Inspired by research. Driven by compassion. Inspiré par la recherche. Guidé par la compassion.

CANNABIS-INDUCED PSYCHOSIS AND SCHIZOPHRENIA FOLLOWING NON-MEDICAL CANNABIS LEGALIZATION AND COMMERCIALIZATION IN CANADA

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DISCLOSURES

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- Canadian Institutes of Health Research (CIHR)
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- No industry funding or other conflicts of interest





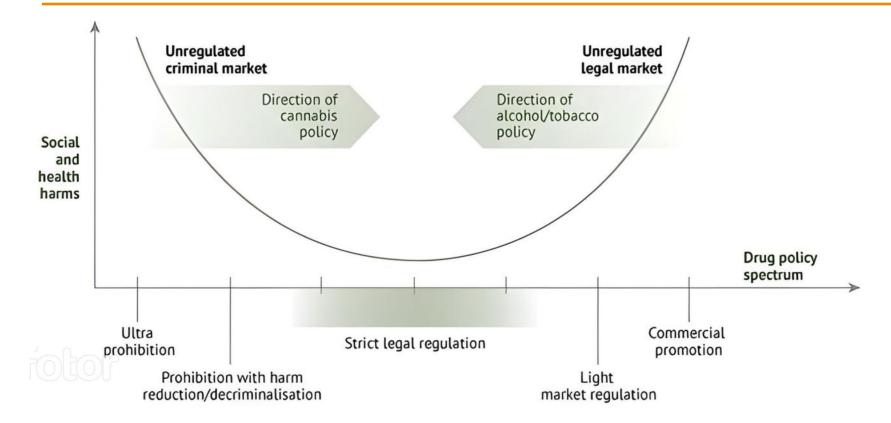
OUTLINE

- Review of Cannabis Policy and Evolution in Canada
- Summarize evidence on changes in healthcare visits after legalization
 - 1. Cannabis Use Disorder (e.g., addiction)
 - 2. Cannabis-induced psychosis
- Summarize study on risk of schizophrenia for individuals with health care visits for cannabis
- Discuss public health, clinical and policy implications

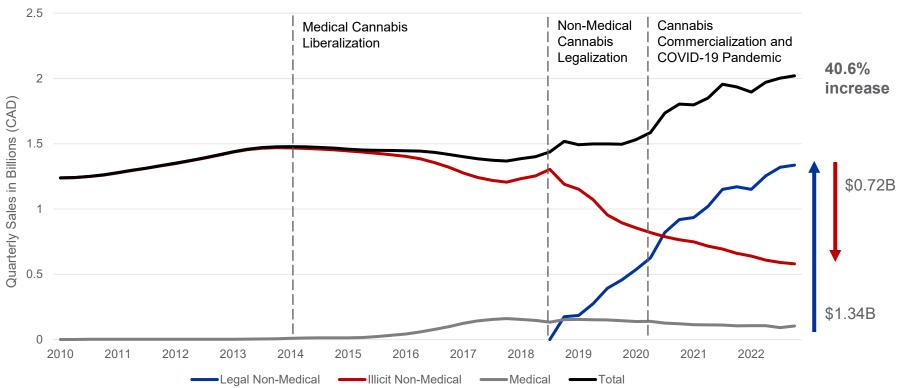


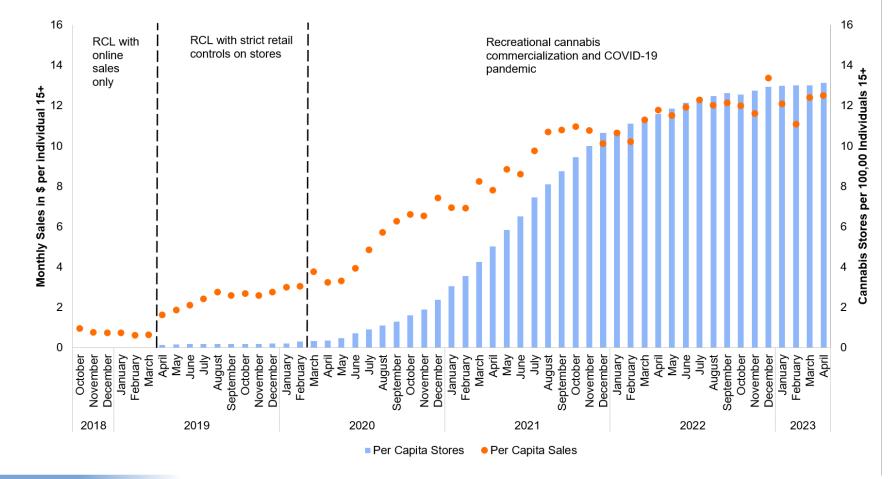
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A Framework for the Legalization and Regulation of Cannabis in Canada: The Final Report of the Task Force on Cannabis Legalization and Regulation



TRACKING CANADA'S CANNABIS MARKET

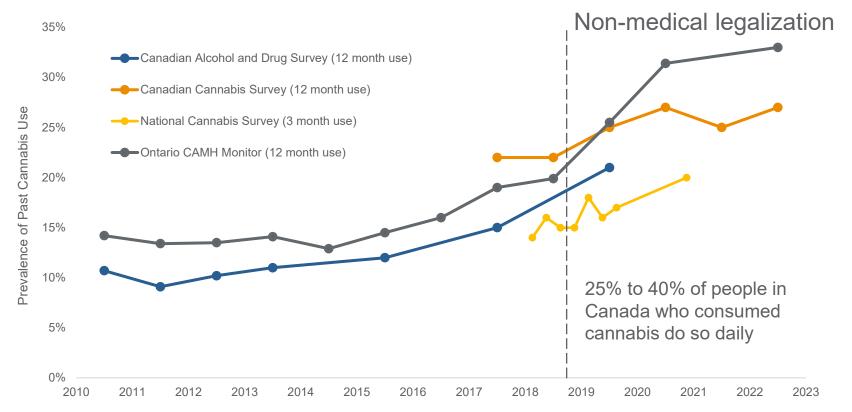




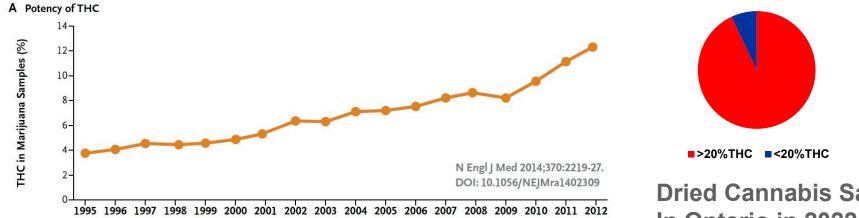
ADDICTION

SSA Figure. Changes in monthly per-capita legal cannabis sales and per-capita retail stores

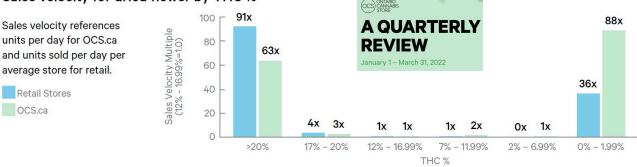
PREVALENCE OF CANNABIS USE IN CANADA



CHANGES IN THC POTENCY IN NORTH AMERICA







Dried Cannabis Sales In Ontario in 2022

- Overall 71% higher than 20% THC
- Excluding CBD predominant strains 93% higher than 20% THC

ONTARIO CANNABIS STORE (OCS*) LANDING PAGE

*OCS IS ONTARIO'S GOVERNMENT RUN ONLINE RETAILER

Bulk Up

Get serious about stocking up your dried flower stash with these ounce options



Bestselling Ounces

SHOP NOW



High-THC (24%+) Ounces





Ontario-Grown Ounces

SHOP NOW

SHOP NOW

TRACKING HEALTHCARE METHODS

- Population Level Data
 - All residents in Ontario (Canada's largest province) or Canada
 - <u>Every</u> outpatient physician visit, ED visit and hospitalization from universal health system covers 97% of residents of Canada
- Outcomes
 - Healthcare due to cannabis
 - Based on Diagnostic codes
 - <u>Diagnosis of Schizophrenia Spectrum Disorder (SSD)</u>: validated algorithm to detect individuals who have SSD

1) YOUTH AND ADULT HEALTHCARE DUE TO CANNABIS

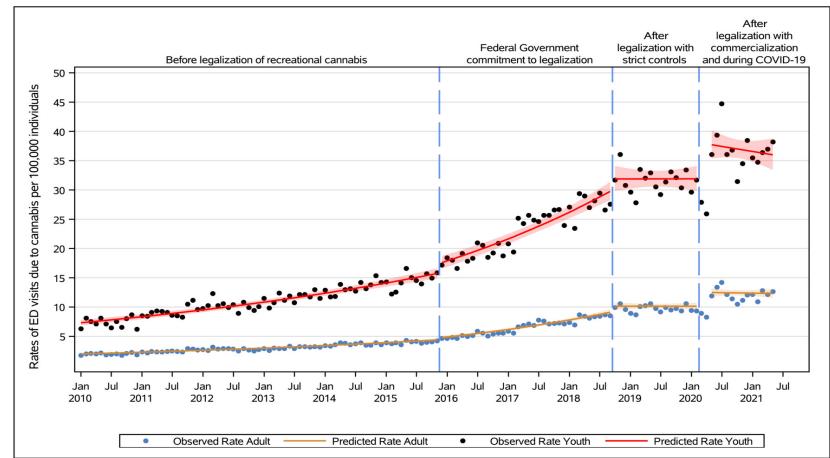
All ED visits in Ontario all Hospitalizations in Canada

- Track changes in visits due to cannabis for a variety of causes across different populations
 - Overall (e.g., intoxication, poisoning, psychosis, withdrawal)
 - Cannabis-induced psychosis

Contextualize by changes in market and regulations



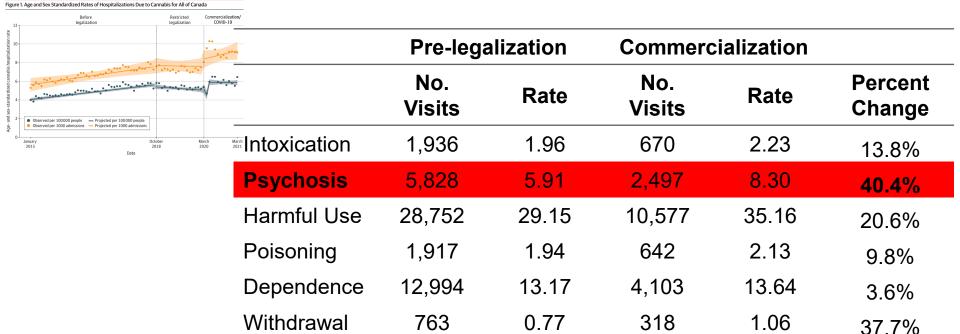
The association between recreational cannabis legalization, ADDICTION commercialization and cannabis-attributable emergency department visits in Ontario, Canada: an interrupted time– series analysis



SSA

Changes in Cannabis-Attributable Hospitalizations Following Nonmedical Cannabis Legalization in Canada

Daniel T. Myran, MD, MPH; Adrienne Gaudreault, MPH; Lauren Konikoff, MA; Robert Talarico, MSc; Rosalie Liccardo Pacula, PhD



JAMA Network Open...

CHALLENGES AND CRITIQUES

- Are changes from increased willingness to disclose cannabis or greater clinician detection of cannabis?
- Increases from commercialization vs pandemic?
 - Changes below vs above minimum legal age
 - Compare to changes in other substances

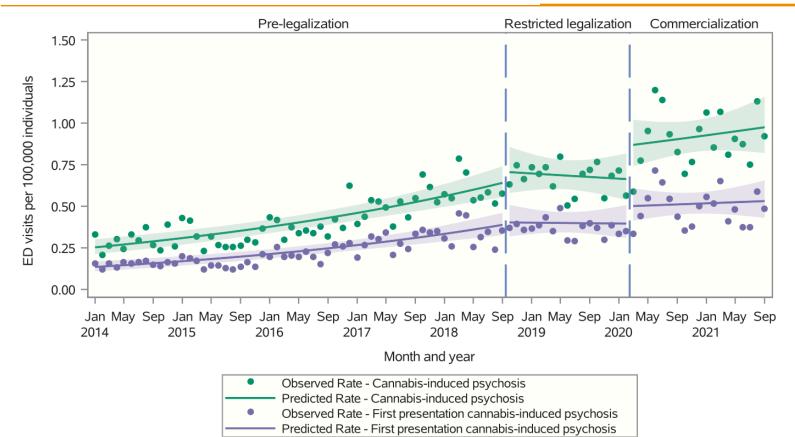




Association between non-medical cannabis legalization and emergency department visits for cannabis-induced psychosis

Molecular Psychiatry

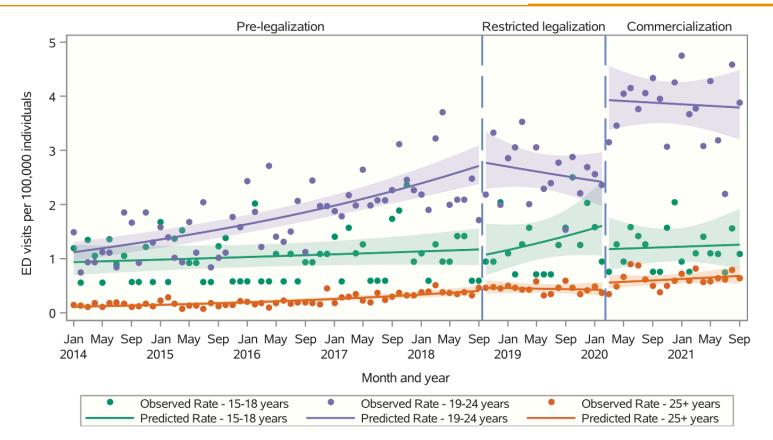
Daniel T. Myran (b^{1,2,3,4 M}), Michael Pugliese³, Rhiannon L. Roberts (b¹, Marco Solmi^{1,5,6,7,8}, Christopher M. Perlman⁹, Jess Fiedorowicz (b^{1,5,6,7,10}, Peter Tanuseputro^{1,4,7,11,14} and Kelly K. Anderson (b^{12,13,14}



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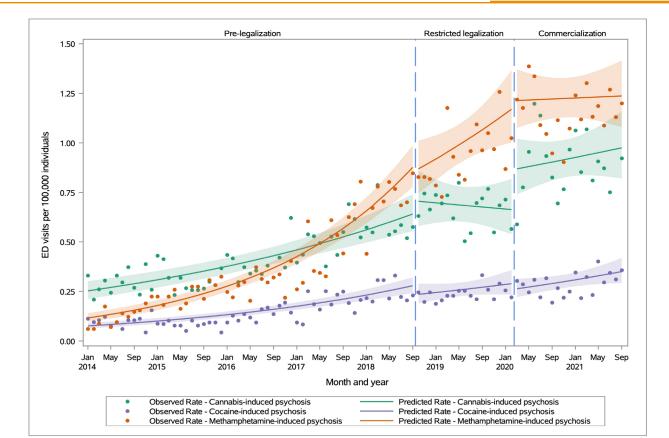
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DISCUSSION

► Healthcare visits due to cannabis been increasing since 2010

- Changes in visits have differed by policy period
 - Accelerated in lead up to legalization (medical liberalization + announcement of non-medical legalization)
 - Plateaued during legalization with restrictions period
 - Increased during commercialization/ COVID-19
- Data may support some commercialization contribution



2) RISK OF DEVELOPING SCHIZOPHRENIA

- ► All individuals aged 14-65 years in Ontario between 2008 and 2022 → excluded history of psychosis/ schizophrenia.
 - Identified individuals with a first-time substance use visit
- Compared development of schizophrenia between individuals with substance use visit and gen population



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Transition to Schizophrenia Spectrum Disorder Following Emergency Department Visits Due to Substance Use With and Without Psychosis

JAMA Psychiatry

Daniel T. Myran, MD, MPH; Lyndsay D. Harrison, MSc; Michael Pugliese, MSc; Marco Solmi, MD, PhD; Kelly K. Anderson, PhD; Jess G. Fiedorowicz, MD, PhD; Christopher M. Perlman, PhD; Colleen Webber, PhD; Yaron Finkelstein, MD; Peter Tanuseputro, MD, MHSc

Substance-Induced Psychosis	All-Substances	Cannabis	General Population
Population at Risk	N=13,784	N=3,557	N=9,771,825
Transition in 3 Years, No. (%)	2,552 (18.5%)	925 (26.0%)	11,014 (0.1%)
Crude Transition Per 100,00 Person Yrs	5579.0	9112.6	26.0
Age Sex Adjusted Hazard Ratio	163.2 (156.1 - 170.5)	241.6 (225.5 - 258.9)	Ref
Fully Adjusted Hazard Ratio	62.0 (58.8-65.4)	84.9 (78.7-91.6)	Ref
Substance Use Without Psychosis	All-Substances	Cannabis	General Population
Population at Risk	N=400,144	N=65,904	N=9,771,825
Transition in 3 Years, No. (%)	5,555 (1.4%)	1,277 (1.9%)	11,014 (0.1%)
Crude Transition Per 100,00 Person Yrs	222.7	430.2	26.0
Age Sex Adjusted Hazard Ratio	9.8 (9.5 - 10.2)	14.3 (13.5 - 15.2)	Ref
Fully Adjusted Hazard Ratio	4.8 (4.6-5.0)	5.2 (4.9-5.6)	Ref

	Male, 14-18 y -	0.22	1.75	2.87	31.79	41.30	Individuals transitioning, %
Age and sex	Male, 19-24 y -	0.29	1.94	4.08	30.18	40.10	- 40
	Male, 25-44 y -	0.20	2.13	3.10	19.80	27.39	
	Male, 45-65 y -	0.13	1.10	1.34	11.57	17.17	- 30
	Female, 14-18 y -	0.09	0.68	1.36	18.18	16.84	- 20
	Female, 19-24 y -	0.13	0.74	1.96	20.99	23.53	
	Female, 25-44 y -	0.11	1.18	1.75	16.45	20.00	- 10
	Female, 45-65 y -	0.12	1.16	1.05	10.94	16.98	
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Figure. Visual representation of crude percent of individuals transitioning to a diagnosis of schizophrenia spectrum disorder within 3-years of different types of first-presentation ED visits for substance use and the general population

3) CHANGES IN OVERALL INCIDENCE OF SCHIZOPHRENIA

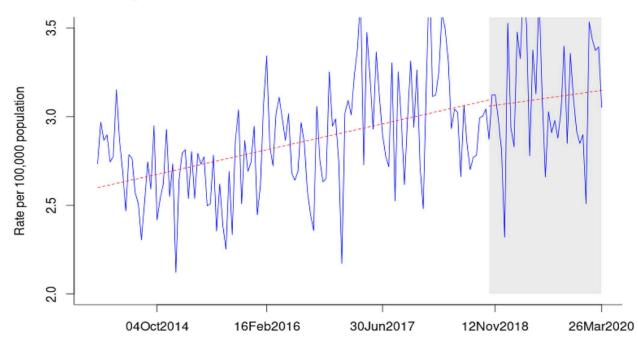
 Tracking changes in incidence of schizophrenia spectrum disorder

INCIDENT NON-AFFECTIVE PSYCHOSIS IN ONTARIO AGES 14-60 TO MARCH 2020

Research Paper

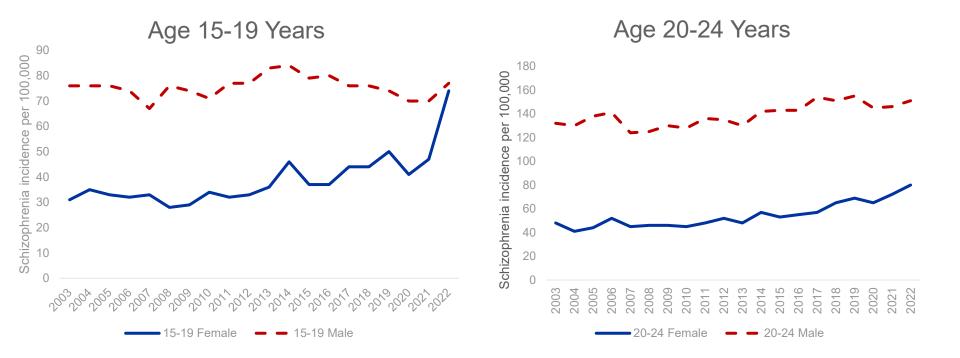
Impact of non-medical cannabis legalization with market restrictions on health service use and incident cases of psychotic disorder in Ontario, Canada

<u>Kelly K. Anderson ^{o b f g} 久 </u> 愛, <u>Rebecca Rodrigues</u>⁰, <u>Britney Le</u>^f, <u>Maliha Mamun</u>^o, <u>Suzanne Archieⁿ</u>, <u>Jordan Edwards</u>^h, <u>Tara Etton-Marshall</u>^{0 k k}, <u>Jason Gillland</u>^{o c d}, <u>Daniel Thomas Myran ^{j m}</u>, <u>Lena Palaniyappan^{b o}, <u>Christopher M. Perlman</u>^p, <u>Jamie A. Sedbrock</u>^{o c} 9, <u>Robin M. Murray</u>^r, <u>Salimah Z. Shariff ^{e f g}</u></u>



a. Non-Affective Psychotic Disorder: Incident Cases

INCIDENCE OF HOSPITALIZATIONS FOR SCHIZOPHRENIA IN CANADA



From https://health-infobase.canada.ca/ccdss/data-tool/

PSYCHOSIS AND SCHIZOPHRENIA DISCUSSION

- ED visits due to cannabis increasing & associated with elevated risk schizophrenia
- Average time between first cannabis use and diagnosis of schizophrenia is 6 years
- Unknown long-term implications on chronic psychoses



CLINICAL IMPLICATIONS

- Ongoing debates about causality of cannabis use on mental health, psychosis and other harms
- Regardless of causality at very high risk and may benefit from monitoring and intervention
 - Early psychosis intervention (EPI) programs
- A precautionary approach likely warranted

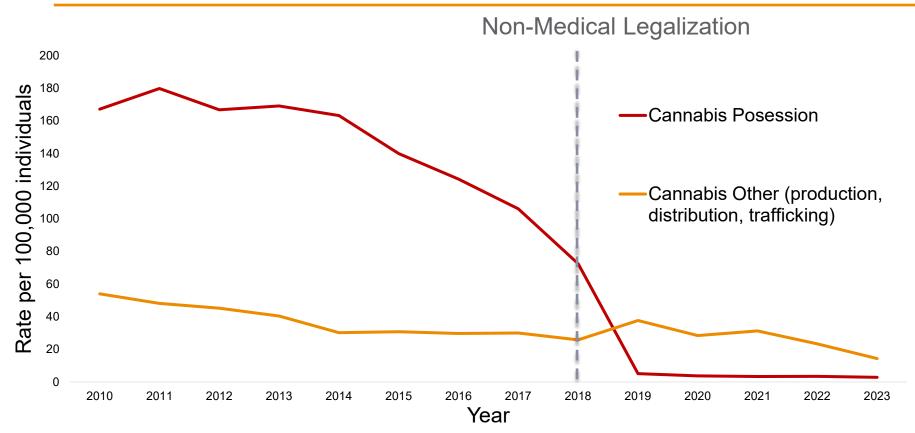


POLICY IMPLICATIONS - 1

- Legalization with strict control did not accelerate increases in adult cannabis use and harms
- However visits began increasing after medical liberalization/ announcement
- Commercialization may increase a wide variety of cannabis harms in young adults and adults



POLICE REPORTED CANNABIS ARRESTS IN CANADA



POLICY IMPLICATIONS - 2

Public health benefits from decriminalization

- Reduces criminal justice harms promotes equity
- Can be achieved without legalization and definitely achieved without commercialization



FINAL THOUGHTS

- Cannabis use and harms were high and increasing well before legalization
 - Room for debate about the impact of legalization
- ► The market will continue to evolve and expand
- Opportunity to use regulations to reduce use and harms



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