

Cannabis-based medicinal Products Position Statement

As of November 1st 2018, an amendment to the Misuse of Drugs Regulations has allowed clinicians on the specialist register to prescribe cannabis-based products under certain restrictions. Only those medicines classified as cannabis-based medicinal products by NICE are considered to be within the scope of this position statement.

Prior to the change in regulations, Sativex[®] and nabilone were available at selected sites within NCL for use in their licensed indications. At the January 2019 NCL JFC meeting, the Committee approved the use of Epidyolex[®] for two types of severe childhood-onset intractable epilepsy; Epidyolex[®] is funded by NHS England when used in combination with clobazam and within the criteria set out in the NICE technology appraisals from centres commissioned for specialist adult or children epilepsy services, such as NHNN or GOSH.

The Committee agreed that any cannabis-based medicinal products within scope of the JFC but not on the NCL Joint Formulary would need to undergo the standard new medicine application process.

Groups / Individuals who have overseen the development of this guidance:	North Central London Joint Formulary Committee
Groups which were consulted and have given approval:	North Central London Joint Formulary Committee
File name:	Cannabis-based medicinal products – position statement (supersedes “cannabis and cannabis-related products – position statement).
Version number:	V3.1
Available on:	NCL Medicines Optimisation Network website
Disseminated to:	All Trusts and CCGs in NCL
Equality impact assessment:	No impact identified
NCL Joint Formulary Committee Approval date:	14/12/2020
Review date:	21/02/2023

Background

- As of November 1st 2018, an amendment to the Misuse of Drugs Regulations 2018 has led to the re-classification in controlled drug scheduling of some cannabis based products for human use. This allows them to be prescribed for medicinal purposes by a clinician on the specialist register where there is an unmet clinical need.¹
- On November 11th 2019, the National Institute for Health and Care Excellence (NICE) published a [guideline for cannabis-based medicinal products](#). The NCL guideline was subsequently updated, with the included recommendations, product classification and terminology brought in line with national recommendations by NICE.
- The scope of products considered for this position statement is now aligned with those defined as cannabis-based medicinal products by NICE. This includes:
 - cannabis-based products for medicinal use as set out by the UK Government in the 2018 Regulations
 - the licensed products delta-9-tetrahydrocannabinol combined with cannabidiol (Sativex) and nabilone
 - plant-derived cannabinoids such as pure cannabidiol (CBD)
 - synthetic compounds which are identical in structure to naturally occurring cannabinoids such as delta-9-tetrahydrocannabinol (THC), for example, dronabinol.
- Food supplements and illicit drugs are not medicines and will not be considered when forming recommendations of treatments.

NCL JFC Position on prescribing Cannabis-based medicinal products

- The NCL JFC has approved the use of three cannabis-based medicinal products.
 - Cannabidiol oral solution (Epidyolex®):
 - Epidyolex® with clobazam is approved for patients aged two years and above with a form of rare epilepsy (either Dravet syndrome or Lennox-Gastaut syndrome) within the recommended criteria in the technology appraisal by NICE and funded by NHS England from the National Hospital for Neurology and Neurosurgery (NHNN) and Great Ormond Street Hospital (GOSH).^{2,3} This includes the frequency of drop/convulsive seizure being checked every six months (with Epidyolex® stopped if the frequency of drop seizures has not fallen by at least 30% compared with the six months prior to treatment initiation) and that the company provides Epidyolex® according to the commercial agreement.
 - Epidyolex® was originally approved in NCL under a manufacturer led early access programme at NHNN and GOSH. The early access programmes are closed to new patients, and patients initiated on treatment should be continued on Epidyolex® within the remit of one of the NICE technology appraisals as above. Clinicians may choose to continue the patient on Epidyolex® who were initiated under an early access programme but does not fit within the scope of a NICE technology appraisal (i.e. not taking concurrent clobazam) via the same funding process.
 - Cannabidiol and delta-9-tetrahydrocannabinol oromucosal spray (Sativex®) is on formulary for the treatment of severe spasticity in multiple sclerosis restricted to a specialist spasticity clinic at University College London Hospitals. A four-week

trial of Sativex® is offered initially and only continued if the patient has had at least a 20% reduction in spasticity-related symptoms on a 0 to 10 patient-reported numeric rating scale. If successful, treatment can be transferred to general practice following the third month of treatment within the criteria outlined in the [NCL shared care guideline](#).

- Nabilone capsules is on formulary for the treatment of chemotherapy induced nausea and vomiting which persists with optimised conventional antiemetics at University College London Hospitals, Royal Free London, North Middlesex University Hospital and Whittington Hospital.
- At the time of writing, there is only one other licensed or unlicensed cannabis-based medicinal product available in the UK which is not on the NCL Joint Formulary (dronabinol, an FDA approved medicine under the brand name Marinol®).
- No cannabis-based medicinal products are on formulary in NCL for use in chronic pain.
- A list of products that are currently available for purchasing and prescribing within the NHS in NCL is summarised in [Appendix 1](#). NCL JFC will consider applications to use cannabis-based medicinal products for indications that are not currently on the Joint Formulary. This includes dronabinol and those other available products used in an off-label indication. This follows the usual process for any medicine to be added to the formulary for prescribing and requires a consultant to complete a new medicine application form, highlighting evidence to support the efficacy and safety rationale as well as how the product will fulfil an unmet clinical need within their speciality.
- **New products that become available that are within the scope of the NCL JFC in the future will be considered by the Committee via the new medicine application process for a cohort of patients.**
- The only exemption to this position statement is where the cannabis-based medicinal product is an investigational medicinal product within clinical trial regulations.

Frequently Asked Questions

1. What could cannabis-based medicinal products be used for?

Very few people in England are likely to require a prescription for cannabis-based medicinal products for medicinal purposes due to current availability, published evidence of clinical benefit and restrictions outlined by NHS England.⁴ Three products are currently approved in NCL for patients to treat specific disease states (see [Appendix 1](#)).

The Royal College of Physicians (RCP) outline that there is currently insufficient evidence to recommend cannabis-based medicinal products for chronic pain and limited evidence in treatment of palliative care pain.⁵ NICE has subsequently stated that nabilone, dronabinol, THC, CBD or a combination THC/CBD product should not be offered for chronic pain (although CBD may be used as part of a clinical trial).⁶

The British Paediatric Neurology Association (BPNA) state that the best evidence of efficacy and short-term safety in epilepsy is shown by pure cannabidiol. This is now licensed as Epidyolex® and approved by NICE technology appraisals for two rare forms of intractable epilepsy. The BPNA does not recommend other non-licensed cannabis-based products for human use irrespective of their adherence to good manufacturing practice or good distribution practice standards.⁷

See the document “cannabis-based medicinal products – Patient information” and resources under question 12 for further information.

2. What preparations of cannabis-based medicinal products are currently available?

Four products are currently available in the UK – three of which are on the NCL Joint Formulary at certain sites within NCL for specific indications. No other cannabis-based medicinal products are currently available in NCL. Please see [Appendix 1](#) for more information.

3. Can cannabis-based medicinal products be prescribed in North Central London?

As noted above, please see [Appendix 1](#) for products that can be prescribed, the indications they can be prescribed in, and at which site(s) they can be prescribed at.

No other cannabis-based medicinal products are currently available to prescribe or supply to patients in North Central London. The only exemption to this position statement is where the cannabis-based medicinal product is an investigational medicinal product used within an authorised clinical trials under clinical trial regulations.

4. Who are the North Central London Joint Formulary Committee?

North Central London Joint Formulary Committee (NCL JFC) manages a medicines formulary across NCL. This is a list of evidence-based, effective and safe medicines approved for use by NHS organisations within NCL in the acute, general and specialists settings.

The NCL JFC is a multidisciplinary medical and scientific committee. A core part of their work is to evaluate medicines prior to local availability to ensure they are safe, clinically effective and cost-effective.⁸

This approval is required for all licensed, off-label and unlicensed medicines used for a cohort of patients in NCL. The decision made by the NCL JFC will apply to all Trusts and Clinical Commissioning Groups (CCGs) in North Central London.

5. Why are prescriptions for other cannabis-based medicinal products not available?

The amendment to the Misuse of Drugs Regulations has given the capability to specialists to prescribe certain cannabis-based medicinal products. However, the ability to prescribe does not preclude the need for a robust assessment of the medicine for inclusion on to the NCL Joint Formulary.

The NCL JFC, in its role as a medical and scientific committee, has evaluated one product in January 2019 for inclusion to the joint formulary, adding to two products available prior to the change in regulations. NCL JFC will continue to evaluate products reactively following an application for the desired cannabis-based medicinal products that is within the remit of JFC consideration in order to ensure safe, appropriate, equitable, evidence-based and cost-effective practice in NCL.

6. Can requests for cannabis-based medicinal products for individual patients be submitted to the local Trust?

Each Trust has their own Drugs and Therapeutics Committee (DTC), which serves as the medicines governance authority with oversight over unlicensed and non-formulary applications of medicinal products, including those required on a named-patient basis.

Named patient approval for non-formulary medications or non-formulary indications requires assurance that there is sufficient evidence for the safety, efficacy and cost-effectiveness of the product intended for use. Currently only the products noted as on formulary in [Appendix 1](#) are available for pharmacy departments to procure. Individual named-patient requests will need to show evidence of exceptionality.

For products not listed in [Appendix 1](#) (namely unlicensed cannabis-based medicinal products), there is currently insufficient information describing their safe and effective use (including the appropriate therapeutic dose, frequency and duration of treatment), route of supply and associated costs. Until further information is available, DTCs will be unable to safely approve cannabis-based medicinal products not listed in [Appendix 1](#) on a named-patient basis.

7. What if a patient is admitted to hospital and is already receiving a non-formulary cannabis-based medicinal product from elsewhere?

Any patient admitted to hospital should be informed that continuation of their non-formulary cannabis-based medicinal product is at the discretion of their consultant, DTC Chair and Medical Director. Where a consensus is reached that continuation of therapy as an inpatient is deemed clinically appropriate and does not interfere with their inpatient management⁹, the patient will be required to have their cannabis-based medicinal product brought into hospital alongside any associated documentation that was obtained upon ordering. This will undergo a quality assurance process to ensure that the product is suitable for use whilst in hospital. Continued supply will be via the patient's regular route of procurement. In circumstances where the regular route of supply is not available and continuation of the drug is deemed clinically appropriate, the local medicines management team / DTC Secretariat should be contacted for further guidance. Where a product is not regarded as being of suitable quality, it will not be continued whilst the patient is admitted to hospital; however if treatment of the condition is clinically justified a referral to the appropriate specialist should be made to identify a suitable alternative.

8. Should patients contact their GP to prescribe cannabis-based medicinal products?

All initial prescriptions for a cannabis-based medicinal product must be prescribed by a doctor included in the register of specialist medical practitioners^a and have a special interest in the condition being treated (in the case of children and young people, the initiating prescriber should also be a tertiary paediatric specialist). Currently, all cannabis-based medicinal products are prescribed in hospital only (except for Sativex, which is initiated in hospital and can be transferred to general practice in accordance with the criteria set out in the [NCL shared care guideline for Sativex in the treatment of multiple sclerosis related spasticity](#)). Clinicians who wish to transfer the prescribing of other cannabis-based medicinal

^a Although technically this excludes nabilone, Sativex[®] and cannabis-based medicinal products not classed as controlled drugs as per NICE guidelines, NCL JFC does expect these medications to be Specialist initiation only.

products on the Joint Formulary to Primary care needs to complete a [Shared Care or Fact Sheet proposal form](#) to the NCL Shared Care Committee for consideration. Full details of the NCL Shared Care decision process can be found [here](#).

GPs can refer patients to a specialist clinic if the clinical condition demands expert management; patients should not expect to be referred solely for an NHS prescription of a cannabis-based medicinal product. The health community in North Central London ask that patients do not request GP referrals for cannabis-based medicinal products.

9. Can cannabis-based medicinal products be bought without a prescription?

Some cannabis-based medicinal products may be available to buy over the internet without a prescription, as well as other forms of cannabis. It is likely that some of these products will be illegal to possess or supply due to the chance of containing tetrahydrocannabinol (THC). There is also a good chance they will contain THC and may not be safe to use. It is therefore advisable not to buy cannabis-based medicinal products on the internet without a prescription.

Health food stores sell certain types of "pure CBD" products, however there is no guarantee these products will be of good quality as they are not made or distributed to pharmaceutical standards and are likely to contain very small amounts of CBD and possibly small amounts of THC. As such the medicinal effect they might have is uncertain.

10. Will this position statement affect cannabis-based medicinal products used in clinical trials?

This position statement will have no impact on the supply and prescribing of cannabis-based medicinal products that are investigational medicinal products used within an authorised clinical trials under clinical trial regulations.

11. When will this position statement be updated?

This position statement will be updated if one of the following occurs:

- NCL JFC completes a review of a new medicine application for a cannabis-based medicinal product (as per [Appendix 1](#)) to be added to the formulary for a new indication;
- Shared care guidance is created for a cannabis-based medicinal product in NCL;
- NICE update their guidance on cannabis-based medicinal products for medicinal use; or
- NICE update or produce new technology appraisals for cannabis-based medicinal products.

12. Where can I find further information about cannabis-based medicinal products?

- NICE Guideline on Cannabis-based medicinal products
<https://www.nice.org.uk/guidance/ng144/chapter/Recommendations>
- NICE technology appraisal: Cannabidiol with clobazam for treating seizures associated with Lennox–Gastaut syndrome
<https://www.nice.org.uk/guidance/ta615/chapter/1-Recommendations>

- Cannabidiol with clobazam for treating seizures associated with Dravet syndrome
<https://www.nice.org.uk/guidance/ta614/chapter/1-Recommendations>
- E-Learning for Healthcare Cannabis-based products for medicinal use programme
<https://www.e-lfh.org.uk/programmes/cannabis-based-products-for-medicinal-use/>
- NHS Patient Information Leaflet on Medical Cannabis
<https://www.nhs.uk/conditions/medical-cannabis/>
- NHS England Letter on cannabis-based medicinal products
<https://www.england.nhs.uk/wp-content/uploads/2018/10/letter-guidance-on-cannabis-based-products-for-medicinal-use..pdf>
<https://www.england.nhs.uk/wp-content/uploads/2018/10/letter-guidance-on-cannabis-based-products-for-medicinal-use..pdf>
- NHS England supplementary information on cannabis-based medicinal products
<https://www.england.nhs.uk/wp-content/uploads/2018/11/letter-additional-guidance-on-cannabis-based-products-for-medicinal-use.pdf>
- NHS England frequently asked questions
<https://www.england.nhs.uk/medicines/support-for-prescribers/cannabis-based-products-for-medicinal-use/cannabis-based-products-for-medicinal-use-frequently-asked-questions/>
- MHRA Guidance on supply, manufacture, importation and distribution of unlicensed cannabis-based medicinal products
https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/752796/Cannabis_Guidance_unlicensed_cbpms_-_Final_311018.pdf
- Royal College of Physicians (RCP) Recommendations on cannabis-based medicinal products for intractable chemotherapy induced nausea and vomiting and chronic pain
<https://www.rcplondon.ac.uk/projects/outputs/recommendations-cannabis-based-products-medicinal-use>
- British Paediatric Neurology Association (BPNA) Guidance on use of cannabis-based medicinal products in children and young people with epilepsy
https://bpna.org.uk/userfiles/BPNA_CBPM_Guidance_Oct2018.pdf
- NHSE England and NHS Improvement guidance to clinicians: The process for prescribing Cannabis-based products for medicinal use
<https://www.england.nhs.uk/wp-content/uploads/2019/12/guidance-prescribing-cannabis-based-products-medicinal-use.pdf>

References

1. Home Office. The Misuse of Drugs (Amendments) (Cannabis and Licence Fees) (England, Wales and Scotland) Regulations 2018.
http://www.legislation.gov.uk/uksi/2018/1055/pdfs/uksi_20181055_en.pdf.
2. National Institute for Health and Care Excellence. NICE TA: Cannabidiol with clobazam for treating seizures associated with Lennox–Gastaut syndrome. <https://www.nice.org.uk/guidance/ta615> (2019).
3. National Institute for Health and Care Excellence. NICE TA: Cannabidiol with clobazam for treating seizures associated with Dravet syndrome. <https://www.nice.org.uk/guidance/ta614> (2019).
4. Davies, S., Powis, S. & Ridge, K. Cannabis based products for medicinal use. *NHS England*
<https://www.england.nhs.uk/wp-content/uploads/2018/10/letter-guidance-on-cannabis-based-products-for-medicinal-use..pdf>.
5. Recommendations on cannabis-based products for medicinal use. *RCP London*
<https://www.rcplondon.ac.uk/projects/outputs/recommendations-cannabis-based-products-medicinal-use> (2018).
6. National Institute for Health and Care Excellence. NICE clinical guidance: Cannabis-based medicinal products. <https://www.nice.org.uk/guidance/ng144/chapter/Recommendations> (2019).
7. British Paediatric Neurology Association. Guidance on the use of cannabis-based products for medicinal use in children and young people with epilepsy.
https://bpna.org.uk/userfiles/BPNA_CBPM_Guidance_Oct2018.pdf.
8. North Central London Joint Formulary Committee. Terms of Reference. https://www.ncl-mon.nhs.uk/wp-content/uploads/2017/07/JFC_Terms-of-Reference.pdf (2018).
9. Hill, D. Cannabis-based medicinal products - potential drug interactions. *Specialist Pharmacy Services*
<https://www.sps.nhs.uk/articles/cannabis-based-medicinal-products-potential-drug-interactions/> (2018).

Appendix 1: Cannabis-based medicinal products- currently available for procurement in North Central London

The table below outlines products that are currently available to be procured via authorised pharmacies. These remain subject to prescribing and formulary restrictions, and should not be prescribed for any indications outside of formulary recommendations unless there has been local approval from the Drugs & Therapeutics Committee. Currently, all cannabis-based medicinal products are prescribed in hospital only.

Product	Constituent(s)	Licensing	CD status	NCL Approved Indications for Prescribing
Epidyolex®	CBD 100mg/mL	Unlicensed	Sch 2 [†]	Epidyolex® is on the NCL Joint Formulary for patients aged two years and above with Dravet Syndrome or Lennox-Gastaut Syndrome being treated at NHNN or GOSH. It must be used with clobazam and within the restrictions set out in the NICE technology appraisals. Those patients who do not fit the remit of the technology appraisals but was started under the manufacturer led early access programme can continue to receive treatment if it continues to be provided free of charge by the manufacturer.
Sativex®	2.7mg delta-9-THC*: 2.5mg CBD	Licensed	Sch 4	Sativex® is on the NCL Joint Formulary for severe spasticity in Multiple Sclerosis and is restricted for initiation at UCLH only, where it is initiated and monitored by a specialist in spasticity. This can be transferred to general practice after three month of treatment, under the criteria of the NCL shared care guideline .
Dronabinol	2.5/5/10mg synthetic delta-9-THC	Unlicensed	Sch 2	Dronabinol (under the brand name Marinol®) is used for the treatment of anorexia associated with weight loss in patients with AIDS, and to treat nausea and vomiting associated with cancer chemotherapy in patients who have failed to respond adequately to conventional antiemetic treatments. It is not on the NCL Joint Formulary.
Nabilone	1mg Nabilone	Licensed	Sch 2	Nabilone capsules are on the NCL Joint Formulary at UCLH, WH, NMUH and RFL. It is used for the treatment of nausea and vomiting associated with cancer chemotherapy in patients who have failed to respond adequately to conventional antiemetic treatments.

All products listed were available for procurement prior to the change in regulations.

*Sativex contains naturally occurring delta-9-THC

†Epidyolex is classed as a schedule 2 controlled drug in the UK from 1 October 2019 due to trace levels of THC found in the medication.