Cannabis and Cannabis-Derived Products

Cannabis is a plant that contains more than 80 biologically active chemical compounds. The best known compounds include cannabidiol (CBD) and delta-9-tetrahydrocannabinol (THC). Although cannabis and cannabis-derived products are becoming increasingly available in the United States, there is very little scientific evidence regarding their safety and effectiveness in people living with Alzheimer’s or other dementia for either the cognitive or behavioral symptoms of the disease. More research is needed.

Cannabis and cannabis-derived products are not approved or currently regulated by the U.S. Food and Drug Administration (FDA) for the treatment or management of Alzheimer's or other dementia. The Alzheimer’s Association welcomes action by the FDA in sending warning letters to manufacturers of cannabis or cannabis-derived products that make unsubstantiated claims about treating or preventing Alzheimer’s and other serious medical conditions.

To date, the FDA has not approved cannabis for the treatment of any disease or condition. The FDA has, however, approved one cannabis-derived and three cannabis-related drug products. In 2018, the FDA approved Epidiolex (cannabidiol or CBD) oral solution for the treatment of seizures associated with two rare, severe forms of epilepsy. The FDA has also approved the synthetic cannabinoids Marionol (dronabinol) and Cesamet (nabilone) to treat nausea and vomiting associated with cancer chemotherapy in people who have already taken other medicines to treat these symptoms without good results. Syndros (dronabinol oral solution) has been approved for the treatment of anorexia associated with weight loss in people with AIDS. These approved products are only available with a prescription from a licensed healthcare provider.

Some manufacturers of cannabis and cannabis-derived products claim their products benefit people with neurodegenerative disorders, including Alzheimer’s disease and other causes of dementia. This is misleading because:

- Cannabis and its components have not yet been subjected to large-scale, controlled clinical testing for these conditions. Therefore, conclusions related to the safety and effectiveness of cannabis and cannabis-derived products for Alzheimer's or other dementia remain speculative until randomized, controlled clinical trials are carried out.
- Although some of the chemical components of cannabis have been studied in relationship to Alzheimer’s and dementia, most of this research has been conducted in animal models and cell cultures, not in people. Research findings to date have been inconclusive and contradictory.
Use of cannabis or cannabis-derived products may impact participation in Alzheimer's and dementia research. For example, individuals who acknowledge use of cannabis on a regular basis may not be able to enroll in some clinical trials.

A few small clinical trials have been completed, or are ongoing, that examine cannabis or cannabis-derived products in Alzheimer’s and other dementia. These trials have focused on the potential safety and effectiveness of cannabis or cannabis-derived products for the non-cognitive symptoms of dementia, such as agitation. The researchers have not suggested that cannabis or cannabis-derived products might prevent, halt, or reverse the progress of neurodegenerative diseases such as Alzheimer’s. Results to date are inconclusive, especially considering important side effects, such as sedation.

The Alzheimer’s Association supports and encourages all legitimate avenues of research – from basic research through clinical trials. This includes investigating the chemical components of cannabis, cannabis-derived products, and other plants. The Alzheimer’s Association continues to monitor advances in Alzheimer’s and dementia science, including advances related to cannabis.

It’s important that individuals with Alzheimer’s or other dementia, and their caregivers, have conversations with their physicians about all medications, vitamins, supplements and other substances they are taking. This enables the doctor to consider how these compounds may interact with one’s medications, and evaluate their potential to cause any unintended side effects.

###