

LETTER TO THE EDITOR

Medicinal Cannabis for Emotional and Behavioural Symptoms: Parent and Physician Perspectives

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Dear Editor,

In recent years there has been increasing interest in the use of medicinal cannabis (MC) to treat neurodevelopmental and mental health disorders in children and adolescents; however, evidence for its efficacy and safety remains limited. There are several ongoing paediatric trials of MC in autism spectrum disorder (ASD), intellectual disability (ID), fragile X syndrome, and early psychosis [1]. Despite the lack of evidence regarding its benefits and safety, parents of children with these problems are increasingly asking their health care providers about using MC for their children [2]. However, physicians appear to be relatively uninformed about MC [3]. Parents are therefore using social media to learn about product choice, dosing, and concomitant medications [4].

In order to investigate the knowledge, attitudes, and experience regarding MC for children with developmental, emotional, and/or behavioural symptoms, we developed two anonymous web-based surveys: one for parents and the other for clinicians.

Of the 543 parents (92% female) who responded, (282) 52% reported believing MC is safer than other medications because it is natural, 315 (58%) thought it might be helpful, and 462 (85%) indicated they would be comfortable giving MC to their child. 186 (34%) had sought information about MC for their child, primarily from social media, and 100 (19%) had discussed MC as an

option with their doctor. Of those who had discussed MC with their doctor, 58 (58%) felt that their doctor did not know the risks and benefits of using MC, and only 23 (23%) felt they received the information they wanted. Having a child with ASD or ID, or a personal history of cannabis use, was predictive of parents requesting MC. Of the 32 (6%) parents whose children were using MC, 19 (59%) were using non-prescribed MC and 8 (25%) had not informed their doctor of the use.

One hundred twenty-nine physicians (89% paediatricians, 5% paediatric trainees) responded. Ninety-five (74%) physicians had been asked about MC by parents, and 60 (47%) had managed patients whose parents have said that they have given unregulated MC to their children. Although 77 (60%) reported they believed MC was a legitimate medical therapy, 104 (81%) felt that they did not have adequate knowledge to discuss MC with parents. Only 4 (3%) had prescribed MC.

To our knowledge, this is the first survey of parents and paediatric physicians regarding the use of MC in children with emotional and behavioural symptoms. Our findings demonstrate that there is high parental interest in the use of MC; however, physicians are unprepared for discussions with parents about this. As new evidence emerges from clinical trials, physicians should receive ongoing education on the appropriate use of MC in children.

Conflicts of Interest

The authors declare no conflicts of interest.

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