

MedCanHub: a platform developed by Cellen aimed at reducing barriers of access to unlicensed cannabis-based medicinal products during the COVID-19 pandemic

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Table 1. Quantified interest of prescribers in the different aspect of support and education regarding unlicensed cannabis-based medical products

Topic/segment	New prescribers	Experienced prescribers
Setup: registration to CDAO, guidelines creation, interaction with CQC, compliance audit.	5	2
Education: training on endocannabinoid system, CBMPs legal status in the UK, existing products.	5	2
Product: labelling, absorption method, terpenes profile, content, price, delivery and personalisation.	4	4
Prescribing support: MDT, titration, dosage limit, patient eligibility, reminders.	5	3
Admin: researching patient information, writing and mailing prescriptions, shared care management.	3	4
Treatment tracking: patient scoring and scientifically validated questionnaires.	3	5

Introduction

Unlicensed cannabis-based medicinal products (UCBPMs) were reclassified from Schedule 1 to Schedule 2 in 2018 in the UK, allowing doctors on the Specialist Register of the General Medical Council to legally issue prescriptions for UCBPMs.^{1,2} However, there has been evidence showing that patients face difficulties in accessing UCBPMs, with the NHS only prescribing 18 out of a total of 259 UCBPMs prescriptions in the UK in 2019³ despite a 2019 YouGov poll reporting about 1.4 million patients self-medicating with cannabis.⁴ The ongoing COVID-19 pandemic has exacerbated this problem, with border crossing and import supply chains facing disruptions. Reports investigating the barriers to accessing UCBPMs on the NHS list the lack of knowledge and education of cannabis use and its benefits as one of the main problems.⁵ As such, despite 92.8% of specialists surveyed reported having asked by patients to prescribe medical cannabis, most did not have the confidence to prescribe it.^{6,7,8}

Cellen Therapeutics, an independent, UK-based UCBPMs research organisation aiming to make UK UCBPMs prescriptions more transparent and accessible, decided to develop the MedCanHub platform, to increase the proficiency and confidence of doctors to prescribe.

Methods

Qualitative data were collected from interviews conducted with 14 prescribers. They shared problems encountered with current UCBPMs prescription and suggested areas of improvement. The interviews focused on four main themes: pre-consultation, during consultation, post-consultation, and additional resources. A composite score was applied to grade the different themes according to their relative importance to prescribers, from 5=very important to 1=not important at all. The result guided the development of the MedCanHub.

Results

The results of the interviews are shown in Table 1.

Prior to consultation, the MedCanHub supports prescribers by describing the process to acquire a controlled drug private prescriber number and with a checklist of contraindications.

For consultation support, we developed a literature review of validated dosage of THC and CBD, a checklist of information to

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deliver to patients, a list of UCBPMs oils available in the UK, a treatment planner creation tool, and a sample prescription.

Post-consultation support includes tools to generate CQC compliant letters, sending a prescription and how to report drug incidents to the MHRA.

Lastly, links to online training, regulations and guidelines are included.

Discussion

The MedCanHub software was developed to support consultants during COVID-19 in the process of UCBPMs prescriptions, from pre-consultation to post-consultation. 100% of the surveyed specialists would recommend the platform to colleagues who are looking to support their patients with UCBPMs prescriptions. As a result, we believe that by providing consultants with sufficient information, they can better support patients during the pandemic. ■

Conflicts of interest

This paper was authored by medical undergraduate students and consultant specialists with information regarding software provided by the team at Cellen Life Sciences.

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