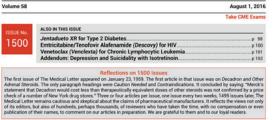
# The Medical Letter Inc.

# **Company Profile:**

The Medical Letter, Inc. is committed to providing objective, practical, and timely information on drugs and treatments of common diseases to help our readers make the best decisions for their patients-without the influence of the pharmaceutical industry.

Many of our readers know that pharmaceutical companies and their representatives often exaggerate the therapeutic effects and understate the adverse effects of their products, but busy practitioners have neither the time nor the resources to check the accuracy of the manufacturers' claims. Our publication is intended specifically to meet the needs of busy healthcare professionals who want unbiased, reliable, and timely drug information. Our editorial process is designed to ensure that the information we provide represents an unbiased consensus of medical experts.

### The Medical Letter on Drugs and Therapeutics



#### Cannabis and Cannabinoids

In the US, 25 states and the District of Columbia now remits one of the states and the beathed we contract in an (Cannabis sativa). If thas been used for centuries to treat various ailments, but non-standardization of dosage makes available data diffecuit to interpret. Cannabis contains >60 pharmacologically active cannabinoids.<sup>2</sup>

contains -60 pharmacologically active cannabinoids.<sup>1</sup> Two oral prescription cannabinoids are available in the US. Donabino (Marino), and generica) is a synthetic form of delta-9 tetrahydrocannabinol (THC), the main synchactive constituent of cannabis; it is classified by the DEA as a schedule III controlled substance (less potential for abuse c addection thanschedule I of Irdugs currently accepted medical use). A liquid formulation of dronabinal (Synchros) was recently approved by the FDA. Nabilene (Cesamet) is a synthetic analog of THC; it is a schedule II controlled substance (liph abuse potential currently accepted medical use). Both dronabinol and nabilone are approved for nonceria associated with veright loss in patients with ADS.

Nabiximols, a standardized cannabis extract that contains a mixture of THC and cannabidiol (CBD), another major cannabinoid found in cannabis, is not available in the US, but it is widely available in Europe and in Canada in an oral mucosal spray formulation (Sativex) for treatment of cancer pain and multiple sclerosis (MS).

CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING – Dronabinol and nabione have both been FDA-approved since 1985 for treatment of chemotherapy-induced nausea and vomiting that has not responded to other antiemetic treatments. They are effective for prevention and treatment of nausea and vomiting due to middly or moderately emotogenic daniciancer drugs. With severely emotogenic drugs such as cipilatin, other drugs such as palonosetron (Alox) and aprepitant (Emeral) appear to be more effective and better tolerated. No studies are available comparing cannabis to first-line drugs for treatment of chemotherapy-induced nausea and vomiting.<sup>34</sup>

and vomining.--INTRACTABLE CANCER PAIN – A randomized, double-blind, placebo-controlled, 5-week trial in 360 patients found that adjunctive use of low (1-4 spray/day) and medium (6-10 spray/day) doses of nabiximos cornucceals agray was significantly more effective than placebo in relieving intractable cancer pain and comparable to placebo in adverse effects. High doses were less effective and caused more adverse effects.<sup>3</sup> There are no acceptable studies on the effectiveness of cannabis for this indication.

MULTIPLE SCLEROSIS - Several studies have found that cannabinoids are effective in treating some symptoms associated with MS.<sup>6</sup> The American Academy of Neurology has recommended use of an oral canabis extract containing a mixture of THC and CBD (not approved by the FDA) or dronabinol for treatment of spasticity and pain in patients with MS,

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# **At-a-glance features:**

\* If a new prescription drug offers no advantage, if its effectiveness is limited, or if it is too toxic or too expensive to justify use.

\* If new drug information changes the status of previously reviewed drugs, we publish follow-up reports. If a new prescription drug offers genuine advantages over older drugs

### The Medical Letter is supported by its readers, and:

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# **PRODUCT FEATURES:**

## The Medical Letter on Drugs and Therapeutics

- 26 issues per year: online and with our mobile app.
- Evidence-based, peer-reviewed evaluations of new FDA-approved drugs
- Our signature tables and charts that make comparing drugs quick and easy
- Comparative reviews and recommendations of all preferred and alternative treatments for a given indication with attention to clinical efficacy, adverse effects, drug interactions, and cost.

# **Continuing Medical Education**

• Earn up to 52 CME credits per year. The Medical Letter is accredited by ACCME, AAFP, AAPA, and ACPE. Participants can earn ABIM MOC points upon successful completion of an activity.

# **Drug Interactions from The Medical Letter**

- Significance ratings all interactions are ranked by significance and need for intervention
- A detailed discussion of the evidence supporting the potential interaction and an explanation of the mechanism by which the interaction occurs
- Detailed recommendations about how best to avoid or manage potential interactions
- Information about related drugs whether or not other drugs in the same class, or drugs used for the same indication, would interact in a similar way
- References that support the evidence and recommendations are provided within each monograph
- Ability to search for interactions for a single drug and between multiple drugs in a patient's regimen, using brand or generic names

## Drugs of Choice - (Handbook or eBook)

• Reviews of first-choice and alternative drugs for some of the most common conditions seen every day in clinical practice. Includes adverse effects, dosing recommendations, and costs.

Today, The Medical Letter is available in four languages (English, French, Italian, and Japanese), and its readers include practicing physicians in every medical specialty, pharmacists, physician assistants, nurse practitioners, medical educators, residents and interns, and medical and pharmacy students from nearly 100 countries.

With over a quarter-million healthcare subscribers, as well as many of the leading academic and clinical institutions in the world, The Medical Letter is a trusted source for drug information.



Essential to your practice

# THE MEDICAL LETTER

is an indispensable resource for any medical institution because it provides concise, critical, and authoritative information about drugs and therapeutics

### THE MEDICAL LETTER

highlights essential drug characteristics and offers comparisons to other medications, helping you make the best therapeutic choices.