Recommendations for Cannabis Research

(Working Draft)

The term “cannabis” refers to hundreds of plant types and thousands of processed products that often vary in chemical composition. It is vital to have an understanding of both the therapeutic value and risks these products present to specific populations. Consequently, the following list offers recommendations to researchers that support clinical decision-making as well as policies and regulatory framework for medical cannabis use.

In addition to following EQUATOR network reporting guidelines, we recommend medical cannabis studies include:

1) Delivery methods used (e.g., smoking or vaping of the raw plant versus vaping or oral administration of processed cannabis products). Each study arm should only use one delivery method. Specify delivery device used, depth of inhalation, and device settings (e.g., temperature).
2) Types of cannabis used, including the chemical profile or plant type. At a minimum, studies should describe the amount of THC and/or CBD in the product.
3) Cannabis products that are the same or similar to those commercially available to patients. Preference should be given to using cannabis products that are through medical cannabis programs.
4) Dose, frequency and pharmacokinetics for each type of cannabis studied.
5) Safety outcomes including adverse reactions and drug-drug interactions.
6) Information on concurrent therapies and/or medications used for treatment of the same condition.
7) Assessment of blinding efficacy in clinical trials: could patients tell if they received a psychoactive product?
8) Assessment of confounders: patients’ prior experience with cannabis, recent cannabis use, expectation of efficacy, non-study use, etc.
9) Report outcomes by sex/gender.
10) Adherence to treatment plan.