



First Nations Health Authority
Health through wellness

Cannabis use disorder and withdrawal

What are the symptoms?

There is a common misconception that people who use cannabis cannot become dependent on it. However, even when authorized to use cannabis by a medical provider, people can develop cannabis use disorder, especially if they use cannabis daily and at high amounts. [1]

SYMPTOMS OF CANNABIS USE DISORDER

In the DSM-5, cannabis use disorder is a diagnosis based on impaired control, social impairment, risky use and pharmacological criteria. [2] Symptoms can include:

- Disruptions in functioning due to cannabis use
- The development of tolerance
- Cravings for cannabis
- Development of withdrawal symptoms [2]

SYMPTOMS OF CANNABIS WITHDRAWAL

When cannabis is consumed for prolonged periods or in high doses, the brain develops a tolerance for THC (delta-9-tetrahydrocannabinol) and begins to get accustomed to this new normal. When use is stopped, unpleasant withdrawal symptoms may appear as the brain adjusts again. [1,3]

Withdrawal severity and duration varies widely between individuals and depends on a variety of factors. [4] Cannabis withdrawal is defined in the DSM-5 as having three or more of the following symptoms that develop within one week of abruptly reducing or stopping prolonged cannabis use [5]:

MENTAL SYMPTOMS:

- Depressed mood
- Anxiety

EMOTIONAL SYMPTOMS:

- Irritability, anger or aggression
- Nervousness

SPIRITUAL SYMPTOMS:

- Not seeking spiritual support
- Not seeking our traditional land-based healing methods

PHYSICAL SYMPTOMS:

- Difficulty sleeping (e.g., insomnia or vivid dreaming)
- Weight loss or decreased appetite
- Restlessness
- Abdominal pain
- Shakiness or tremors
- Sweating, fever or chills
- Headaches

Approximately one-third of users who consume cannabis once or twice monthly (regular users) and between 50 per cent and 95 per cent of users who consume daily (heavy users) experience withdrawal symptoms. [3, 5]

Although withdrawing from cannabis is not considered life threatening, it is clinically significant because:

- Unpleasant symptoms can interfere with daily functioning
- Negative reinforcement can lead to relapse and a return to using cannabis. [5]

It is recommended that someone who wants to stop using cannabis should do so under the supervision of a health care provider.

WITHDRAWAL TIMELINE

Days 1-2: Symptoms associated with cannabis withdrawal appear within the first few days after stopping use.

Days 2-6: This is typically the peak of withdrawal. Cravings can be strong and this is when relapse is most likely.

Days 7-14: Most symptoms resolve within one to two weeks. Depressive symptoms may appear as the brain chemistry changes and adapts to functioning without THC.

Days 15+: Most if not all symptoms disappear by week three for most users. However, those with severe psychological addictions have reported feeling depressed and anxious for several months after stopping cannabis use.

Content adapted from [1] and [6].

SUPPORTING CLIENTS AS THEY STOP CANNABIS USE

There are currently no approved medications for treating cannabis use disorder or withdrawal symptoms. [5] However, current literature from placebo-controlled trials suggests that mirtazapine and quetiapine reduce some symptoms of cannabis withdrawal. [5]

Depending on the severity of the withdrawal symptoms, the following behavioural and coping strategies may be of use:

EDUCATION

- Talk with your client about cannabis use disorder symptoms and what happens to their body while they withdraw

EMOTIONAL

- Offer supportive psychosocial interventions
- Ask the client to reflect on how they have navigated difficult times in the past and encourage them to use these same strategies
- Refer the client to community mental health supports, such as traditional healers, counsellors, etc.

SPIRITUAL

- Explore non-pharmacological symptom management
- Ask the client if they have someone they can talk to for spiritual support if this is part of their wellness journey
- Encourage the client to connect with local spiritual healing supports

PHYSICAL

- Treat comorbid conditions
- Explore outpatient treatment options, such as group therapy or individual therapy

REFERENCES:

- [1] Healthline. (2019). *What to expect from marijuana withdrawal*. <https://www.healthline.com/health/marijuana-withdrawal>
- [2] Learn About Marijuana. (2017). *Cannabis Use Disorder*. <https://www.learnaboutmarijuanawa.org/topics/addiction-to-cannabis/cud/>
- [3] Madras, B. K. (2015). Update of cannabis and its medical use. In W. H. Organization (Ed.). https://www.who.int/medicines/access/controlled-substances/6_2_cannabis_update.pdf
- [4] Bonnet, U., & Preuss, U. W. (2017). The cannabis withdrawal syndrome: current insights. *Substance Abuse and Rehabilitation*, 8, 9-37. <https://doi.org/10.2147/SAR.S109576>
- [5] Brezig, C. A., & Levin, F. R. (2018). The current state of pharmacological treatments for cannabis use disorder and withdrawal. *Neuropsychopharmacology: Official Publication of the American College of Neuropsychopharmacology*, 43(1), 173-194. <https://doi.org/10.1038/npp.2017.212>
- [6] Health Canada. (2018). *Information for health care professionals: Cannabis and the cannabinoids*. <https://www.canada.ca/content/dam/hc-sc/documents/services/drugs-medication/cannabis/information-medical-practitioners/information-health-care-professionals-cannabis-cannabinoids-eng.pdf>

Every attempt has been made to review and provide best practice research, evidence and information on the use of cannabis. Each fact sheet has gone through a thorough peer review. References and sources are numbered and listed both inline and at the bottom of every fact sheet.