

May 22, 2020

Committee Members of the joint ACMS-ACCS
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Re: Proposed amendments referred for scheduling advice to the Joint ACMS-ACCS #25

The NSW Poisons Information Centre (NSW PIC) provides a phone-based advice service on suspected poisonings to the public and health professionals calling from NSW, TAS and ACT on a near full-time basis and a shared after-hours service to the remainder of Australia. This results in approximately half of Australia's poisons-related calls being received by our Centre.

2.2 and 2.5 CANNABIDIOL (CBD)

The NSW PIC does not support either of the proposed amendments to the Poisons Standard to change the scheduling of CBD, either by addition to Schedule 3 or for exemption to scheduling.

The NSW PIC supports ongoing research into the effectiveness of CBD for a variety of conditions at a range of doses. Currently quality evidence on indications, effectiveness and dosing is very limited and we are concerned that down scheduling to allow purchase without a prescription, prior to the availability of such evidence, will result in patients self prescribing at a variety of doses. Increased availability and use will result in increased poisonings, which are already occurring with a high proportion becoming symptomatic and requiring medical attention.

The NSW PIC continues to receive calls regarding exposures to pharmaceutical cannabis products and concentrated cannabis extracts for medicinal use. These numbers, although small, are not insignificant given the very limited availability of medicinal cannabis locally, and appear to be increasing based on the first part of 2020.

Year	Calls regarding Cannabis pharmaceutical/concentrate		
2018	23		
2019	24		
2020 to May 17	15		

The 39 exposures since Jan 2019 were analysed more closely to show nearly 70% required medical attention. As seen in the table below, more than 25% of exposures were therapeutic errors, often confusing drops with millilitres. Another large proportion of the calls were intentional other which includes any ingestion for inappropriate therapeutic use.

Count of Record Id	Column Labels					
Row Labels	Hospital Refer	In Hospital	Other	Stay at Home	(blank)	Grand Total
Accidental	2	1		1		4
Adverse reaction		1		2		3
deliberate-self poisoning	2	2				4
Intentional:other	3	5	1	1		10
recreational	1	5	2			8
Therapeutic Error	1	4	1	4		10
(blank)						
Grand Total	9	18	4	8		39

Nearly all exposures since Jan 2019 resulted in the development of symptoms. Only 1 patient of the 39 exposures remained asymptomatic, with 3 calls received immediately after exposure, before sufficient time had lapsed for the development of symptoms. This contrasts our general call statistics, where only 28% of calls regarding therapeutic errors in 2020 developed symptoms.

Symptoms	Total
Sedation	15
Nausea & Vomiting	9
Tachycardia	13
Dizziness	4
Movement disorders/tremor	3
Chest symptoms incl pain	7
Urination	1
Anxious/agitated	10

In 10 of these 39 cases it was confirmed the patient was taking other medications, either concurrently with this exposure or on a regular basis. All of these patients were symptomatic. Only 1 patient was confirmed not to be taking other regular medications, with the remainder unknown. With at least 25% of medicinal cannabis users taking other medications, this demonstrates the real concern around potential drug-drug interactions with the use of CBD.

Patients involved in these exposures reported using medicinal cannabis for a variety of reasons. This shows the range of conditions people are currently trying to manage with medicinal cannabis, and increased availability means this list is likely to expand. Recreational use of pharmaceutical cannabis is currently occurring, and despite the lack of effect on CNS CB1 receptors, this will almost certainly increase with availability over the counter.

Reason for medicinal cannabis use	Number of patients
Recreational	8
Anxiety	2
Inflammation	1
Autoimmune /Rheumatoid Arthritis	4
Behaviour/ADHD/Autism	5
Pain	7
Sleep	1
PTSD	1
Spina bifida	1
Dementia	2
Cancer	3

Regards

