

Cannabis

Marijuana-Crushed leaves, stems, and flowers of female hemp plant (cannabis sativa). Pot, Grass, Dope, Ganja, Mary Jane, Reefer, Skunk, Weed, reefer, smoke, ace, blunt, dope, skunk5

Hashish- resin from flowers and leaves; more potent than marijuana Hash, hash oil, weed oil, weed juice, honey oil, tea, black solids, grease, smoke, boom, chronic, gangster, hemp⁵



Characteristics (Hallucinogen)	 Tetrahydrocannabinol (TCH) is the active ingredient; 5-11% in marijuana and up to 28% in hashish⁵ THC modulates release of neurotransmitters (including dopamine and glutamate) by interacting with specific cannabinoid receptors that are distributed in brain regions⁵ Initial half-life is 1-2 hours and elimination half-life is 24-36 hours.⁵ Effects occur rapidly and last up to several hours; accumulates in fat tissue for up to four weeks before being released back into blood stream; effects may persist⁵ When smoking cannabis the effect is almost immediate and may last several hours, depending on amount consumed. When it is swallowed, the effect is felt in about an hour, and lasts longer than when it is smoked.⁴ THC is stored in fat cells and expelled from the body over a period of days or weeks, depending on the frequency of use and the amount used.⁴ 			
Presentation during intoxication	Common Signs and Symptoms of Relaxation Tachycardia Decreased blood pressure Blood shot eyes Extreme intoxication signs and sy Fatigue Hallucinations	Talkativeness Euphoria Increased appetite	Mood swings Coughing Decreased Inhibitions Delusions	
Monitoring and support during intoxication	Monitor ¹⁰ • Monitor vital signs • Monitor mental status Supportive Interventions ¹⁰ • Provide supportive care and reassurance			
Withdrawal presentation ⁴ (usually last a week or two) Monitoring and support during	Symptoms may include ⁴ Restlessness Decreased appetite GI Distress The symptoms are usually relathan short-term symptomatic Monitor	Irritability Night sweats Anxiety and general fear tively mild and last a week o	Sleep difficulties Vivid dreams Tremor r two. They do not require more mplications (i.e anxiety) 4,7	
withdrawal Potential Complications	 Provide supportive care, and ensure a calming environment May include⁵: Chronic use may lead to bronchitis, weight gain, bloodshot eyes, loss of energy, apathy, "fuzzy" thinking, slow reaction time, impaired judgment, decreased testosterone in 			

males; increased risk of depression, anxiety, and schizophrenia



	With antidepressants ⁸	With Lithium ⁸	
	 With tricyclic antidepressants, 	 Clearance of lithium may be 	
	tachycardia, light-headedness,	decreased with cannabis use.	
	mood lability, and delirium have	With Alcohol ⁹	
	been reported	 Intensifies each other's effects and 	
	 Cardiac complications have been 	can cause severe impairment.	
Notable Drug Interactions	reported in children and	With Opioid ⁸	
	adolescents	 THC blocks excitation produced by 	
	 Cannabis increases serotonin levels 	morphine	
	which may result in a serotonin	With Stimulant ⁸	
	syndrome	 Increased heart rate 	
	With antipsychotics ⁸	 Blood pressure increased with high 	
	 Drugs with anticholinergic 	doses of both drugs	
	properties can cause marked	 Increased plasma level of cocaine 	
	hypotension and increased	euphoria	
	disorientation		
	Cannabis can exacerbate depression, impair cognitive functioning, induce psychosis,		
Psychiatric	trigger schizophrenia in individuals who are predisposed, and worsen symptom control in		
	people with schizophrenia.1		
	 Cohort studies suggest that chronic use of cannabis by teenagers is associated with >5- 		
	fold increase in risk of later-life depression and anxiety as well as an increased risk of		
effects	early-onset psychosis. ⁵		
enects	Prolonged exposure may cause an initial increase in synaptic dopamine and then lead to		
	prolonged changes in the endogenous cannabinoid systems. ⁵		
	Regular marijuana use has been linked with increased risk of tardive dyskinesia in		
	patients on antipsychotics. ⁵		
	Adolescents and individuals with primary psychiatric disorders appear to be particularly		
	vulnerable to the psychiatric effects of cannabis. ¹		



References

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