

Applying Ryan's Law: The Compassionate Use of Cannabis in Healthcare Facilities



Pharmacists' Cannabis Coalition of California (PCCC)

Western Pharmacy Exchange 2023

presented by California Pharmacists Association

Pharmacists' Cannabis Coalition of California (PCCC) A coalition of California pharmacist leaders advocating for the safe use of medical Cannabis



Jill Simonian, PharmD
Affiliate Faculty, UCSD Skaggs School of
Pharmacy and Pharmaceutical Sciences



Kari Franson, PharmD, PhD, BCPP
Professor of Clinical Pharmacy, University of
Southern California



Leah Johnson, PharmD
Medical Cannabis & Integrative Health
Pharmacist, Alchemist Consulting LLC



Paul Lofholm, PharmD, FACA
Consultant, Golden Gate Pharmacy Holdings,
Novato, CA; Clinical Professor of Pharmacy, UCSF



Codi Peterson, PharmD, MS
Clinical Pharmacist, Children's Hospital of
Orange County; Scientific Advisor, The
Cannigma

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Learning Objectives

- 1) Describe the patient qualifications for the use of medical Cannabis in a health care facility
- 2) Explain the storage and administration of medical Cannabis for compliance with Ryan's Law
- 3) Discuss the definitions and status of Cannabis according to California regulations
- 4) Identify the key features and requirements of Ryan's Law
- 5) Compare federal and state enforcement agencies with regards to Ryan's Law

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Self-assessment question 1

Who of the following is qualified under Ryan's Law to use medical *Cannabis* in a California health care facility?

- a. Any patient with a California medical *Cannabis* card
- b. Terminally ill patients regardless of possession of a medical *Cannabis* card or written documentation
- c. Terminally ill patients with a medical *Cannabis* card issued outside of California
- d. Terminally ill patients with either a California medical *Cannabis* card or written documentation from an authorized provider

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Self-assessment question 2

True or False: Pharmacy and/or nursing staff will be required to dispense and administer patient's own *Cannabis*.

- a. True
- b. False

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Self-assessment question 3

On a federal level, *Cannabis* is considered 'hemp' if the concentration of THC is?

- a. > 0.3%
- b. 0%
- c. < 0.3%
- d. < 0.5%

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Self-assessment question 4

Which of the following *Cannabis* products will be not allowed in a healthcare facility pursuant to Ryan's Law?

- a. Oral gummies
- b. Sublingual tinctures
- c. Vape pens
- d. Topical lotions

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Self-assessment question 5

The primary agency authorized to enforce Ryan's Law in a health care facility is:

- a. Drug Enforcement Agency
- b. California Department of Public Health
- c. Centers for Medicare & Medicaid Services
- d. Food and Drug Administration

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Medical Cannabis use among Americans

- 4.4 million patients used medical *Cannabis* in 2021
- 20% of Medicare patients report using *Cannabis* for medical treatment
- 67% of physicians favor a nationwide legalization of medical *Cannabis*

So.....WHY? How does it work? What is the rationale?

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The Endocannabinoid System (ECS)

- A master homeostatic regulatory system
- Found in all vertebrates
- Lipid signaling
- CB1: Nervous system
- CB2: Immune system

CB1

- Neurotransmission
- Cognition and memory
- Control of motor function
- Reward pathways/addiction
- Nociception

CB2

- Nociception
- Neuroinflammation
- Neuroprotection

CB1 & CB2

- Heart rate
- Hypertension
- Cardiac dysfunction
- Weakened myocardial contractility

CB1

- Cardioprotective

CB1 & CB2

- Immunomodulation

CB1

- Spasms
- Fibrinogenesis
- Insulin resistance

CB2

- Antifibrogenic
- Hepatoprotection

CB1

- Gut motility
- Appetite

CB2

- Gut motility
- Inflammation

CB1

- Bone formation and turnover

CB2

- Energy metabolism
- Insulin resistance

Western Pharmacy Exchange 2023¹ Adapted from An D et al;² www.caymanchem.com presented by California pharmacists association

What is a “Cannabinoid (CB)”?

- A molecule that activates the CB receptors ...or shares key structural features with THC
- THC was the prototypical cannabinoid
 - Led to discovery of ECS
- Synthetic pharmaceutical drugs
 - Rimonabant
 - Nabilone

Western Pharmacy Exchange 2023¹ Angelina A et al.² presented by California pharmacists association

How do patients consume cannabinoids (THC & CBD)?

- **Inhalation**
 - Smoking
 - Dry plant material vape
 - Oil vape pen
- **Oral**
 - Oils
 - Sublingual
 - Edibles
 - Capsules
- **Topical**
- **Suppository**

THC = Δ9-tetrahydrocannabinol
CBD = Cannabidiol

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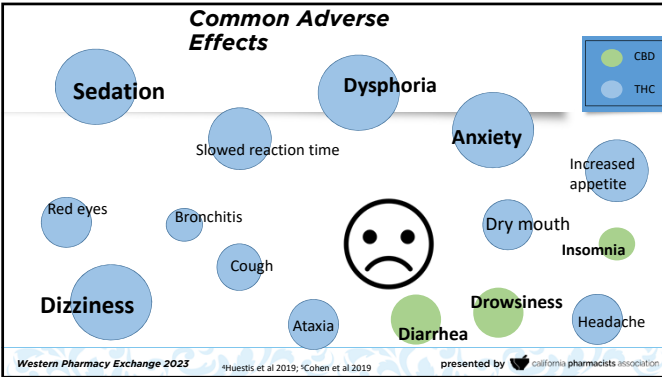
Keeping Patients Safe -

Know the Potential Adverse Effects of Cannabis.....

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Common Adverse Effects

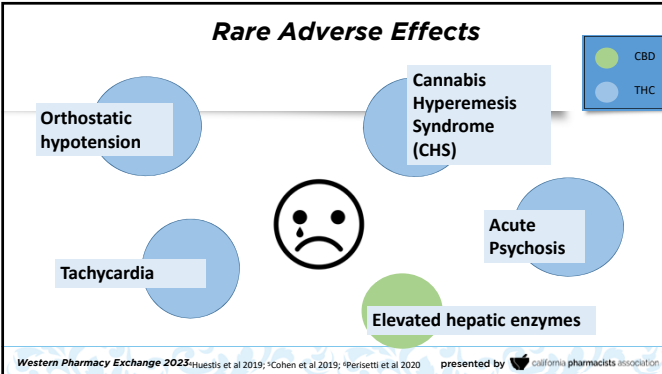


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¹Huestis et al 2019; ²Cohen et al 2019

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Rare Adverse Effects




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¹Huestis et al 2019; ²Cohen et al 2019; ³Perissetti et al 2020


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Other Concerns

- Driving
- Smoking
- Unstable heart disease
- Pregnancy
- Minors
- Prior schizophrenia
- Adulterated products
- Labeling accuracy



Drug Interactions


Image: CAPSO
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Potential Drug Interactions

Food ↑ Absorption

THC Interactions

Warfarin	CNS Depressants Opioids Anticholinergics	Sympathomimetics	Propofol
↑ Effect of warfarin ↑ INR (CYP 2C9 inhibition)	↑ Sedation ↑ Ataxia	↑ Heart Rate ↑ Blood Pressure	↓ Effects ↑ Dosing need for anesthesia


Western Pharmacy Exchange 2023 ¹²Wardowski MA et al ¹³Damkier et al ¹⁴Yamreudeewong et al ¹⁵Jusko et al ¹⁶presented by  California Pharmacists Association

Potential Drug Interactions

Food ↑ Absorption

CBD Interactions

Warfarin	Everolimus Tacrolimus Sirolimus	Clobazam	Valproate
↑ Effect of warfarin ↑ INR (CYP 2C9/3A inhibition)	↑ Evero/tacro/siro drug concentrations (CYP 2C19 inhibition)	↑ Clobazam and active metabolite (CYP 2C19 inhibition)	↑ LFTs Monitor LFTs No change in VPA concentration

Western Pharmacy Exchange 2023 ¹⁷Epidiolex™ package insert 2021; ¹⁸Devinsky et al ¹⁹presented by  California Pharmacists Association

Federal Vs. State of California Positions on Cannabis

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Federal Definitions of Cannabis Pursuant to Farm Bill 2018

Marijuana = Cannabis with > 0.3% THC

Hemp = Cannabis with < 0.3% THC



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Federal

DEA

FDA

47% of Americans think the federal government regulates CBD

➤ Marijuana

➤ Same as

➤

➤

➤

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➤

➤

Not

➤ Not legal except for approved FDA drug

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*2020 CBD Survey-SingleCare Team

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State of California

➤ Proposition 215 (1996) "Compassionate Use Act of 1996"

➤ INTENT

- Protects patients with medical *Cannabis* treatment
- Protects physicians recommending marijuana
- Prohibits endangering others or diversion for non-medical purposes

Examples of Approved Conditions Across USA

California approved conditions in red

Alz

Plus the catch all statement:

Your physician can also recommend *Cannabis* to help with chronic or persistent medical symptoms that either:

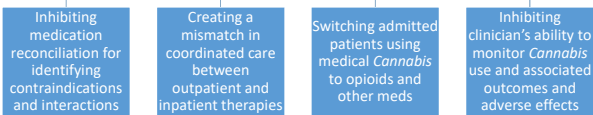
- Substantially limits your ability to conduct major life activities
- May cause serious harm to your safety, physical health or mental health

Cronn's disease (20) **Multiple Sclerosis (22)** Tourette syndrome (7)

Western Pharmacy Exchange 2023 ¹⁴ State Medical Cannabis Laws, National Conference of State Legislatures. presented by California Pharmacists Association

PCCC* position on current acute care environment

Lack of access to medical *Cannabis* and properly trained clinicians threatens patient safety by:



**Identify the key features
and requirements of Ryan's Law
.....and the challenges**

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The patient behind Ryan's law

- Ryan Bartell, 41 y/o, former US coast guard
- Passed in 2018 after battling pancreatic cancer
- Ryan requested *Cannabis* treatment to replace opioids
- Initial hospital in Washington denied request
- Transferred to alternate hospital in Washington state
- Quality of life and relationships improved significantly for Ryan while off opioids and on *Cannabis*



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The Road To Becoming Ryan's Law

- SB 311**
➤ Governor Newsom signed 9/2021
- SB 988**
➤ Amendment to SB 311 signed 9/2022
- SB 302**
➤ Proposed amendment to SB 988 widens patient definition

RYAN'S LAW

Supports the ability of a terminally ill patient to safely use medicinal *Cannabis* within a healthcare facility

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Summary of Ryan's Law Requirements



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What IS Specified (pursuant to SB 988)

- Terminally ill patients
- Medical Marijuana Card
 - Or written documentation
- Locked container at bedside
- Medical record documentation
- No Emergency Departments
- Prohibits inhaled *Cannabis*
- Patient must provide product
- COMPLIANCE WITH PROP 215

Western Pharmacy Exchange 2023 ©Senate Bill 988, California Legislative Information. presented by California Pharmacists Association


What IS NOT Specified

- Policy & procedures
- How to verify a Medical Marijuana Card
 - Or authorized written documentation
- How to document *Cannabis* use
- Guidelines for pharmacists

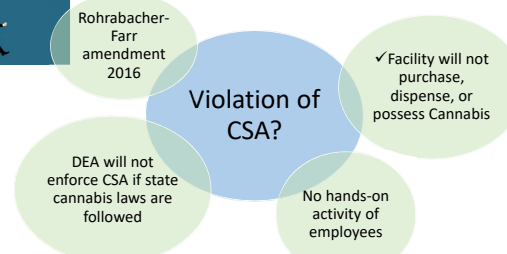
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What IS NOT Addressed

- Relevant statutes, regulations, enforcing agencies
 - US Drug Enforcement Agency (DEA)
 - US Centers for Medicare & Medicaid Services (CMS)
 - California Department of Public Health (CDPH)

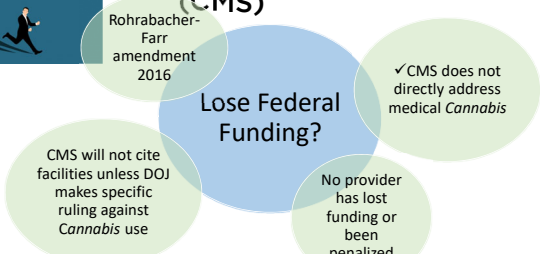
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Drug Enforcement Agency (DEA)




Western Pharmacy Exchange 2023 ¹Rohrabacher-Farr amendment (2015). Congress.gov presented by  California pharmacists association

Centers for Medicare & Medicaid Services (CMS)




Western Pharmacy Exchange 2023 ²Press release Senator Ben Hueso presented by  California pharmacists association




California Department of Public Health (CDPH)

Penalties Reported to CMS?

- ✓ CDPH is primary enforcement agency for Ryan's Law
- Ensures compliance with Prop 215


Western Pharmacy Exchange 2023 ¹⁹Proposition 215, California Legislative Information. presented by 



CCR Title 22 Pharmaceutical Service General Requirements

Violation of Bedside Meds?

- No Schedule II, III, or IV allowed at bedside
- ✓ Cannabis use documented in chart
- No documentation in MAR required
- Cannabis kept in locked container at bedside

Western Pharmacy Exchange 2023 ²²California Code of Regulations, Title 22. presented by 

Healthcare Facility Policy and Procedures



Contact PCCC with questions at info@PCCCRx.org

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Self-assessment question 5

The primary agency authorized to enforce Ryan's Law in a health care facility is:

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