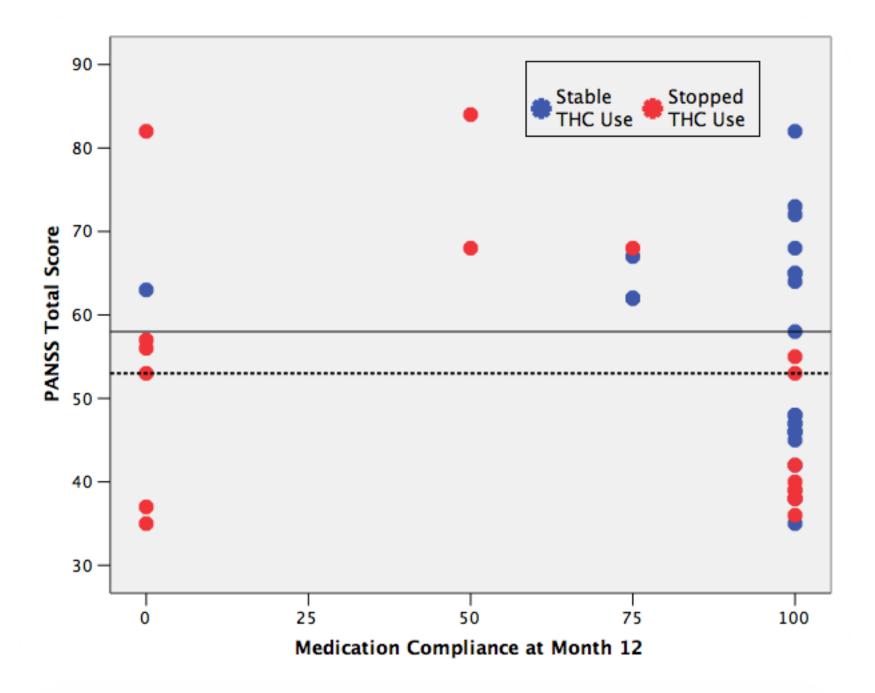






THC and Medication Adherence







- Drug craving is dopamine mediated
- Do antipsychotic medications influence craving levels and craving responsiveness for marijuana?









Methods:

- 30 marijuana-using FEP patients recruited during their first six months of follow-up
- Monthly evaluations for three months
 - Questionnaire on recent drug consumption and medication adherence
 - Marijuana Craving Scale administered 3 x
 - Base
 - Mild Cue
 - Moderate Cue









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- Results (so far...)
 - Marijuana craving is cued by the stories
 - Levels of craving unrelated to levels of positive, negative, or depressive symptoms
 - Craving intensity at each assessment are strongly correlated to craving at the first assessment
 - No difference in craving levels if people are taking their medications





