

# POSITION STATEMENT

## Pharmacy Practitioners' Roles and Responsibilities Regarding Cannabis

### Introduction

The proposed Cannabis Act and its regulations come into effect October 17, 2018. This legislative framework will control the production, distribution, sale, import, export and possession of cannabis in Canada for both medical and non-medical purposes.

This Position Statement has been created to provide guidance to pharmacy practitioners, based upon foundational professional principles, on their role(s) and responsibilities regarding cannabis. While these roles and responsibilities existed prior to its legalization, the complexity of the landscape once cannabis is broadly available to the public for non-medical purposes, and the associated abundance of conflicting message from stakeholders, has created a need for guidance from the NSCP to support clarity among the profession. This Position Statement has been created during a time of relative uncertainty and transition, and it is likely to be updated as the legislative environment changes.

Part of what makes cannabis for medical purposes complex is that, except for a small number of cannabinoid containing prescription products (Nabilone and Nabiximol), its accessibility to Canadians did not arise through the usual drug approval process where Health Canada reviews evidence from the manufacturer demonstrating that the drug is safe and effective. Instead, access to cannabis was established by a series of legal cases that ruled that individuals with a medical need have the right to possess cannabis for medical purposes. The courts did not assert that it was safe and effective, or that it should be approved as a drug. Within the legal drug market, cannabis for medical purposes seems to occupy a novel category of its own.

Cannabis for medical purposes is also complicated by the fact that there are inconsistent messages from the medical community versus those from the cannabis industry and cannabis special interest groups. The medical community continues to be extremely cautious about its appropriateness as treatment for many medical conditions because of the lack of supporting evidence. Where its use is supported by the medical community due to high quality evidence, it is usually for a small number of very particular indications, and only after other available therapies have been exhausted.

The issue is further complicated by the fact that cannabis will be readily available in government operated stores in Nova Scotia. This will make cannabis readily available to individuals regardless of their intention for obtaining it (i.e., medical vs. non-medical). Often products that might be used for medical purposes are the same products that are used for non-medical purposes, and these will be generally available without the intervention of a health professional.

Given all of this, it is unsurprising that pharmacy practitioners may be uncertain how their practice will be, or should be, impacted by the legalization of cannabis.

## Foundational Principles:

The following foundational principles of a pharmacy practitioner's responsibilities are helpful in considering their responsibilities specific to cannabis:

- (1) **Engage in continuous learning:** A pharmacy practitioner continuously improves their levels of professional knowledge and skill through objective, evidence-informed sources. Information provided by those with a commercial interest in the subject matter should raise concerns about its objectivity.
- (2) **Promote patient well-being:** A pharmacy practitioner provides optimal treatment and care and provides information on health promotion and disease prevention.
- (3) **Support patient autonomy:** A pharmacy practitioner works to empower patients with sound information and respects their informed decisions.
- (4) **Avoid and manage conflict of interest:** Where the interests of public health and business diverge or do not align, the promotion of public health and safety is given primary importance. A pharmacy practitioner does not enter into arrangements that undermine, or could reasonably be perceived to undermine, their own or another healthcare professional's judgement or that are otherwise inappropriate.

## Roles and Responsibilities of Pharmacy Practitioners

### 1. Patient Education:

Pharmacists have an important role to play in patient education related to cannabis. The internet abounds with far-reaching claims about the medical benefits of cannabis, and it can be difficult for patients to determine the reliability of what they read. Pharmacists who answer questions from the public, provide information, advice and/or recommendations are expected to have taken reasonable steps to be competent to do so, and to advise individuals on the level of evidence that supports their response. Pharmacists are expected to rely on sources that can be reasonably believed to be independent, objective and up to date.

Pharmacists are also expected to keep the individual's health need(s) as the focus of their discussion, versus a focus on cannabis, and aim to reduce stigma and maximize the opportunity to address the individual's health need(s).

### 2. Patient-Centered Drug Therapy Management:

Pharmacists will take reasonable steps to be competent to consider the implications of cannabis use on a patient's concurrent drug therapy and comorbid health conditions.

Pharmacy practitioners will gather information about cannabis use when inquiring about a patient's use of non-prescribed drugs and/or other substances (i.e., alcohol and tobacco), and consider this in their provision of patient-centered care.

### 3. Collaborative Relationships and Agreements:

Pharmacists should attempt to collaborate with other members of the patient's health team when responding to questions regarding if, and when, cannabis may be appropriate to meet the patient's health need(s), while respecting patient autonomy.

Pharmacy practitioners will be careful to recognize and avoid business arrangements that place them in a real or apparent conflict of interest. Conflicts of interest undermine the objectivity of the practitioner's professional judgment. Care needs to be taken not to erode the trust that patients place in the profession and their pharmacy team to provide them with unbiased guidance and care.

For clarity, pharmacy practitioners and pharmacy owners retain their objectivity and avoid potential conflict of interest by disclosing any relationship(s) with a Licensed Provider(s)\* to a patient to whom they are making a recommendation regarding accessing cannabis for medical purposes. Further, neither pharmacy practitioners nor pharmacies may solicit or accept any reimbursement, remuneration, sponsorship or reward for referrals from Licensed Provider(s)\* of cannabis, or any third parties associated with them.

\* Licensed Provider – having a federal license under the Cannabis Act and regulations authorizing activities in relation to cannabis including cultivation, processing, testing, sale and research.

### 4. Distribution of Cannabis

There are a small number of cannabis products that have been approved by Health Canada and are already available in pharmacies with a prescription.

Pharmacy practitioners may not distribute cannabis products that have not been approved as a drug by Health Canada (DIN or NPN), unless as part of a rigorously-designed peer-reviewed study that has been approved by a Research Ethics Board (REB).

Generally, Canada's drug approval system recognizes that there are times when it is appropriate for a patient to receive a drug product in a form that is not marketed for the general public, and in those instances allows for pharmacists to compound a drug product. However, this provision does not currently extend to cannabis.

The proposed Cannabis Act states that activities with cannabis are prohibited unless authorized. Compounding would be captured under the prohibition on production (clause 12), which indicates that it is prohibited to obtain, or offer to obtain, cannabis by any method or process, including manufacturing, synthesizing or altering its chemical or physical properties. As such, any compounding activity involving cannabis would require enabling regulations or a ministerial authorization, in addition to complying with applicable provincial or territorial requirements. These provisions are not in place, and as such pharmacists are prohibited from compounding with cannabis.

## References:

- Nova Scotia: [Be in the Know](#) – NS government website providing information for the public and healthcare professionals about cannabis
- Government of Canada: [Cannabis in Canada](#) – Federal government website providing information on cannabis related issues pertaining to the law, health effects, travel, impairment, and business
- Health Canada: [Information for Health Care Practitioners- Medical Use of Cannabis](#)

- Legislation: Health Canada - [Cannabis Act](#); [Cannabis Regulations](#)
- [Canada's Lower-Risk Cannabis Use Guidelines](#)
- [Simplified Guideline for Prescribing Medical Cannabinoids in Primary Care, Canadian Family Physician, 2018; 64: 111-20](#)
- [Cannabis Policy Framework – Center for Addiction and Mental Health](#)
- [The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research](#), The National Academies of Sciences, Engineering and Medicine, Washington DC, The National Academies Press. doi: 10.17226/24625
- [Systematic Review of Systematic Reviews for Medical Cannabinoids](#)
- [Canadian Public Health Agency - Cannabasics](#)
- [RxFiles](#) Cannabis Resources