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MASCC/ISOO

ANNUAL MEETING ON SUPPORTIVE CARE IN CANCER



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TRANSFORMING SYMPTOM MANAGEMENT IN CANCER PATIENTS: IS MEDICAL CANNABIS A NEW PARADIGM?

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MASCC/ISOO Annual Meeting on Supportive Care in Cancer

Vienna, June 29th 2018





Faculty Disclosure

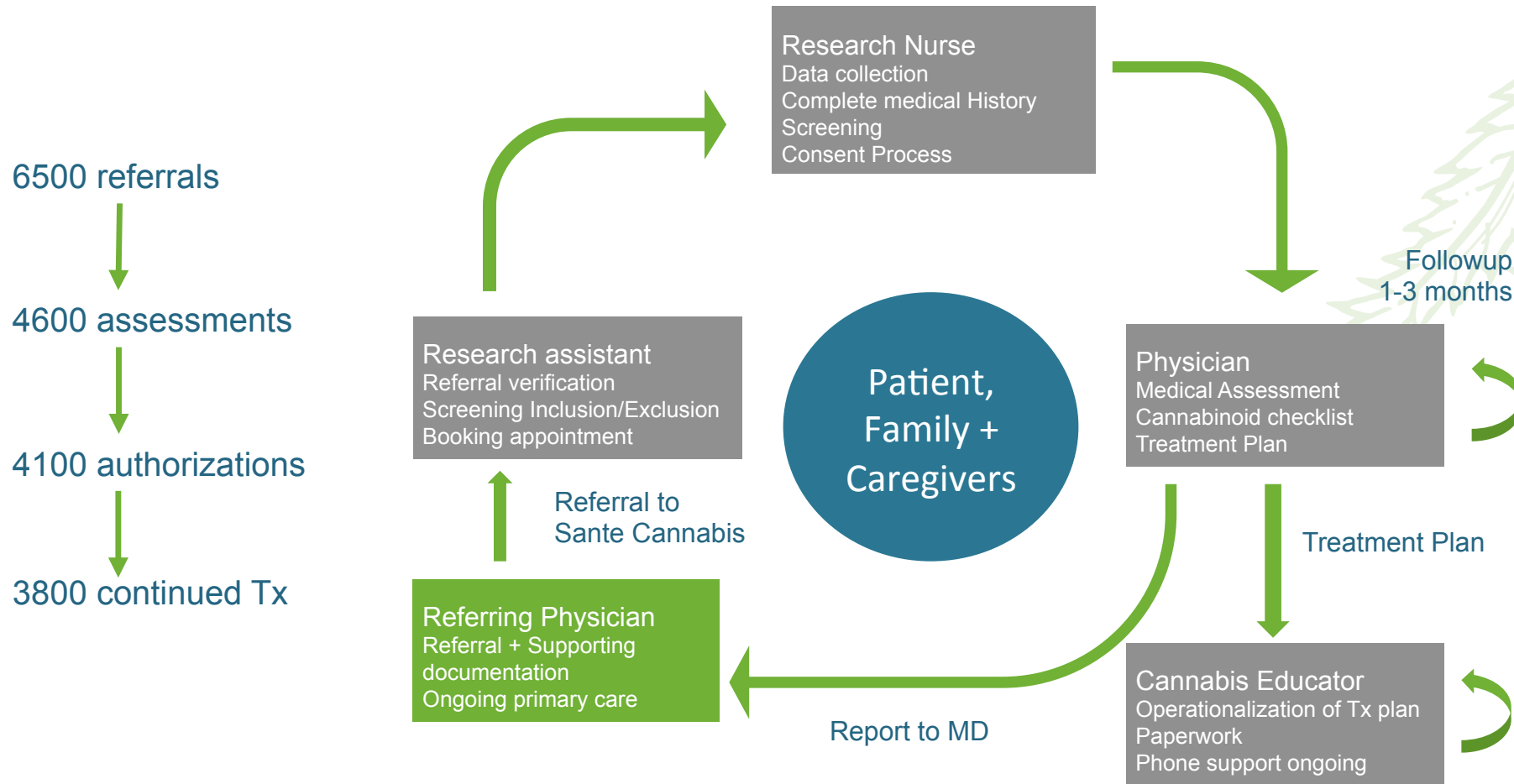
	No, nothing to disclose
X	Yes, please specify: Research/fellowship Support: Tetra Bio-Pharma Co-investigator two clinical trials supported by Tetra Bio-Pharma Senior Medical Advisor Khiron Life Sciences Corp.

Company Name	Honoraria/ Expenses	Consulting/ Advisory Board	Funded Research	Royalties/ Patent	Stock Options	Ownership/ Equity Position	Employee	Other (please specify)
Tetra Bio-Pharma Inc.								Fellowship support
Khiron Life Sciences Corp.		x						

Introduction

- Unrelieved symptom burden: significant challenges in cancer patients
- Integration of cannabinoid-based medicines (CBM) for symptom control
- Canadian experience: regulatory challenges, development and deployment of medical cannabis programs and specialized clinics
- Specific indications and contraindications for medical cannabis treatment

Santé Cannabis in Quebec, Canada: Clinic and Research Model



Study Objective

To provide initial evidence on the safety and efficacy of CBM and recommendations for product and dose selection to achieve improved symptom control in a cancer population.

Methods

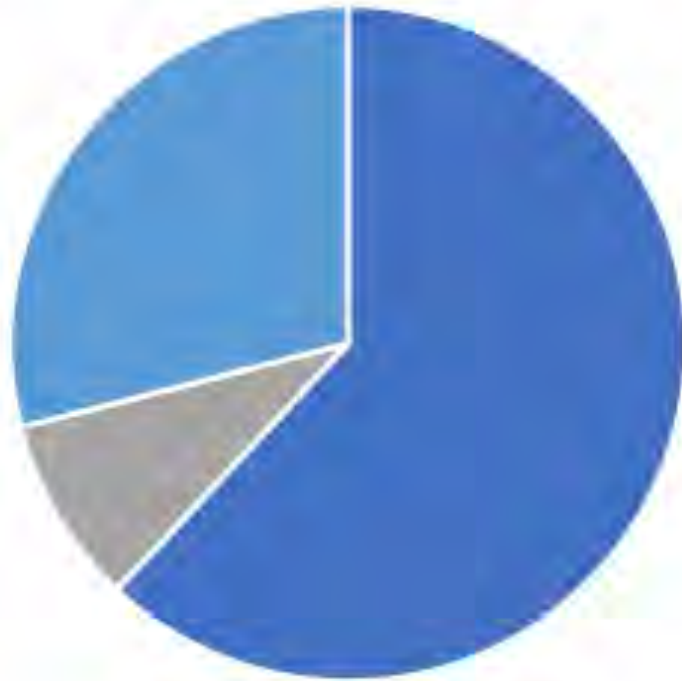
- Retrospective chart review
- Cancer patients: March 2016 - February 2018 at Santé Cannabis
- Revised Edmonton Symptom Assessment Scale (ESAS-r) at baseline and 3-month follow-up: primary outcome measurement

Edmonton Symptom Assessment System: (revised version) (ESAS-R)												
Please circle the number that best describes how you feel NOW:												
No Pain	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Pain
No Tiredness (Tiredness = lack of energy)	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Tiredness
No Drowsiness (Drowsiness = feeling sleepy)	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Drowsiness
No Nausea	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Nausea
No Lack of Appetite	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Lack of Appetite
No Shortness of Breath	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Shortness of Breath
No Depression (Depression = feeling sad)	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Depression
No Anxiety (Anxiety = feeling nervous)	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Anxiety
Best Wellbeing (Wellbeing = how you feel overall)	0	1	2	3	4	5	6	7	8	9	10	Worst Possible Wellbeing
No _____ Other Problem (for example <u>constipation</u>)	0	1	2	3	4	5	6	7	8	9	10	Worst Possible _____

Results

MEDICAL CANNABIS ROUTE OF TREATMENT ADMINISTRATION

N=112



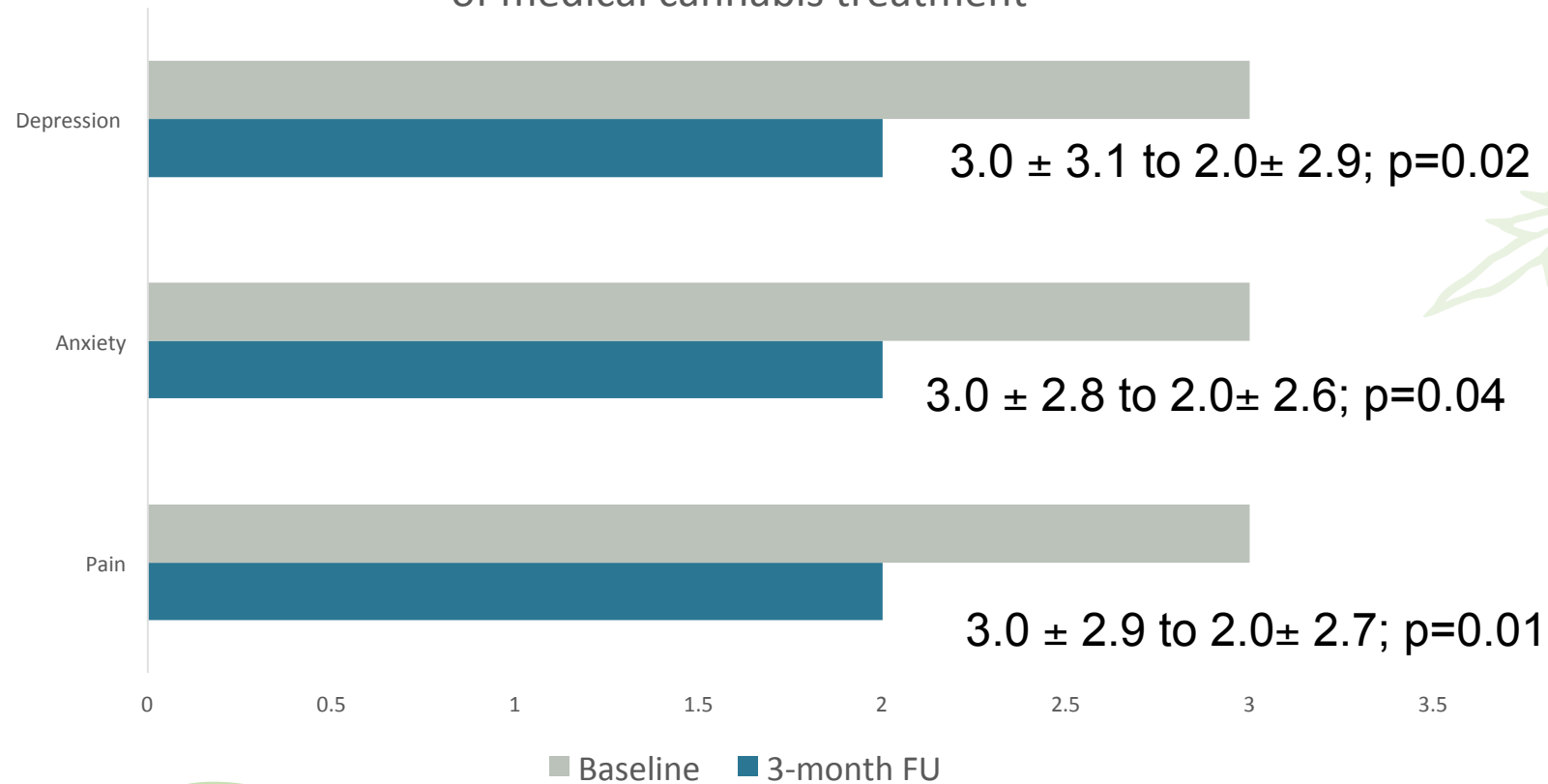
■ Oral ■ Inhaled ■ Oral and Inhaled

Patient demographic and clinical characteristics

n = 112	
Age (years)	58 ± 14
Gender	
Males	51 (45.5) **
Females	61 (54.5)
Diagnosis by cancer type:	
Breast	24 (21.4)
Gastro-intestinal	25 (22.3)
Lung	13 (11.6)
Head and neck	3 (2.7)
Brain/ Neurological	11 (9.8)
Gynecological	5 (4.5)
Hematological	15 (13.4)
Urinary Tract	6 (5.4)
Prostate	6 (5.4)
Other	4 (3.6)
Cannabinoid Therapy:	
THC-rich	9 (8.0)
CBD-rich	17 (15.2)
THC/CBD 1:1	41 (36.6)
THC-rich and CBD-rich	9 (8.0)
THC-rich and THC/CBD 1:1	27 (24.1)
CBD-rich and THC/CBD 1:1	3 (2.7)
THC-rich, CBD-rich and THC/CBD 1:1	6 (5.4)

Results

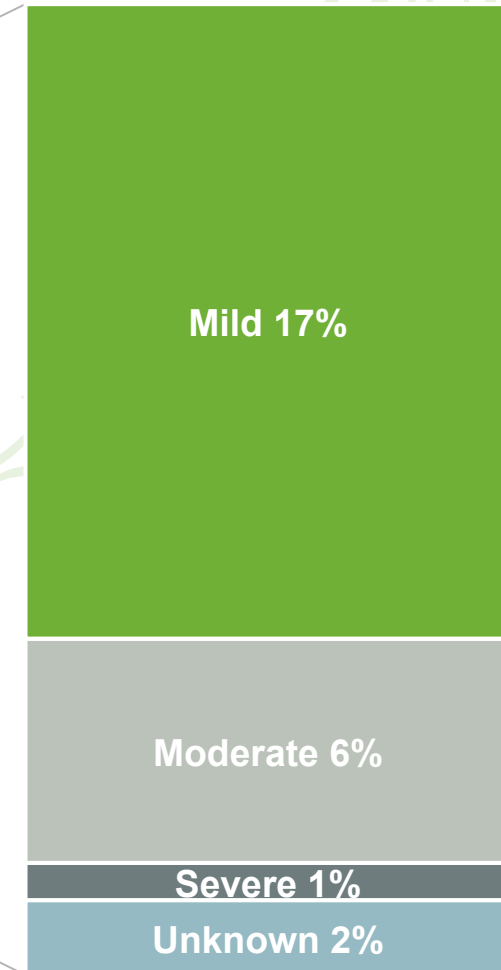
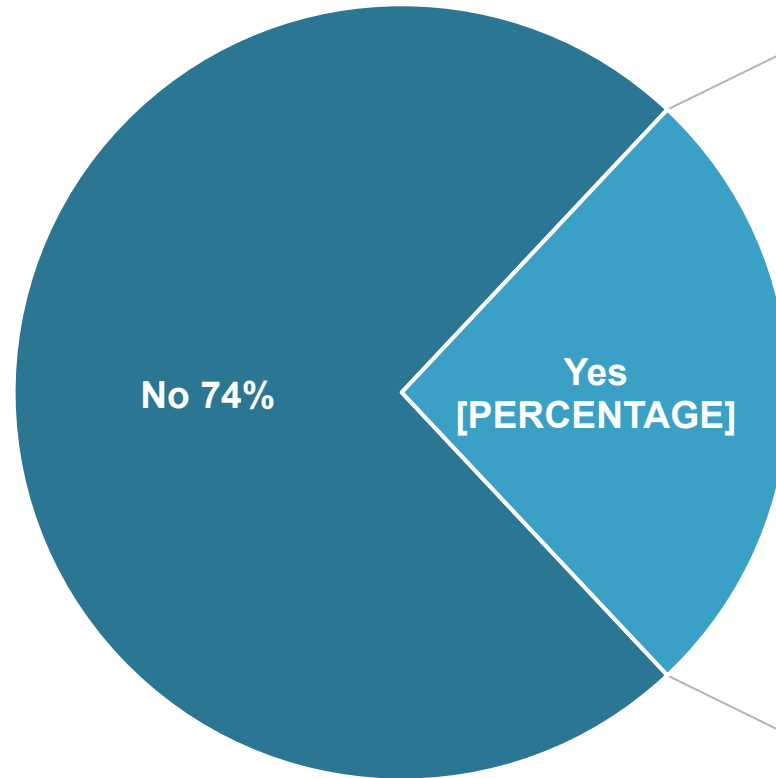
ESAS-r at baseline and after 3 months
of medical cannabis treatment



Product and dosage
adjustments were utilized to
overcome all side effects

Results

Adverse Events Following 3-months of Cannabis Treatment
N=112



Conclusions

- CBM: promising tool to improve symptom management in cancer
- Prescription should be done by physicians/ interdisciplinary team with specialized medical cannabis knowledge and competencies
- Medical cannabis treatment was safe in this population
- Future RCTs are necessary to confirm these preliminary data

Trial record 9 of 27 for: cannabis and chronic pain

[◀ Previous Study](#) | [Return to List](#) | [Next Study ▶](#)

Safety and Efficacy of Smoked Cannabis for Improving Quality of Life in Advanced Cancer Patients



The safety and scientific validity of this study is the responsibility of the study sponsor and investigators. Listing a study does not mean it has been evaluated by the U.S. Federal Government. [Know the risks and potential benefits](#) of clinical studies and talk to your health care provider before participating. Read our [disclaimer](#) for details.

ClinicalTrials.gov Identifier: NCT03339622

Recruitment Status ⓘ : Recruiting
First Posted ⓘ : November 13, 2017
Last Update Posted ⓘ : February 8, 2018
[See Contacts and Locations](#)

Status: approved by Health Canada and Currently Recruiting Patients

Principal Investigator:

Antonio Vigano, MD, MSc

Coinvestigators:

Erin Prosk, MSc

Maria Fernanda Arboleda MD, MSc

Type of project: Phase III clinical trial

Primary objective:

To evaluate the effect of inhaled PPP001 to improve HRQoL of patients with uncontrolled cancer pain and incurable malignancy



Questions and Answers

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Acknowledgments



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Annual Meeting on Supportive Care in Cancer

www.mascc.org/meeting

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