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Cannabis as a psychotropic medication

I considered Arseneault *et al's* (2004) search for evidence of the association between cannabis and psychosis as quite skewed. They did not explore the evidence regarding positive, therapeutic or beneficial psychoactive effects of cannabis in mental health in the context of appropriate, rational and clinical usage.

It is now known that the major psychoactive constituent of cannabis and endogenous cannabinoid ligands signal

through G-protein-coupled cannabinoid receptors localised to regions of the brain associated with important neurological processes (Iversen, 2003). Signalling, mostly inhibitory, suggests a role for cannabinoids as therapeutic agents in central nervous system disease where inhibition of neurotransmitter release would be beneficial. Evidence suggests that cannabinoids inhibit the neurotransmitter glutamate, counteract oxidative damage to dopaminergic neurons and may be potent neuroprotective agents (Croxford, 2003). These findings open the door to exploration of the physiological role of the anandamide system, and its involvement with mood, memory and cognition, perception, movement, coordination, sleep, thermoregulation, appetite, and immune response. Cannabis users have reported effectiveness of cannabis in relieving aches and pains, fatigue and tiredness, numbing the symptoms of opiate withdrawal, improving sleep, reducing anxiety, and alleviating the vomiting, anorexia, and depression associated with AIDS-related disorders (Robson, 1998). The

anxiolytic, hypnotic, appetite-stimulating and antidepressant properties are a compelling reason for research into the use of cannabinoids in psychiatric therapeutics; controlled clinical trials are needed. The role of cannabinoids in modern therapeutics remains uncertain, but there is evidence that it would be irrational not to explore it (Robson, 1998) and, knowing its potent neuroprotective function, its potential role in psychiatric practice should not be discarded lightly.

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One hundred years ago

Medico-Psychological Association of Great Britain and Ireland, Northern and Midland Division

MEDICO-PSYCHOLOGICAL ASSOCIATION OF GREAT BRITAIN AND IRELAND, NORTHERN AND MIDLAND DIVISION.—The spring meeting of this society was held on April 7th, at Scalebor Park, Burley-in Wharfedale, the new asylum erected by the West Riding County Council exclusively for the reception of private patients.—Dr. J. R. Gilmour, the medical superintendent, who was in the chair, read a paper on the Value

of Saline Injections in Certain Acute Cases of Mental Disease. His method was first to empty the rectum by an ordinary enema and then to inject 15 ounces of a 0.75 per cent. solution of common salt three or four times daily. Improvement in many cases followed, the mental symptoms quietening and the pulse-rate falling. The injection was rarely returned and no bad effects had been observed. The bladder had to be watched. The treatment was most useful in severe delirious cases where the strength was much reduced.—Dr. Eddison expressed the opinion that the improvement

was similar to that occurring in the febrile cases in which restlessness and excitement abated when plenty of fluid was given. In such cases the nervous system shared largely in the benefit produced by the much needed water.

REFERENCE

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Researched by Henry Rollin, Emeritus Consultant Psychiatrist, Horton Hospital, Epsom, Surrey