

Abstract

Thai cannabis practice patterns and quality of life study (Thai Cannabis PQ): A preliminary analysis

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Background

Cannabis has been used as part of many Thai traditional herbal recipes for many decades but scientific evidences are limited. This study aims to explore the practice patterns of qualified traditional medicine practitioners and quality of life of more than 10,000 Thai individuals with all underlying diseases who receive Thai Cannabis Oil for specific clinical purposes.

Methods

This nationwide prospective observational cohort has been conducted at 22 sites in 18 provinces of 13 regions of Thailand. Prescription practices are grouped into patterns based on the dose, frequency, and other parameters. Quality of life is assessed by using both EQ-5D-5L and Edmonton Symptom Assessment Scale (ESAS) at month 0, 1, 2, and 3. REDCap is used for data management and Stata/MP is used for data analysis. (Thai Clinical Trial Registry No. TCTR20191231001; Ethical Approval No.36/2562)

Results

As of January, 2020, 6,576 individuals (9,200 visits) were recruited, of which 1,659 completed the first month. Their mean age was 56.22±14.50 years, 50.99% were female. Hypertension was the most common (23.71%), followed by dyslipidemia (13.87%), and diabetes mellitus (12.79%). Cancers were reported by 17.61% of the participants: breast (254; 3.86%), colon (166; 2.52%), lung (164; 2.49%), liver (134, 2.04%). Overall baseline EQ-5D-5L was 0.84±0.24.

Cancer patients had significantly lower baseline EQ-5D-5L (0.80±0.29 vs 0.85±0.22) and ESAS pain (3.44±3.21 vs 4.05±3.30) and anxiety (2.03±2.77 vs 2.37±2.85) but higher tiredness (3.25±3.08 vs 2.89±2.83), nausea (1.00±2.07 vs 0.69±1.66), inappetite (2.21±2.94 vs 1.20±2.20), and shortness of breath (1.74±2.61 vs 1.22±2.17) than non-cancer individuals.

The most common prescription practice pattern was one drop daily before bedtime (82.38% in 22 sites), followed by one drop after meals and before bedtime (6.84% in three sites), and one drop daily before meals (1.79% in 16 sites).

EQ-5D-5L and all ESAS symptoms of both cancer and non-cancer participants were significantly improved at one month ($p<0.001$), of which feeling of wellbeing (1.00±2.34), pain (0.95±2.39), tiredness (0.93±2.51), and anxiety (0.85±2.25) showed the largest mean differences.

Conclusion

Practice patterns of Thai Cannabis Oil could vary across institutions. One drop daily before bedtime was the most common practice and could significantly improve quality of life of both cancer and non-cancer individuals.

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