

**REPLY BY THE MINISTER OF
THE HEALTH AND SOCIAL SERVICES DEPARTMENT
TO A QUESTION PURSUANT TO RULE 6 OF THE
RULES OF PROCEDURE TO BE ASKED BY DEPUTY ELIS BEBB**

Question 1

Could you clarify if the department collects data on the estimated number of cannabis users per annum and if so, what is the current estimate.

Answer 1

The Health and Social Services Department does not collect data on the number of cannabis users per annum. Cannabis is not a prescribed drug and for this reason there is no prescribing information available to HSSD from which to report.

Question 2

How many people have been treated for psychosis attributed solely to the consumption of cannabis over the past five years.

Answer 2

Presentations of mental illness, especially psychosis are complex and multi-factorial. It is therefore not possible to objectively attribute a presentation of psychosis solely to one action whether that may be the consumption of cannabis, or any other factor or cause.

As with some other areas of medicine, the issue of drug misuse and mental illness remains a matter of some debate. Expert opinion remains divided and research findings are not entirely conclusive.

Therefore, the Health & Social Services Department does not currently record formal information about the (possible) factors contributing to a diagnosis of psychosis. This information is therefore not retained on record or available for reporting.

Question 3

How many people have been treated for psychosis attributed in part to the consumption of cannabis over the past five years.

Answer 3

For the same reason as a primary factor in a diagnosis of psychosis is not objectively identifiable for recording the same is true, if not even more so, in relation to a secondary (partial) contributing factor.

Therefore, the Health & Social Services Department does not currently record formal information about the (possible) factors contributing to a diagnosis of psychosis. This information is therefore not retained on record or available for reporting.

Question 4

How many people have been treated for psychosis attributed solely to the consumption of synthetic cannabis over the past five years.

Answer 4

A diagnosis of psychosis would again not be objectively identifiable to the consumption of cannabinoids as distinct from another contributory factor, behaviour or action, be that consumption of herbal cannabis or any other controlled substance.

This is further complicated by definitions of cannabis which as a plant has many strains containing different psychoactive chemicals; and the evolving nature of synthetic cannabinoids and other former “legal highs” (now termed Novel Psychoactive Substances, or Emerging Drugs of Concern).

Therefore, as previously explained, this specific data is not formally recorded or available for reporting by the Health and Social Services Department.

Question 5

How many people have been treated for psychosis attributed in part to the consumption of synthetic cannabis over the past five years.

Answer 5

For the same reasons as explained in the previous answers, this specific data is not formally recorded or available for reporting by the Health and Social Services Department.

Question 6

Are there any doctors on island who are experienced in prescribing cannabis as a medical treatment.

Answer 6

HSSD is not aware of any registered medical practitioners in the Bailiwick who are currently prescribing herbal cannabis for treatment routinely or are experienced in doing so. HSSD has never been approached by a clinician who wishes to include herbal cannabis in their routine clinical practice other than for a specific case. The only approaches we have received to date have been very clearly doctors who are acting upon the request of their patients in relation to individual licence applications.

Question 7

How many people have been approved for a license to use cannabis for medical reasons.

Answer 7

The Health and Social Services Department has not to date approved any applications for a licence to use cannabis (in either herbal or resin form) for medicinal purposes.

Question 8

Is the licensing of cannabis unique in its licensing when compared with other drug dispensing authorisation. If so, could the department provide a rationale for the unique nature of licensing cannabis

Answer 8

Technically, the requirements for cannabis to be authorised and licensed as a medicine for human use are the same as any other drug or medicine intended to be placed on the Guernsey/UK market. A marketing authorisation needs to be obtained from the MHRA or the European Medicines Agency before any cannabis-based product can be placed on the market in Guernsey.

However, as cannabis is also a controlled drug, the importation, exportation, production, supply and possession, of cannabis is a criminal offence, unless HSSD exempts or excepts it by amending the Misuse of Drugs (Bailiwick of Guernsey) Ordinance, 1997 (by Order), or unless HSSD issues a licence for it. Likewise the cultivation of a cannabis plant is a criminal offence unless licensed by HSSD.

The reason that cannabis is treated differently from the other controlled drugs which have been given exceptions under the Misuse of Drugs (Bailiwick of Guernsey) Ordinance, 1997, is that cannabis is classed as a Class B, schedule 1 drug which cannot be prescribed in routine practice by medical practitioners. They can only prescribe drugs in schedules 2, 3, 4 and 5.

Question 9

How many applications for cannabis have been refused over the past five years.

Answer 9

There have been fewer than 5 applications received by the Department. No applications have been approved to date as mentioned above.

Question 10

Could the department clarify if a private prescription for cannabis would be permitted.

Answer 10

As mentioned previously, cannabis is a controlled drug and the importation, production, supply and possession of it is a criminal offence, unless exempted by the Misuse of Drugs (Bailiwick of Guernsey) Ordinance, 1997, or by license issued by HSSD. Currently there are no exceptions for cannabis under that Ordinance and there is no license in force for it. Technically, a doctor might wish to prescribe it (subject to professional and ethical considerations), but there would be no point unless HSSD issues a license for its importation, supply and possession in that particular case.

Question 11

What is the department's view of patient choice in their treatment for opiates and equally for cannabis.

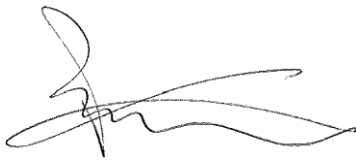
Answer 11

The Department views the treatment for addiction to opiates and other drugs as a medical condition, which requires the active management of a dedicated drug and alcohol team.

The choice of agents used to manage the care of those addicted to substances such as opiates, must be made in the context of the medical condition of the patient, the service configuration and the agreed treatment plan between the clinicians and the person suffering from the addiction supported by a reliable evidence base for such an approach.

It is not the patient's choice alone as to which treatment options are adopted. The patient may be presented with different treatment options, from which they could choose. The ultimate treatment adopted may involve the use of different materials, depending on the planned care pathway, and the supporting infra structure.

The use of cannabis-derived products in pain control does not form part of routine care for pain management. Patients, when placed on opiates for this purpose, do so in the context of an agreed care pathway which includes other agents such as non steroidal drugs, co-analgesics and other agents depending on the condition being treated. Patients might be offered different care pathways which involve different agents, when tailoring their care, but as a rule they are not just given a choice of which opiate to use.



Deputy Paul Luxon,
Minister
Health & Social Services Department

Date of Receipt of the Question: 16 April 2015

Date of Reply: 29 April 2015