



Psychotic Disorder and Cannabis Use: Canadian Hospitalization Trends, 2006–2015*

Key Messages

- Between 2006–2015, the rate of hospitalization for mental and behavioural disorders related to cannabis use increased 2.5 times.
- Two-thirds of people hospitalized were male and approximately half were aged 15–24.
- Psychotic disorder was the most common mental or behavioural condition related to cannabis use among hospitalizations.
- Hospitalizations for psychotic disorder related to cannabis use accounted for one-third of mental or behavioural disorders between 2006–2015, increasing over 25% during this time.
- The increasing rate of cannabis-related hospitalizations, particularly those associated with psychotic disorder, may be the result of increased availability of high-potency cannabis products or synthetic cannabinoids during this period.

Why Study Hospitalizations?

In 2017, 14.8% of Canadians 15 and older reporting using cannabis in the past year (Statistics Canada, 2019). Males reported using it more than females (18.7% vs 11.1%) and use was most common among those aged 15–24 (26.9%). The purpose of this study was to better understand hospitalizations related to cannabis use between 2006–2015. The findings provide a snapshot of hospitalization trends before legalization of non-medical cannabis in Canada and will help provide a baseline for evaluating the impact of cannabis policy changes on healthcare use. They can inform prevention, public education and harm reduction strategies.

Key Findings

Between 2006–2015, hospitalizations for mental and behavioural disorders related to cannabis use increased two and a half times. Psychotic disorder was the most common clinical condition among those treated for cannabis use, accounting for a third of these hospitalizations. The number of hospitalizations for psychotic disorder related to cannabis use tripled between 2006–2015. Across the years of the study, young people aged 15–24 accounted for half of all hospitalizations and males accounted for two-thirds of all hospitalizations. These findings demonstrate the need for continued monitoring and surveillance efforts to inform policy, education, harm reduction and treatment.

* This report is a summary of Maloney-Hall, B., Wallingford, S., Konefal, S., & Young, M. (2020). Original quantitative research – Psychotic disorder and cannabis use: Canadian hospitalization trends, 2006–2015. *Health Promotion and Chronic Disease Prevention in Canada: Research, Policy and Practice*, 40(5/6).



What these Findings Mean for You

Cannabis Use Is Linked to Mental Health Risks

Regular cannabis use can affect your ability to enjoy life and deal with challenges.† Here are some ways cannabis can have an impact on mental health:

- One in six people who begin using cannabis regularly during adolescence will develop cannabis dependence, an important component of a cannabis use disorder (Anthony, 2016).
- Using cannabis regularly will increase your risk of developing psychosis and schizophrenia, even if you do not have family members with these disorders.
- Your risk is increased if you start using cannabis before age 17, use daily or almost-daily, use cannabis high in tetrahydrocannabinol (THC) or if your family has a history of these disorders.
- Using cannabis daily or almost daily also increases your risk of becoming dependent and is associated with more harms than benefits among individuals with mental health conditions.

Cannabis is not effective for self-medicating

There is limited evidence to suggest that cannabis can effectively manage symptoms of PTSD, depression or bi-polar disorder.

Public Education and Harm Reduction Strategies

Ways to reduce risk when using cannabis:

- Delay use as long as possible.
- Reduce the amount and how often it is used.
- Use products containing less than 100 mg/g (10%) THC content.
- Avoid synthetic cannabis products.

Cannabis Use Disorder

The *Diagnostic and Statistical Manual of Mental Disorders*, fifth edition (American Psychiatric Association, 2013) defines “cannabis use disorder” as “a problematic pattern of use leading to clinically significant impairment or distress.”

Additional Considerations to Reduce Hospitalizations Related to Cannabis Use

- Co-morbid cannabis use and mental and behavioural disorders are best treated within a comprehensive and integrated system of care (CADTH, 2020). This is particularly important for individuals ages 15–24.
- If authorizing medical cannabis use for mental health concerns, consider that cannabis use is an independent risk factor for psychosis and schizophrenia.
- Targeted educational materials about the risks of cannabis use and ways to reduce risks are needed.
- Evidence-based resources for physicians, mental health and addiction professionals, and educators are provided below.

† In general, “regular cannabis use” refers to weekly or more frequent use over periods of months or years and poses a risk for adverse health effects.



Call for Further Research

Further research is needed to identify factors contributing to increased hospitalizations for psychotic disorder related to cannabis use, particularly among young males. Ongoing monitoring of population-level data that considers the types and potency of cannabis used, use of other substances including alcohol, and the social determinants of health is needed to understand the impact of cannabis policies and prevention strategies.

Additional Resources

- Canadian Centre on Substance Use and Addiction (CCSA), [Clearing the Smoke on Cannabis Series](#)
- CCSA, [Cannabis and Your Medications](#)
- CCSA, [Talking Pot with Youth: A Cannabis Communication Guide for Youth Allies](#)

References

- Anthony, J.C. (2006). The epidemiology of cannabis dependence. In R.A. Roffman & R.S. Stephens (Eds.) *Cannabis dependence: Its nature, consequences and treatment* (pp. 58-105). Cambridge, UK: Cambridge University Press.
- CADTH (Canadian Agency for Drugs and Technologies in Health). (2020). *Guidance Document on the Management of Substance Use in Acute Care*. Ottawa: Author.
- Statistics Canada. (2019). *Canadian Tobacco, Alcohol and Drugs (CTADS) Survey: 2017 detailed tables*. Ottawa: Author. Retrieved from: <https://www.canada.ca/en/health-canada/services/canadian-tobacco-alcohol-drugs-survey/2017-summary/2017-detailed-tables.html>.

