

Position statement: Avoid using medical marijuana to treat sleep apnea

April 16 2018



Medical cannabis and synthetic marijuana extracts should not be used for the treatment of obstructive sleep apnea, according to a position statement from the American Academy of Sleep Medicine (AASM). Credit: The American Academy of Sleep Medicine

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In November 2017 the Minnesota Department of Health [announced the decision to](#) add [obstructive sleep apnea](#) as a new qualifying condition for the state's medical cannabis program. However, the AASM has concluded that sleep apnea should be excluded from the list of [chronic medical conditions](#) for state medical cannabis programs due to unreliable delivery methods and insufficient evidence of [treatment](#) effectiveness, tolerability and safety.

"Until we have further evidence on the efficacy of medical cannabis for the treatment of sleep apnea, and until its safety profile is established, patients should discuss proven treatment options with a licensed medical provider at an accredited sleep facility," said lead author Dr. Kannan Ramar, professor of medicine in the division of pulmonary and critical care medicine at Mayo Clinic in Rochester, Minnesota.

The position statement is published in the April 15 issue of the *Journal of Clinical Sleep Medicine*.

Nearly 30 million adults in the U.S. have obstructive sleep apnea, a chronic disease that involves the repeated collapse of the upper airway during sleep. Common warning signs include snoring and excessive daytime sleepiness. After early animal studies demonstrated that the synthetic cannabis extract dronabinol improved respiratory stability, recent studies in humans have explored the potential use of dronabinol as an alternative treatment for sleep apnea.

However, dronabinol has not been approved by the U.S. Food and Drug Administration for the treatment of sleep apnea, and its long-term tolerability and safety are still unknown. Furthermore, there have been

no studies of the safety and efficacy of other delivery methods such as vaping or liquid formulation. Treatment with the use of medical cannabis also has shown adverse effects such as daytime sleepiness, which may lead to unintended consequences such as motor vehicle accidents.

"Until there is sufficient scientific evidence of [safety](#) and efficacy, neither marijuana nor synthetic [medical cannabis](#) should be used for the treatment of sleep apnea," said AASM President Dr. Ilene Rosen. "Effective and safe treatments for sleep apnea are available from licensed medical providers at accredited sleep facilities."

There are more than 2,500 [AASM-accredited sleep facilities](#) across the U.S. Treatment options for [sleep apnea](#) include [CPAP therapy](#), which uses mild levels of air pressure, provided through a mask, to keep the throat open while you sleep.

More information: Kannan Ramar et al, Medical Cannabis and the Treatment of Obstructive Sleep Apnea: An American Academy of Sleep Medicine Position Statement, *Journal of Clinical Sleep Medicine* (2018). [DOI: 10.5664/jcsm.7070](https://doi.org/10.5664/jcsm.7070)

Provided by American Academy of Sleep Medicine

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