



AUTISM

Dr. J. Anderson, MD, CCFP

\$3.6 MILLION

CO-MORBIID CONDITIONS

LIFETIME COST OF CARE

- Recent stats indicate between 400-800,000 Canadians with autism
- 1/50 is estimated prevalence age 1-17 in Canada
- costs include direct and indirect costs. Including for example lost productivity and social costs.
- Therapy costs up to 60k/year
- Loss of income estimated as up to 60k yearly per family.
- Epilepsy, ADHD, Anxiety, sleep disturbances are especially high in autism.
- CBD and other Cannabinoids have been shown to be helpful to various extents in all of these conditions.
- antipsychotics Abilify and Risperidone are the only approved drugs for autism simply to treat behaviour.
- Cannabinoids have multiple receptors and ability to address not only autism but the comorbidities substantially in my practice.
- In my practice at least half of kids respond to Cannabinoids and have significantly improved function and sleep. The cost savings are substantial.

AN APPROACH TO AUTISM

~THE ANDERSON METHOD

>>> START WITH CBD FOR SLEEP

- Many kids have difficulty sleeping, so my approach has been to start CBD at night.
- start 5mg at night and increase by 5 mg per week up to 20 mg.
- when sleep improved, start 5 mg in am. Go up by 5 mg weekly up to 20 mg.
- if needed introduce a 3rd dose at lunch titrating at 5 mg increments.
- · consider a CBD:CBN blend if CBD by itself not effective.
- If no results at 20mg CBD twice a day, then need to consider another product with CBG or full spectrum.

GOALS

- Improved sleep
- Improved behavior
- Improved function
- Attending school
- Improved communication
- Improved emotional regulation

OPTIONS CBD PRODUCTS IN CANADA

- Spectrum Yellow oil 20mg/ml
- Spectrum clarity (CBD and CBG) (20mg/ml)
- Tilray Charlottes Web (full spectrum) 60mg/ml
- Medipharm Labs CBD (various concentrations available)- Aurora Cannabis
- Purefarma hemp elixir 100 (100mg/ml) Aurora
 or Mendo

*this is only a few examples of ones that have shown to be effective. kids may respond to one and not another.

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KEY TAKE HOME MESSAGE

- A 3-4 month trial is adequate to see if a child will respond
- · Research is ongoing and very positive.
- if a child responds the benefits may outweigh any perceived risks. an individual approach is key.
- · cost savings personally and to the system is showing to be substantial.
- using objective scales for autism, sleep,anxiety and ADHD to gage response will be extremely beneficial.
- don't forget the extended social benefits to the family and community because even a 50% response rate is substantial and life changing.
- Pediatric patients can only access through the medical in Canada and this needs a physician or Nurse Practitioner to authorize. This is a mail order program.







Endocannabinoid System History

Maccarrone M. Tribute to Professor Raphael Mechoulam, The Founder of Cannabinoid and Endocannabinoid Research. Molecules. 2022 Jan 5;27(1):323. doi: 10.3390/molecules27010323. PMID: 35011553; PMCID: PMC8746417.

Autism Research Articles

1. Siani-Rose M, Cox S, Goldstein B, Abrams D, Taylor M, Kurek I. Cannabis-Responsive Biomarkers: A Pharmacometabolomics-Based Application to Evaluate the Impact of Medical Cannabis Treatment on Children with Autism Spectrum Disorder. Cannabis Cannabinoid Res. 2023;8(1):126-137. doi:10.1089/can.2021.0129

2.Jawed B, Esposito JE, Pulcini R, et al. The Evolving Role of Cannabidiol-Rich Cannabis in People with Autism Spectrum Disorder: A Systematic Review. Int J Mol Sci. 2024;25(22):12453. doi:10.3390/ijms252212453

3. Quillet JC, Siani-Rose M, McKee R, Goldstein B, Taylor M, Kurek I. **A machine learning approach for understanding the metabolomics response of children with autism spectrum disorder to medical cannabis treatment.** Sci Rep. 2023;13(1):13022. doi:10.1038/s41598-023-40073-0

Information on Terpenes

https://leafwell.com/blog/difference-between-terpenes-and-cannabinoids

https://www.mybpg.com/blog/cannabis-terpenes/

Health Canada Medical Document:

https://www.canada.ca/content/dam/hc-sc/migration/hc-sc/dhp-mps/alt_formats/pdf/marihuana/info/med-eng.pdf

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*Unless otherwise noted, all content my own. (Dr. Jen Anderson, MD, CCFP)

