

Dr. Jose Lança - Special Series Part One, Impairment and Intoxication: Managing the Intoxicated Patient

Dr John O'Keefe: The federal government has recently introduced legislation about cannabis and also the government takes a great interest in managing the opioid crisis. These two issues, opioids and cannabis, are generating quite a lot of questions from dentists and I'm caught up today with Dr Josie Lança who's a medical doctor who teaches pharmacology to both medical students and dental students at the University of Toronto to ask him one of those questions. Jose, I'd like to ask you a question that's probably on the minds of a lot of dentists. What do I do if a patient shows up intoxicated by cannabis in my clinic?

Dr Jose Lança: Very important question once again, John. I have been asked that question on several occasions in the recent past and I try to be very pragmatic about it and I asked the dentist, what would you do if a patient shows up at your clinic intoxicated with a legal drug such as alcohol? Would you treat a drunk patient? Very clearly, they give me the answer, no way! It's the same thing for cannabis. So, while they're intoxicated, you shouldn't treat them.

Dr John O'Keefe: Because I imagine they can't give legal consent, if you like, in a circumstance where they're intoxicated by whatever substance.

Dr Jose Lança: Absolutely, that is the key point. There is no valid consent for individual that is in influence of any drug, legal or illegal, with alcohol or cannabis and even in terms of use of medical cannabis with prescription, even as far as driving infringements go, the law is very clear. The boundaries and the limits are exactly the same. So, the reason why the compound is ingested is irrelevant in terms of excusing the individual from legal situations. So, there is no consent. And what about may ask, what about benzodiazepines? What about illegal drugs? Well, obviously if somebody shows up at somebody's dental practice and they are intoxicated because they have used cocaine, amphetamine, LSD or alcohol or cannabis, you know what the dentist will do. Will not, should not, should not treat a patient. The patient is not legally capable of giving consent and that visit should be rescheduled for another point in time when the patient can legally provide valid consent.

Dr John O'Keefe: Let's flip the coin. I consume cannabis, as a dentist. What do I have to do to make sure that I don't turn up intoxicated to my clinic?

Dr Jose Lança: Okay, that's a very important point and I'm sure that some of our colleagues may be asking that question. So, the answer is, like alcohol or any other substance, you are bound by law not to practice your profession, your health care profession, if you are under the influence of any of those substances, be it opioids, alcohol, cannabis, etc. So, specifically to answer this question, the issue would be how long should you wait after you/somebody after you have smoked

the joint. And the issue again is very easy to address in terms of question, not that much in terms of answer because again, in terms of pharmacology and therapeutics, it depends on the dose and the dose of THC in a joint nowadays is many times higher than the concentration of THC in cannabis in the 60s or 70s. So therefore, the body, it will take longer to the body for the body to metabolize and eliminate the drug.

Dr Jose Lança: The metabolism of THC is one of those that is fortunately uncommon and I'll say fortunately uncommon because when we refer to that concept of half-lives, this is what we call a drug with a biphasic metabolism, so it means the drug is going to be metabolized at the second rate during the beginning and at the different rate, at the later stage. In reality and specifically THC is going to be the first half-life is going to occur within about the first one or two or up to four hours. So basically, the concentration of THC in the blood is going to be the decreasing quite significantly for at least half of what it was within a couple of hours after ingestion or after exposure, smoking usually, cannabis. After that, the half-life of cannabis is much longer and the concentration of THC at lower levels will be present in the blood for at least 24 to 36 hours. But those are lower levels. So what is the message for the dentist? Is that if somebody smokes a joint, you should do that at least several hours prior to your practice. Not smoke a joint at lunch time in then go to the office and see patients in the afternoon.

Dr John O'Keefe: The night before, sort of thing.

Dr Jose Lança: Exactly.

Dr John O'Keefe: Just one last little thing because you were making me feel young when you're talking about the sixties and seventies and now I'm a different age. Does the age of the dentist make a difference in term, like, does the age of the of patient, of he practitioner, make any difference in terms of that half-life and, you know.

Dr Jose Lança: So, in general, what we know is that older individuals have a lower rate of liver metabolism and also have a much lower rate of kidney excretion. So we in general, and without necessarily going into details, I would say that somebody that is in their 60's or 70's has a rate of liver metabolism that is approximately half of a young of what a young adult has. So if one is to compare the way or the rate at which they got rid of THC, the active product of cannabis, when they smoked the joint when they were 20 years old, you can expect that very same person with the age of 60 or 65, it will take him or her at least twice as long to eliminate the same amount of THC that they were able to eliminate in half the time when they were young adults. In addition to that, as we just discussed, because the levels of THC are much higher nowadays in cannabis, then they were a number of years ago, that further compounds the seriousness of the issue,

Dr John O'Keefe: So, what you're saying is old fellows like me, to keep life uncomplicated and the only problems from joints should be from our arthritis. Right?

Dr Jose Lança: Exactly. Exactly. And try to do that not closer to the time of practice than the evening prior to going into the practice, next day at some point, preferably later in the morning.

Dr John O'Keefe: Dr Jose Lança, thank you very much for your important insights in these critical topics.

Dr Jose Lança: Thank you so much, Dr. O'Keefe. It is a great pleasure to discuss these topics. They are extremely relevant for society in general nowadays and for health care professionals, regardless of the specialty, in particular. Thank you for the opportunity.