

## The Nurses Role in an Increasing Cannabis Intoxication Patient Population

### Question:

**In cannabis users of all ages how does the increased availability of appetizing and inaccurately labeled edible products compare to previous inhalation forms of cannabis use affect acute toxication of THC, what nursing care should be performed and what are the effects of this increase on nursing and hospital care.**

Consumption of cannabis products has been around for a long time, but only recently has there been so many methods for consuming products that include THC. Common methods include, smoking, vaping and consumption of cannabis made into edible forms. I will write primarily on how these edible forms differ, from the other inhalation forms, on acute cannabis intoxication and touch on how this impacts nursing.

When consuming cannabis products in a smoking form the users desired effect starts taking place at around ten minutes with peak levels being reached between thirty and ninety minutes. Users of this form of cannabis can quickly judge if they have reached the desired results and are unlikely to continue to consume into levels that require healthcare intervention. In addition to this short time to experience effects and reach a peak the relief of these effects is around four hours. Edible forms of cannabis conversely don't start taking effect until thirty

minutes after consumption and reach a peak after three hours. The relief is then achieved twelve hours after consumption. This difference leads to even experienced users consuming more of the product than necessary which leads to intoxication due to the user being unsure if they consumed enough to reach the desired effects.

Users can expect to reach desired levels of effect with the consumption of ten to thirty mg of edible cannabis products. The problem arises from this being a low dose and difficult to put into an edible form in such small amounts. Most edibles are advertised at dosages of around one hundred mg which would mean the user needs to consume around a tenth of one of these products that is likely to be in the form of a cookie or some other appetizing dessert or snack that is commonly eaten whole. In addition to difficulty for users to simply eat a smaller portion of something that looks like a single serving to most people there is also the problem with these products having inaccurate dosage claims. It has been shown that products often contain significantly less to significantly more THC in them than the claim. This kind of inaccurate information leads users who experience little effect, due to consuming a product with much lower dosage, into consuming more of the product which can vary wildly leading to taking a much higher dose on accident. It can also lead a user into consuming a product expecting a specific dose only to ingest a much higher dose than planned. These problems with edible forms of cannabis can quickly lead to undesired levels of acute intoxication.

Acute intoxication of THC in adults is generally considered to not require medical intervention. This intoxication includes tachycardia, blood pressure changes such as hypertension and orthostatic hypotension, tachypnea, psychomotor impairment as well as others. The primary concern for healthcare professionals when seeing patients who are having

acute THC intoxication is to identify any co-ingestations that may be more harmful or potentiate the THC ingestion. It is important to get a detailed health history on the patient including environmental stressors and personal and family history of substance abuse as well as mental health disorders. Patients experiencing chest pain should be placed on an EKG and electrolytes should be checked because of the possible risk for MI being elevated with cannabis use. In addition to gathering information patients having acute intoxication of THC benefit from supportive care that involves reduced stimulation and a calm environment. The treatment for acute intoxication of THC is management of symptoms and close monitoring of CNS depression especially in geriatric and pediatric cases.

Acute cannabis intoxication is generally not a health threatening condition, but due to higher accidental dosages it is becoming a more common patient population that previously. Educating patients on the physical and psychiatric effects of cannabis use as well as the risks of using products labeled inaccurately will help reduce this population of patients in the healthcare system by helping reduce the need for cannabis users to seek healthcare.

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