

# Authorizing Cannabis for Medical Purposes

<https://policybase.cma.ca/link/policy11514>

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|---------------|---|
| POLICY TYPE   | Policy document                               |
| LAST REVIEWED | 2020-02-29                                    |
| DATE          | 2015-02-28                                    |
| TOPICS        | Pharmaceuticals, prescribing, cannabis, drugs |

## Documents



### CMA POLICY

#### Authorizing Cannabis for Medical Purposes

The legislation of cannabis for recreational purposes came into effect with the Cannabis Act in October 2018, and patients continue to have access to cannabis for therapeutic purposes. The Cannabis Regulations have replaced the Access to Cannabis for Medical Purposes Regulations. Patients can obtain cannabis for medical purposes when a physician or nurse practitioner provides a "medical document", authorizing its use, and determining the daily dried cannabis dose in grams.

With the authorization, patients have the choice whether to (a) buy directly from a federally licensed producer, (b) register with Health Canada to produce a limited amount for personal consumption, (c) designate someone to produce it for them, or (d) buy cannabis at provincial or territorial authorized retail outlets or online sales platforms, if above the legal age limit.

While acknowledging the unique requirements of patients suffering from a terminal illness or chronic disease for which conventional therapies have not been effective and for whom cannabis may provide relief, physicians remain concerned about the serious lack of clinical research, guidance and regulatory oversight for cannabis as a medical treatment. There is insufficient clinical information on safety and efficacy for most therapeutic claims. There is little information on oral therapeutic and food dosages and knowledge on interactions with medications. Besides the need for appropriate research, health practitioners would benefit from unbiased, accredited educational modules and decision support tools based on the best available evidence.

The Canadian Medical Association has consistently expressed concern with the role of gatekeeper that physicians have been called to take as a result of court decisions. Physicians should not feel obligated to authorize cannabis for medical purposes.

Physicians who choose to authorize cannabis for their patients must comply with their provincial or territorial regulatory Colleges' relevant guideline or policy. They should also be familiar with regulations and guidance, particularly:

- Health Canada's Information for Health Care Practitioners – Medical Use of Cannabis (Interim): Summary and Quick Start Sheet<sup>1</sup>
- the Canadian Medical Protective Association's guidance<sup>2</sup>
- the College of Family Physicians of Canada's preliminary guidance Authorizing Dried Cannabis for Chronic Pain or Anxiety<sup>3</sup> and
- the 5-year-old guideline for prescribing medical cannabis in its primary care, published in the Canadian Family Physician<sup>4</sup>

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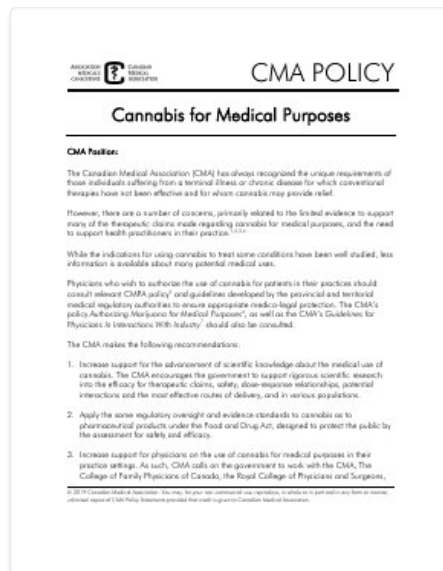
# Cannabis for Medical Purposes

<https://policybase.cma.ca/link/policy10045>

|               |   |
|---------------|---|
| POLICY TYPE   | Policy document                               |
| LAST REVIEWED | 2019-03-03                                    |
| DATE          | 2010-12-04                                    |
| TOPICS        | Pharmaceuticals, prescribing, cannabis, drugs |

## Documents

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# Complementary and alternative medicine (update 2015)

<https://policybase.cma.ca/link/policy11529>

|             |   |
|-------------|---|
| POLICY TYPE | Policy document   |
| DATE        | 2015-05-30  |
| REPLACES    | Complementary and alternative medicine (Update 2008)                            |
| TOPICS      | Health care and patient safety<br>Pharmaceuticals, prescribing, cannabis, drugs |

## Documents

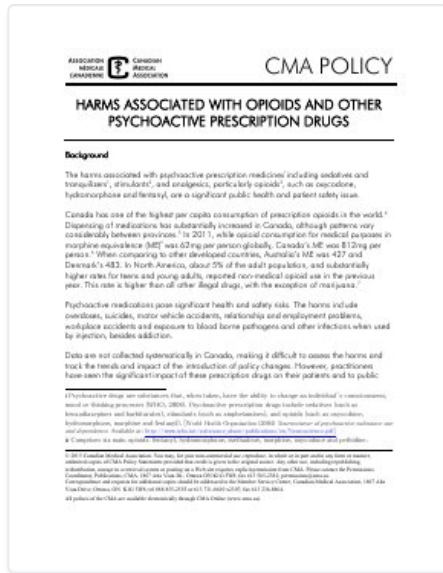


# Harms associated with opioids and other psychoactive prescription drugs

<https://policybase.cma.ca/link/policy11535>

POLICY TYPE Policy document  
DATE 2015-05-30  
TOPICS Pharmaceuticals, prescribing, cannabis, drugs

## Documents

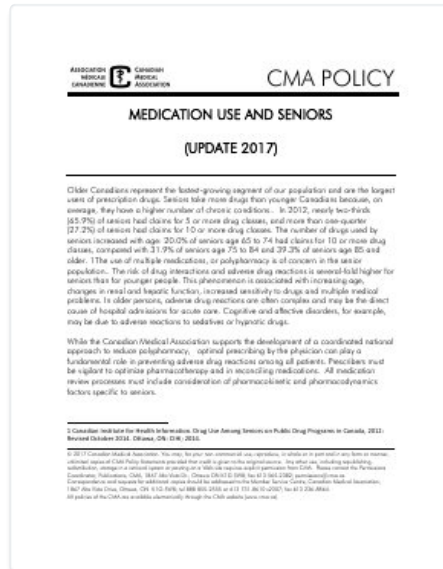


# Medication use and seniors (Update 2017)

<https://policybase.cma.ca/link/policy10151>

|               |   |
|---------------|---|
| POLICY TYPE   | Policy document                               |
| LAST REVIEWED | 2019-03-03                                    |
| DATE          | 2011-05-28                                    |
| REPLACES      | Medication use and seniors                    |
| TOPICS        | Pharmaceuticals, prescribing, cannabis, drugs |

## Documents



# Position statement on prescription drug shortages in Canada

<https://policybase.cma.ca/link/policy10756>

|               |   |
|---------------|---|
| POLICY TYPE   | Policy document                               |
| LAST REVIEWED | 2017-03-04                                    |
| DATE          | 2013-05-25                                    |
| TOPICS        | Pharmaceuticals, prescribing, cannabis, drugs |

## Documents

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**CMA POLICY**

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**Position Statement on Prescription Drug Shortages in Canada**

The incidence of shortages of prescription drugs in the past few years and the ongoing disruptions to supply experienced in Canada and globally are matters of grave concern to the Canadian Medical Association (CMA) and its members. Drug shortages are having a detrimental impact on the delivery of patient care and treatment and the availability of health care services across the country.

CMA has advocated for a thorough examination of the drug supply system to identify points where risk in Canada can influence supply problems. Solutions will have to tackle the various players in the drug supply chain, from manufacturers through to health care providers and levels of government.

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**Background**

Drug shortages are not a problem confined to Canada. In the United States the number of drug shortages from 2000 to 2010 grew by more than 200 per cent. In 2011, 251 shortages were reported in the U.S.A.<sup>1</sup> Canada has not had an accurate count of the number of drugs in short supply over past years but in April 2013, 273 drugs were listed on the industry sponsored Canada Drug Shortage Monitor.<sup>2</sup>

Factors that influence the occurrence of a drug shortage can occur at any stage of the drug supply chain and any disruptions can ripple through the system.

1. U.S. Food and Drug Administration, Drug Shortages, for your complete list, visit [www.fda.gov/oc/ohrt/drug-shortages](http://www.fda.gov/oc/ohrt/drug-shortages).  
2. Canadian Medical Association, Shortages, for your complete list, visit [www.cma.ca/shortages](http://www.cma.ca/shortages).  
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All policies of the CMA are available electronically through [www.cma.ca](http://www.cma.ca).

# Vision for e-Prescribing: a joint statement by the Canadian Medical Association and the Canadian Pharmacists Association

<https://policybase.cma.ca/link/policy10670>

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|---------------|--|
| POLICY TYPE   | Policy document  |
| LAST REVIEWED | 2019-03-03   |
| DATE          | 2012-12-08   |
| TOPICS        | Health information and e-health<br>Pharmaceuticals, prescribing, cannabis, drugs |

## Documents

