



Severe Pain and Medical Cannabis

“Cannabis is an extremely safe and effective medication for many patients with chronic pain. In stark contrast to opioids and other available pain medications, cannabis is relatively non-addicting and has the best safety record of any known pain medication (no deaths attributed to overdose or direct effects of medication).”

— “Therapeutic Benefits of Cannabis: A Patient Survey,” *Hawaii Journal of Medicine and Public Health* (2014)

According to the Institute of Medicine, chronic pain costs our nation \$635 billion each year in medical treatments and lost productivity. While prescription medicines and surgical procedures work for some patients, others continue to suffer. Even for patients who respond to prescription medicines, those medications are often far more dangerous than cannabis, both in terms of toxicity and addictive potential. According to the CDC, more than 16,000 Americans die each year from overdoses of prescription opiates.

Numerous studies have established that cannabis is an effective treatment for pain. After an exhaustive review of recent scientific research, the National Academy of Sciences, Engineering, and Medicine issued a 2017 report that found “the use of cannabis for the treatment of pain is supported by well-controlled clinical trials.”

Many pain patients have been able to reduce or eliminate their use of prescription opiates with medical cannabis. A survey of intractable pain patients in Minnesota’s medical cannabis program who had used opiates before enrolling found 63% “were able to reduce or eliminate their opioid use after six months.” Similarly, a Michigan survey found medical cannabis use correlated with “a 64% decrease in opioid use, decreased number and side effects of medications, and an improved quality of life.”

Due to cannabis’ efficacy at treating pain, and the need for alternatives to opiates, every one of the 38 state medical cannabis laws allows chronic or intractable pain patients to qualify. However, many patients continue to be steered to more dangerous opioids. Factors include restrictive wording of some states’ laws, cost (medical cannabis is not covered by insurance), employment concerns (only about half of the medical cannabis states have employment protections), and stigma.

Pain is caused by hundreds of diseases, injuries, surgeries, and serious medical conditions. Although pain is the most commonly cited qualifying condition, the percentage of states’ population enrolled in medical cannabis programs pales in comparison to opioid prescribing. In 2018, a University of Chicago study found one-third of Americans were prescribed opiates in the past two years. Meanwhile, an average of less than 2% of states’ population are enrolled in medical cannabis programs.

To relieve suffering and avoid driving patients to more dangerous painkillers, every state should include chronic and severe pain in its medical cannabis program.