The cannabis doctor is in

Doctors can become subspecialists in fields such as cardiology, gynecology or neurology, but what about cannabinoidology? Just over a year after new federal regulations made physicians the gatekeepers for prescribing access to medical marijuana, a handful are focusing on cannabis as a therapeutic agent and carving out a new subspecialty.

Cannabis clinics have so far taken on two distinct forms in Canada. With the membership-based clinic, patients pay a fee to be educated by nonmedical staff and connected with knowledgeable physicians willing to prescribe legal access to medical marijuana. The second model is a more traditional medical clinic staffed with physicians with expertise in prescribing cannabis. Patients are referred for a consultation and are not charged; the doctor bills provincial health systems. It’s not known how many such clinics exist.

One in Ottawa’s northeast began accepting patients by referral in May. The Canadian Cannabis Clinic, one of six cannabis clinics in Ontario, is on the fifth floor of a medical building with only the acronym “CCC” in sight. The clinic is bare bones, no messaging, no chic design; it looks like any other clinic.

Inside, an administrator welcomes patients and gives them a 12-page form to fill out in the bright waiting room. Magazines stacked on the table include the National Geographic special on “Weed: The New Science of Marijuana.” There are two exam rooms for physicians: one works Tuesdays; the other works the first week of the month. In a third room, a counsellor meets with patients who have a prescription for medical marijuana.

The counselling is paid for by CanvasRx, a commercial resource site that helps patients choose a strain from among the 19 Health Canada–approved licensed producers that sell cannabis. CanvasRx keeps counsellors informed about products and offers compassion pricing plans for low-income patients on disability assistance.

Most patients use this service because they’re “cannabis naïve” and have many questions about a drug that has been prohibited for decades, says CCC’s medical director Dr. Barry Waisglass, who works at the company’s clinic in St. Catharines, Ontario. Waisglass was a family doctor for over 40 years before taking on this new role. “My motivation is harm reduction.” He views cannabis as an alternative to potentially more hazardous pain medications, such as opioids. He cites a 2014 study published in *Addiction* that showed that one to two people die every day in Ontario from accidental opioid overdoses.

After prescribing, Waisglass has regular follow-ups with patients for as long as they use cannabis for therapy. Before each visit, patients have to give a urine sample; Waisglass doesn’t want to see opioids or cocaine present when the patient says he or she is only taking Advil for pain. It’s an attempt to prevent marijuana misuse among patients.

“I’m not rubber stamping some stoner getting street weed that this is a proper medical assessment and a consultation was done in keeping with OHIP [Ontario Health Insurance Plan] regulations.” Since the first clinic opened in Sept. 2014, Waisglass has seen an increase in referrals.

Elsewhere in Canada, complementary counselling services are not always offered, but physician consulting fees are covered by provincial health insurance.

In Montréal, a marijuana dispensary turned semiprivate clinic has a team of seven doctors. “Access to doctors is a major problem in Quebec. We had an opportunity to do something completely new,” the founder of Santé Cannabis, Adam Greenblatt, says about the transition. Consultations are free, but if
the patient qualifies to access medical marijuana, there is an annual membership fee of $250 for uninsured services, $200 for low-income members. Greenblatt says he had the fees looked over by the Collège des médecins du Québec, which didn’t take issue with the model.

The college CEO Dr. Charles Bernard says they inspect all clinics when they open. “We want the physicians in those clinics to respect the rules and we don’t want them to be part of a gimmick.”

Ontario’s first referral clinic, which opened in July 2014, assesses a patient’s suitability for cannabinoid medicine, including herbal cannabis and the two pharmaceutical options. Dr. Danial Schecter cofounder of the Cannabis Medical Clinic in Toronto, says the clinic has already received nearly 2600 referrals from family physicians and specialists across Ontario. “That just goes to show the need for other physicians who feel that cannabinoid therapy may help their patients but they’re just not comfortable doing it themselves.”

Two physicians work full-time at Schecter’s Toronto clinic. He also offers a training program for physicians looking to join the team and develop a subspecialty in cannabinoid therapy.

All services are covered by OHIP and Schecter is vocal about his distaste for clinics that charge patients. “A majority of the patients we see are on disability and are already suffering with chronic illness. Charging some kind of access fee, or a user fee, goes absolutely against the Canada Health Act and it’s not right.”

Schecter says physician’s attitudes toward prescribing cannabinoids as a therapeutic option may change over time, especially after the Supreme Court ruled in July that other forms of medical marijuana, not just the dried bud, should be available to patients. New government regulations allow licensed producers to sell cannabis oils, which means patients will be able to ingest the drug in exact doses, much like the pharmaceutical variety.

“To be honest my real dream is there won’t be a need for cannabinoid clinics and that every family physician and specialist will be comfortable prescribing it as part of their day-to-day practice,” Schecter says. — Shannon Lough, CMAJ

This is the second part of a two-part series on medical cannabis clinics.