Title: Complications of Marijuana

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WHEREAS, several studies have shown that emergency department (ED) visits with a cannabis related diagnosis have increased\(^1\)\(^2\)\(^3\); and

WHEREAS, the National Poison Data System reported 28,630 exposures from 2017 – 2019 due to cannabis exposure and 27% of the calls were for children under 10-year-old\(^4\); and

WHEREAS, youth access to cannabis has significant long-term and short-term negative effects on cognitive ability and can induce devastating mental health issues; and

WHEREAS, Cannabis induced psychosis is common, especially with current availability of high potency smoked and ingested THC products and daily cannabis use has a 5

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times increased odds ratio of developing a psychotic disorder when using high potency cannabis\textsuperscript{5678910}; and

WHEREAS, ED boarding of psychiatric patients remains a major concern in emergency department across the country, and a percentage of patients with psychosis related ED boarding is due to cannabis related psychosis; and

WHEREAS, Cannabis Hyperemesis syndrome can be a frequent ED diagnosis\textsuperscript{11}; and

WHEREAS, increased use of cannabis leads to increased trauma including motor vehicle fatalities and workplace injuries; and

WHEREAS, smoking and vaping cannabis is associated with lung injury such as reactive airway disease, pneumothorax, and cancer risk\textsuperscript{121314}; and


WHEREAS, patients may present to the ED with seizures that are exacerbated by cannabis use\textsuperscript{15,16}; and

WHEREAS, patients have presented to the ED with bleeding complications due to drug interactions of anti-coagulants and cannabis use\textsuperscript{17}; and

WHEREAS, many medical organizations have published position statements on cannabis harms related to their specific specialty such as the American Academy of Pediatrics, American College of Obstetrics and Gynecology, American Glaucoma Foundation, American Heart Association, American Lung Association, and International Association for the Study of Pain; and

WHEREAS, ACEP has a public health and education duty for disease prevention, including the harms of marijuana that present to the ED; and

WHEREAS, some emergency physicians may not be aware of associated cannabis related harms and drugs interactions, thereby under reporting the incidence of cannabis related ED visits; therefore, be it

RESOLVED, That ACEP develop practice guidelines on the treatment and complications of marijuana use as seen in emergency department presentations; and be it further

RESOLVED, That ACEP provide education and guidance to emergency physicians in relationship to documentation and overall awareness of cannabis related ED diagnoses.

RESOLVED, That ACEP develop and disseminate public facing information on the complications of marijuana use as seen in the emergency department.


\textsuperscript{16} Malyshevskaya, O., Aritake, K., Kaushik, M.K. \textit{et al.} Natural (\(\Delta^9\)-THC) and synthetic (JWH-018) cannabinoids induce seizures by acting through the cannabinoid CB1 receptor. \textit{Sci Rep} 7, 10516 (2017). https://doi.org/10.1038/s41598-017-10447-2

\textsuperscript{17} Drugs.com drug interaction checker with cannabis and cannabidiol