**C3RN News Summary – July 1, 2019**

Research­­­

1. Analysis of data collected from a survey given to patients visiting an epilepsy clinic found that “eighty-seven percent stated that they used marijuana for treatment of epilepsy, and 82% found it helpful” and concludes “further research is needed to understand recreational cannabis use among patients with epilepsy.”

[June 25, 2019: Portland State University, OR](https://www.epilepsybehavior.com/article/S1525-5050(19)30222-7/fulltext)

2. In an expert opinion published in *The American Journal of Medicine* policy recommendations are made including that “providers should counsel patients that the use of cannabinoids may alter the pharmacokinetics and efficacy of other medications” and “cannabis products that are used for medicinal reasons should be included in the herbs and supplements component of the medical record.”

[June 25, 2019: University Arizona College of Medicine, AZ](https://www.amjmed.com/article/S0002-9343(19)30531-5/pdf)

3. A study evaluating the pharmacokinetics of oral CBD products taken by seizure patients finds that “administering CBD as a capsule rather than a liquid allows for more precise determination of pharmacokinetics parameters and is more representative of CBD swallowed products” and that “the fat content of a meal can…account for variability in bioavailability and overall drug exposure within patients with oral products.”

[June 27, 2019: University of Minnesota, MN](June%2027,%202019:%20University%20of%20Minnesota,%20MN)

4. A study designed to “identify the prevalence of cannabis use among all patients admitted with acute pancreatitis (AP) in the United States and to investigate the impact of cannabis use on AP mortality, morbidity, and cost of care” finds that “cannabis-exposed hospitalized patients with AP had lower age-adjusted, mortality, morbidity, and hospitalization-cost than non-cannabis-exposed patients.”

[July 1, 2019: University of Miami, FL](https://insights.ovid.com/crossref?an=00006676-201907000-00017)

5. Researchers examining data and publications regarding opioid overdoses and cannabis legalization summarizes that “our expanded analysis does not support the interpretation that broader access to cannabis is associated with lower opioid overdose mortality.”

[June 25, 2019: Stanford University, CA](https://www.pnas.org/content/116/26/12624)