

# MANAGEMENT OF PRESCRIPTION CANNABIDIOL ADVERSE EFFECTS AND DRUG-DRUG INTERACTIONS

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## BACKGROUND

- Prescription cannabidiol (CBD) is approved for patients ≥1 years old with Dravet, Lennox-Gastaut, or Tuberous Sclerosis Syndromes as adjunct therapy with other anti-epileptic drugs.<sup>1</sup>
- More data describing longitudinal real-world use and management of prescription CBD is needed to understand post-approval outcomes.
- Specialty pharmacists evaluate the safety and appropriateness of prescription CBD therapy prior to initiation and throughout treatment and intervene to optimize therapy when needed.

## OBJECTIVE

To describe the drug-drug interactions (DDIs) and adverse drug events (ADEs) experienced over the first year of prescription CBD use and their management in a real-world setting.

## METHODS

- DESIGN** Single-center, retrospective cohort study
- INCLUSION** Patients prescribed CBD through the center's neurology clinic from January 2019 through April 2020
- EXCLUSION** Clinical trial participation or prescription CBD access or fulfillment process not completed by center's integrated specialty pharmacy
- OUTCOMES**
- Patient characteristics and medication use patterns
  - Adverse effects and DDIs related to prescription CBD
  - Management of adverse effects and DDIs

## RESULTS

**TABLE 1. PATIENT CHARACTERISTICS AND MEDICATION USE**

	Pediatric (N=92) % (n)	Adult (N=44) % (n)
<b>Age</b> , years [median, (IQR)]	10 (5 – 14)	28 (21 – 44)
<b>Gender</b> , female	47 (43)	57 (25)
<b>Race</b> , white	84 (77)	86 (38)
<b>Height</b> , cm [median, (IQR)]	130 (102 – 147)	164 (153 – 173)
<b>Weight</b> , kg [median, (IQR)]	29 (17 – 38)	62 (49 –76)
<b>Diagnosis</b>		
Lennox-Gastaut Syndrome	89 (82)	80 (35)
Dravet Syndrome	4 (4)	5 (2)
Tuberous Sclerosis	1 (1)	2 (1)
Other	5 (5)	14 (6)
<b>Route of administration</b>		
By mouth	78 (72)	93 (41)
Other*	22 (20)	7 (3)

IQR = Interquartile range; \*Other: G-tube, J-tube, combination of by mouth and g-tube administration

## RESULTS

**TABLE 2. LIVER FUNCTION TESTS**

Patients in the adjacent table had both a baseline and follow-up lab without a high value at baseline. Values represent the highest value recorded within the follow-up period.

	N=76 % (n)
<b>AST Result</b>	
High	25 (19)
In range	71 (54)
Low	4 (3)

	N=72 % (n)
<b>ALT Result</b>	
High	20 (14)
In range	80 (57)
Low	0 (0)

AST = aspartate aminotransferase      ALT = alanine aminotransferase

Of the patients meeting the criteria above, 25% and 20% experienced an elevated AST or ALT, respectively, at least once during the study.

**TABLE 3. DRUG INTERACTIONS (n=65)**

Type	% (n)
Pharmacokinetic	89 (58)
Pharmacodynamic	11 (7)

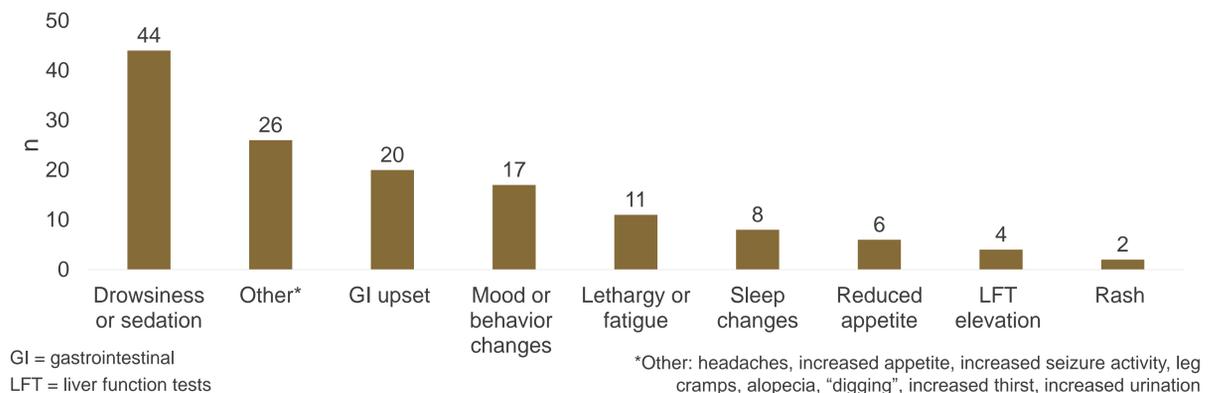
  

Interacting Drug	% (n)
Clobazam	89 (58)
Valproic acid	5 (3)
Phenobarbital	3 (2)
Other*	3 (2)

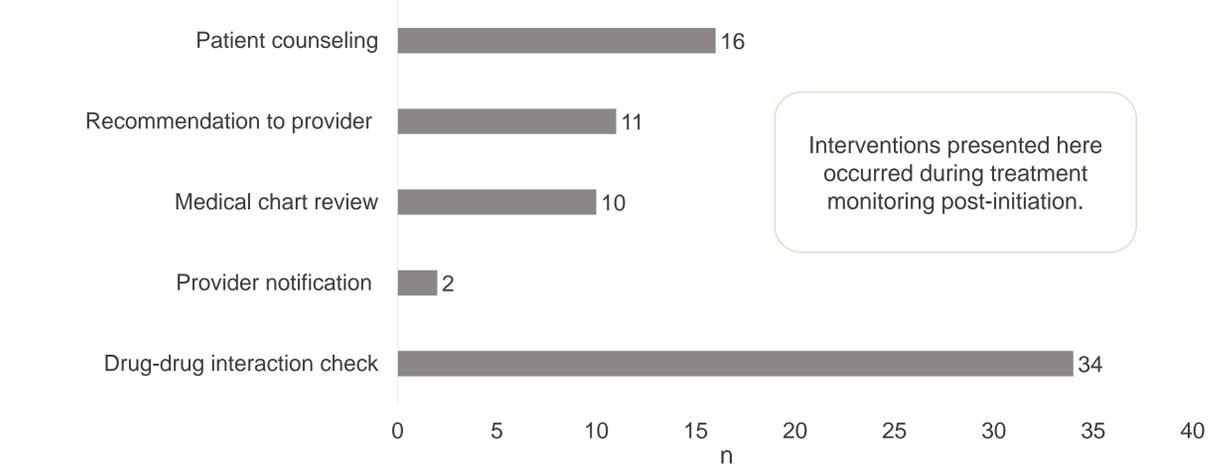
\*Other: clorazepate and a combination of clonazepam, olanzapine, and zonisamide

Pharmacokinetic interactions may cause changes in absorption, distribution, metabolism, or elimination. Pharmacodynamic interactions may cause cumulative adverse effects.

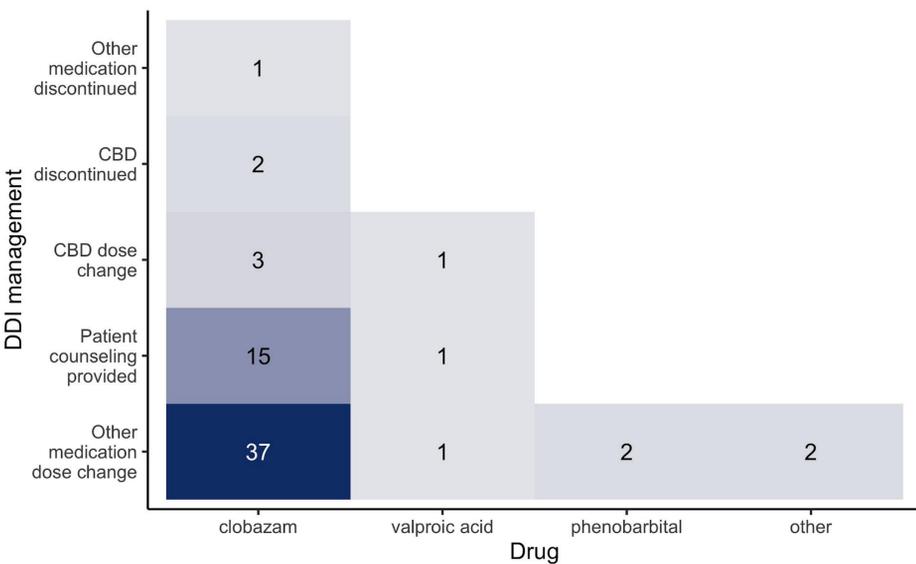
**FIGURE 1. ADVERSE DRUG EVENTS REPORTED (n=138)**



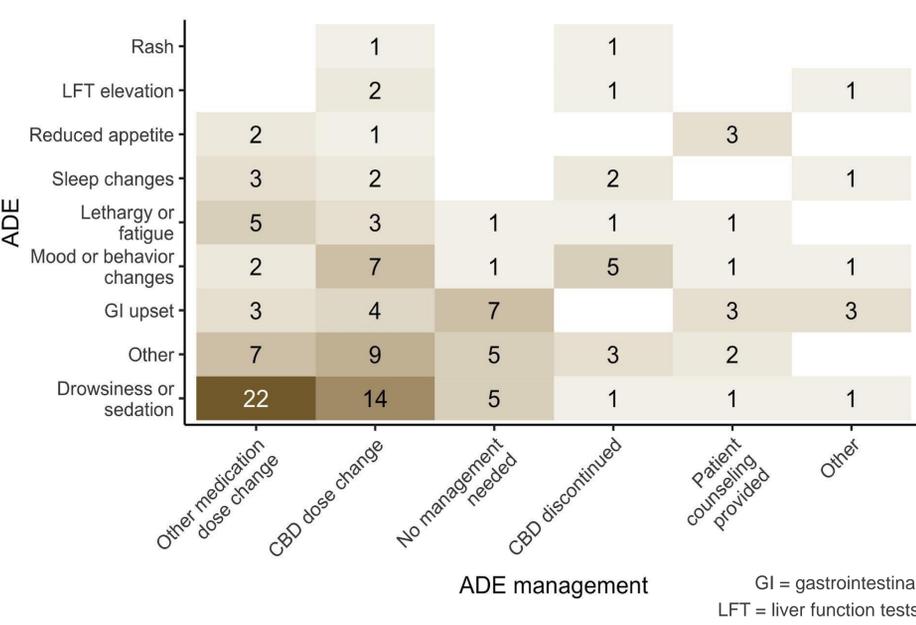
**FIGURE 2. SPECIALTY PHARMACIST INTERVENTIONS POST INITIATION (n=73)**



**FIGURE 3. DRUG-DRUG INTERACTION MANAGEMENT (n=65)**



**FIGURE 4. ADVERSE DRUG EVENT MANAGEMENT (n=138)**



## CONCLUSIONS

- In the first year of prescription CBD therapy, the most common DDI was with clobazam, which often required changing the clobazam dose.
- Drowsiness and sedation were common in the first year of therapy, which were commonly addressed by changing the dose of prescription CBD or interacting medications.
- Pharmacists play an important role in prescription CBD management by mitigating AEDs and DDIs to ensure patients can safely continue therapy.

References: 1. Epidiolex (cannabidiol) oral solution [package insert]. Carlsbad, CA: Greenwich Biosciences, Inc.; April 2020. Authors have the following to disclose concerning possible financial or personal relationships with any commercial entities that may have a direct or indirect interest in the subject matter of this presentation: Nisha B. Shah receives research grant support from Pfizer and AstraZeneca.