

# A systematic review & meta-analysis of the prevalence of cannabis use disorders in people who use medicinal cannabis

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## BACKGROUND

The increase in the use of medicinal cannabis on a global scale has prompted concern about the potential for the development of negative consequences associated with its use.

We aim to systematically review the evidence on the prevalence and presentations of CUDs in people who use cannabis for medicinal reasons.

## METHODS

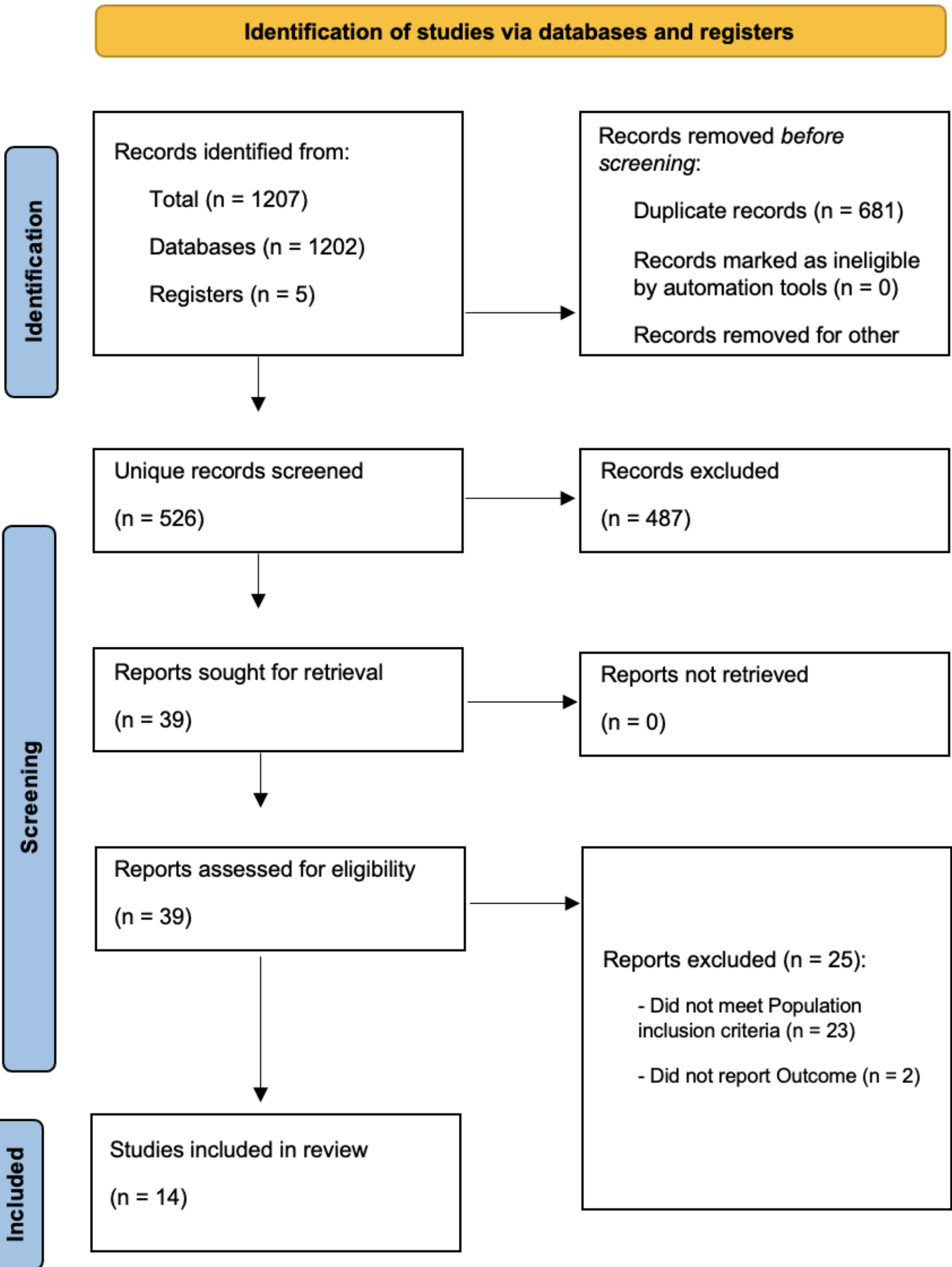
Systematic review and meta-analysis  
PROSPERO pre-registration  
Search: Medline, EMBASE, PsycINFO

Inclusion: peer reviewed articles of medicinal cannabis exposure on cannabis use disorder outcomes (i.e., problematic cannabis use, CUD, CA or CD; DSM-IV, DSM-5, ICD-10, ICD-11)

## RESULTS

### Identification of studies via databases and registers

1207 studies identified, 14 included



### META-ANALYSIS

The pooled prevalence random effects models for the prevalence of CUDs showed:

- 29% (12-47%) as assessed by the DSM-5 for past 6–12-month prevalence ( $k = 7$ ).
- 24% (14-38%) as assessed DSM-IV criteria for past 6–12-month prevalence( $k = 3$ ).
- 17% (10-28%)assessed by DSM-5 in recent users (past 3 months)( $k = 2$ ).
- 25% (18-33%) for pooled estimates across prevalence periods (i.e., recent use and 6-12month) using the DSM-5 ( $k = 10$ ).

*Pooled effect size of CUDs in people who use medicinal cannabis*

DSM-5	DSM-IV
25% [18-33%]	24% [14-38%]

### NARRATIVE REVIEW

The risk of CUDs may be higher in people:

- who use medicinal cannabis frequently (daily or near daily)
- use greater quantities of medicinal cannabis
- use medicinal cannabis via inhalation
- are younger in age
- are male
- experiencing substance use disorders while using medicinal cannabis

## CONCLUSION

We estimate that people who use medicinal cannabis meet the criteria for cannabis use disorders at a higher prevalence (25%) than recreational use (22%).

As medicinal cannabis popularity grows, there is a need for ongoing research to monitor the prevalence of CUDs in people who use medicinal cannabis.

Given that this review is the first of its kind, further research should be aimed at monitoring the population-level prevalence of CUDs in people who use medicinal cannabis, particularly in the face of growing liberalisation and accessibility.