Statement on “Medicinal Cannabis” with particular reference
to its use in the management of patients with chronic non-
cancer pain

1. The Faculty of Pain Medicine (FPM) acknowledges the changed regulatory
environment for the use of medicinal cannabis in Australia and New Zealand. In Australia this
includes the rescheduling of tetrahydrocannabinol (THC) from S9 (Prohibited substances) to
S8 (Controlled drugs) and the granting of licences for the cultivation of Cannabis sativa and the
manufacture and production of medicinal cannabinoids. In New Zealand this includes proposed
changes to the Misuse of Drugs Act 1975 to allow terminally ill people to possess and use illicit
cannabis, to enable regulations to be made setting quality standards for products, and to
deschedule cannabidiol (CBD) as a controlled drug. THC would remain a class B controlled
drug, except when contained in a class C controlled drug, and except when contained in a CBD
product.

2. FPM recognises both the political imperatives underpinning these changes and the
community demands that have generated them.

3. FPM adheres to the principle that substances intended for therapeutic purposes be
fully characterised chemically, pharmacologically and toxicologically, to the extent that they
would be eligible for registration by regulatory authorities (Therapeutic Goods Administration in
Australia; Medsafe in New Zealand).

4. The sociopsychobiomedical framework that informs the assessment and management
of people with chronic non-cancer pain requires active engagement of patients in a multimodal
management program, and recognises the adverse effects that may be associated with
polypharmacy in general and with cannabinoids in particular.

5. FPM is very concerned about the adverse event profile in cannabis users, especially
in young people, including impaired respiratory function, psychotic symptoms and disorders
and cognitive impairment.

6. At the present time (November 2021), the scientific evidence for the efficacy of
cannabinoids in the management of people with chronic non-cancer pain remains insufficient
to justify endorsement of their clinical use.

7. Due to the difficulties inherent in performing efficacy trials of any medications in patients
with chronic non-cancer pain, FPM considers that the situation regarding evidence is unlikely
to change. FPM recognises that pragmatic trials of effectiveness of cannabinoids in individual
cases will continue, as enabled by regulations in Australia and Aotearoa New Zealand. FPM
asserts that sole responsibility for prescribing an unapproved medicinal cannabis product rests
with the prescriber.

This document is accompanied by a background paper (PS10(PM) BP) which provides
more detailed information regarding the rationale and interpretation of the Statement
and a ‘community information sheet’ for public consumption.
POLICY – A document that formally states principle, plan and/or course of action that is prescriptive and mandatory.

STATEMENT – A document that describes where the college stands on a particular issue. This may include areas that lack clarity or where opinions vary. A statement is not prescriptive.

GUIDELINE – A document that offers advice on a particular subject, ideally based on best practice recommendations and information, available evidence and/or expert consensus. A guideline is not prescriptive.

This document has been prepared having regard to general circumstances, and it is the responsibility of the practitioner to have express regard to the particular circumstances of each case, and the application of this policy document in each case.

Professional documents are reviewed from time to time, and it is the responsibility of the practitioner to ensure that the practitioner has obtained the current version. Professional documents have been prepared having regard to the information available at the time of their preparation, and the practitioner should therefore have regard to any information, research or material which may have been published or become available subsequently.

Whilst the College and Faculty endeavour to ensure that documents are as current as possible at the time of publication, they take no responsibility for matters arising from changed circumstances or information or material which may have become available subsequently.

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