EDITORIAL

Challenged to Continue to Grapple about Cannabis and Mental Health Practice

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It seems that cannabis is an increasingly omnipresent phenomenon within the practice of psychiatry, including our child and adolescent subspeciality. Its heavy use is a common component of a number of patient presentations at case rounds at a centre where I work which specializes in the assessment and care of mental health problems in youth and adults with intellectual disabilities. I am also frequently reminded about its community use during my train commutes to and from work when I catch a whiff of that distinct odor in many of the train stations and cars, and as we pass by the many cannabis vendors. There is also the growth in the research literature presenting important advances in biological research, more sophisticated clinical trials, and greater scrutiny of population patterns. These clinical and community exposures, along with the mounting research database, challenge us as clinicians and researchers to grapple across multiple domains of consideration, and may confront our individual and collective preconceived beliefs whether positive, negative, or indifferent. These grappling are further complicated as unknowns evolve, become re-defined, and persist.

In a previous issue of this Journal, Haines-Saah & Fischer (1) called for more critical thinking at the societal and population levels when considering the influence of cannabis, particularly in the context of legalization in Canada. In this issue, we chose to focus closer to the clinical level and incorporated cannabis use into our “Challenging Case” column, presenting a clinical scenario in which a youth, struggling with emotional regulation, perceives a role for cannabis in their treatment. We solicited two written responses from clinician experts in concurrent disorders as to possible approaches to the clinical scenario, one from Dr. Darren Courtney (Centre for Addictions and Mental Health & University of Toronto) (2), and the second from Dr. Christopher J. Hammond and Dr. Bushra Rizwan from John Hopkins University (3). Their responses are followed by a reflective commentary by Dr. Simon Giasson & Dr. Mona Gupta from the Université de Montréal, who employ an ethics framework, considering both the case and the clinicians’ responses (4). We have also highlighted cannabis in this issue’s “Recommended Academic Reading” column where three additional experts on cannabis research have identified new papers in the field, they recommend you consider. These include a thoughtful qualitative piece capturing the perspective of marginalized youth, a systematic review of cannabis and cognitive function, and an update on the Lower-Risk Cannabis Use Guideline.

Also in this issue, find the empirical research contributions: two exploratory pieces, one investigating decision-making by youth about psychotherapy (5) and one which taps into physician knowledge about, and experience with, pharmacogenetics (6).

You will also find interesting reading recommendations in our Arts Literature and Nature (ALAN) section. Dr. Polina Anang, a new contributor to this column, shares her discovery of interesting reads from indigenous authors. And we have another contribution from our resident soil scientist who finds respite in the plant word, this time providing an introduction to ferns.

Also do not miss the CACAP Executive Update column, this time from CACAP’s past-president, Dr. Jana Davison. In addition, if you missed the CACAP Annual Meeting, don’t miss learning about some of our Canadian child and adolescent psychiatry colleagues who received CACAP awards for their exceptional work.
References


