

CANNABIS EXPOSURES REPORTED TO POISON CENTERS

Michael Moss, MD, FAACT
Medical Director, Utah Poison Control Center
Assistant Professor, Department of Emergency Medicine
Medical Toxicology, Addiction Medicine, & Emergency MEdicine

DISCLOSURES

No financial disclosures



TAKE HOME POINTS

- Cannabis exposures ↑ when cannabis access expands
- Adults experience anxiety/panic attacks
- · Children sedated, more severe effects
- Serious outcomes rare but do occur
- Store cannabis like other Rx meds
- Label cannabis like Rx meds



COLORADO MEDICAL CANNABIS

Table 1. Demographics of Patients Seen in the Children's Hospital Emergency Department for Ingestions^a

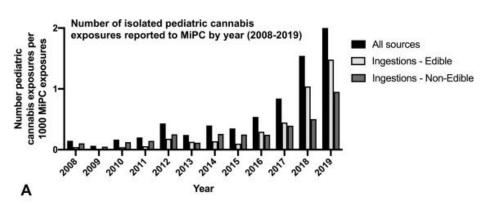
Characteristic	January 1, 2005, Through September 30, 2009	October 1, 2009, Through December 31, 2011
No. of patients	790	588
Age, median (IQR), y	2.6 (1.6-3.0)	2.3 (1.5-3.6)
Male sex	449 (56.8)	334 (56.8)
Types of ingestions		
Acetaminophen	90 (11.3)	48 (8.2)
Antihistamine	43 (5.4)	32 (5.4)
Antidepressant	23 (2.9)	14 (2.3)
Antitussive	18 (2.2)	14 (2.3)
Marijuana exposures	0	14 (2.3)

Abbreviation: IQR, interquartile range.

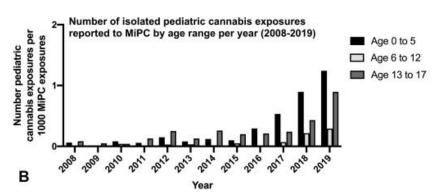


^a Values are given as number (percentage) unless otherwise noted.

MICHIGAN PEDIATRIC EXPOSURES

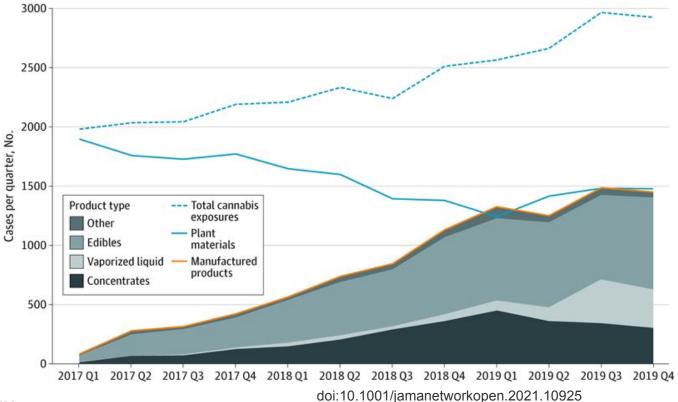


Medical 2008 Recreational 2018



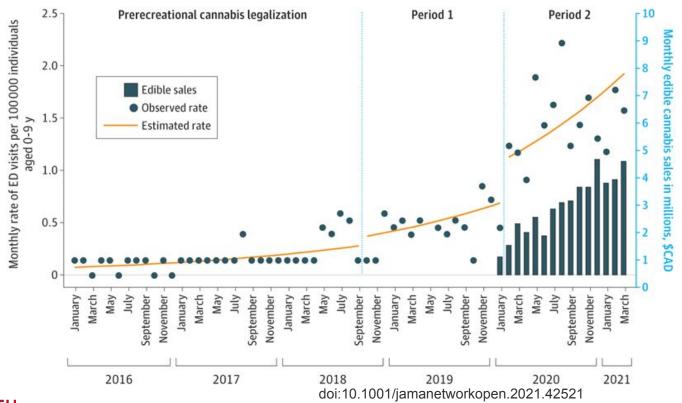


US POISON CENTERS 2017-2019



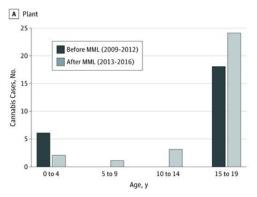


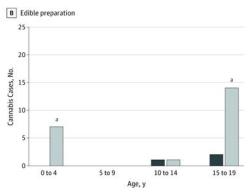
CANADA PEDIATRIC ER VISITS FOR CANNABIS

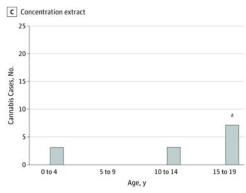


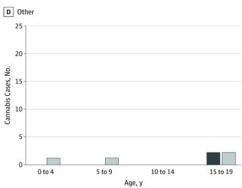


MASSACHUSETTS PEDS MEDICAL CANNABIS





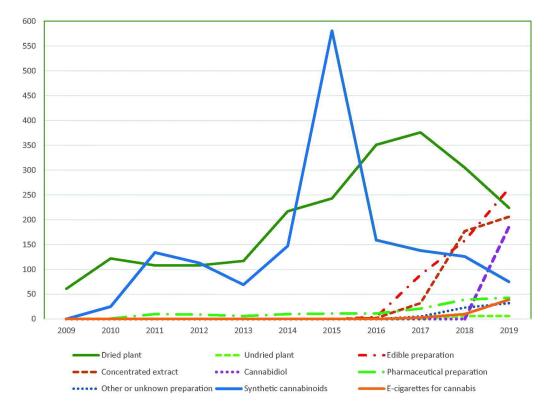








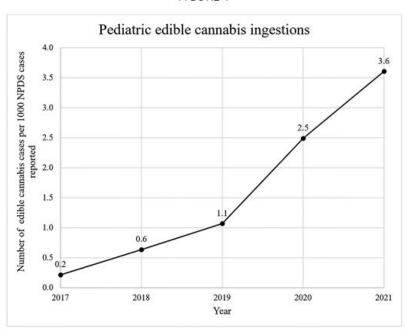
US ADULTS >50 CANNABIS POISON CENTER





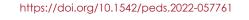
https://doi.org/10.1080/15563650.2020.1806296

FIGURE 1



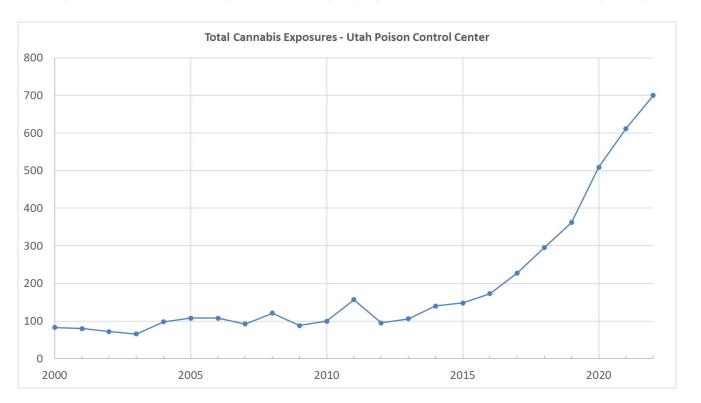
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Pediatric edible cannabis product ingestions per 1000 pediatric calls to the National Poison Data System by year.



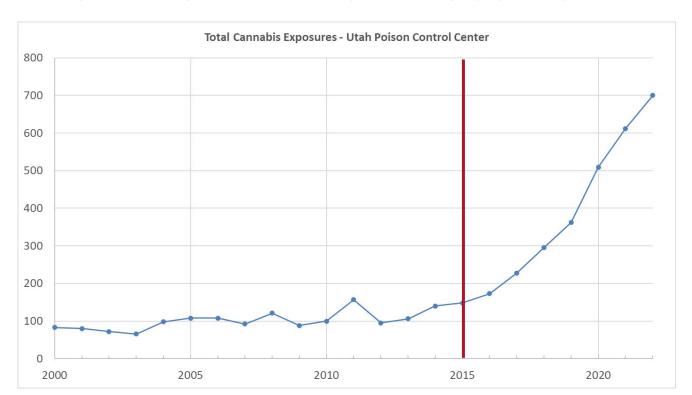


UTAH CANNABIS EXPOSURES - ALL AGES





UTAH CANNABIS EXPOSURES



Medical		
California	1996	
Washington	1998	
Oregon	1998	
Colorado	2000	
Nevada	2001	
Arizona	2010	
Utah	2020	
Recreational		
Colorado	2014	
Washington	2014	
Oregon	2015	
California	2016	
Nevada	2017	
Arizona	2020	



ADVERSE EFFECTS

Adults

- Anxiety/paranoia
- Panic attacks
- Calm reassurance
- Serious outcomes exceedingly rare

Children

- Often edibles
- Unrecognized = expensive workup
- Sedation
- Rare need for ICU



WHAT DOES THIS ALL MEAN?

- More cannabis available = more cannabis exposures
- Edibles disproportionate problem
- Most patients do ok
- Rare seizures, intubation in children
- Unclear how much Utah medical cannabis is contributing



WHAT SHOULD WE DO AROUT ITS





TAKE HOME POINTS

- Cannabis exposures ↑ when cannabis access expands
- Adults experience anxiety/panic attacks
- Children more severely affected
- Serious outcomes rare but do occur
- Laws/rules/outreach to reduce adverse effects/accidental exposure similar to Rx meds



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