Journal of Drugs Addiction & Therapeutics



Case Report Open Access

Traditional Chinese Medicine Offers Help to Marijuana Users Determined to Withdraw Report of Two Typical Cases

Lau Ho Chuen

Medical Officer in Charge, Drug Rehabilitation Section, Evangelical Lutheran Church Social Service, Enlighten Centre, Hong Kong

*Corresponding author

Lau Ho Chuen, Medical Officer in Charge, Drug Rehabilitation Section, Evangelical Lutheran Church Social Service, Enlighten Centre, Hong Kong. Tel: +852-24469226; E-mail: hochuenlau@elchk.org.hk

Received: June 14, 2022; Accepted: June 20, 2022; Published: June 25, 2022

Marijuana (Cannabis) is the most frequently used illegal substance in the world [1,2]. On the other hand there is a rapidly shifting landscape advocating the legalization of Marijuana for medical and recreational purposes. The regular use of marijuana during adolescence is of particular concern since use by this group is associated with an increased likelihood of deleterious consequences [3]. Legalization of the drug in some countries is steaming up global interests. General excitement and high mood together with energizing effects are the outcome of Cannabis. On the reverse, without the drug, the downward mood and loss of physical energy could be unbearable. The direct manifestations of withdrawal syndrome include irritability, anger, aggression, anxiety, insomnia, restlessness, depression and physical symptoms like headache, sweating, chills and bodily pain [3].

Therapeutic measures to alleviate the complex presentations related to withdrawal attempts are limited to medications specific for neuro-psychological therapy like anti-depressants, neuro stimulants and sleep promoting drugs [4,5].

The complexity of withdrawal symptoms has produced much difficulties in the attempts to support the fervent users who are determined to withdraw. Available pharmaceuticals have well acknowledged target-specific indications while the withdrawal syndrome is involving a multiplicity of objective and subjective clinical heart-felt presentations. There is a need for the provision of some agent that, instead of targeting on a specific pathology or clinical focus, offers a general multiple foccol, harmonizing effects.

Traditional Chinese Medicine may have special offers

Opium addiction for the Chinese people started long before the Opium War when British and American merchants dumded tones of opium to China via Hong Kong. In those days only traditional practitioners are giving health services. They have inherited practical ways to handle the problem of drug addiction. They have developed a conceptual line of approach that deal with the loss of physiological harmony after addicting to opium.

Today when we offer our service to Marijuana abusers, we apply the same logical analysis and management and we have observed good results: from perfect responses when the abstinence becomes perfect; to partially helpful outcomes.

We would discuss the principles that guide us on the treatment before two typical cases will be presented. We use complex herbal formulatons with, multiple medicinal herbs to tackle the complicated syndrome of withdrawal in the attempt to restore better harmonious interacting between Yin and Yang with particular emphasis on heart and kidney functions.

One may consider three roles to be fulfilled by the complex formula as follows:

- 1. Detoxication
- 2. The herbal combination should have "cooling" effects and boosting effects on the "Yin" component.
- 3. Replenishing Kidney Deficiency
- 4. This is also related to the deficient "Yin" area experienced by the adulterants. Watching the "Yin" situation in the process might reveal the need for an active support of "Yang" at the same time, thus leading to active modifications of the formula.
- 5. Gastro-intestinal Regulatory support (Spleen & Stomach care) could be important in the process subsequent to syndrome variations which need to be replenished to give better circulatory and phlegm control.

We have to acknowledge the important guiding principles given us by a respectable Chinese Medicine Expert Dr. Zedor Chan who comprehensively analysed the importance of getting the replenishment of Qi so as to reach a harmonious state of the five essential physiological activities in the process to restore a fresh stabilized Brain Function.

Two cases will be presented to illustrate the treatment process and outcome of typical cannabis abusers.

Case 1 of Complete Withdrawal

- Male around 40, photographer
- History of Marijuana dependence over 10 years
- Motivations for withdrawal aware of bad temper, anxiety, aggression against wife and sleep problems
- Treatment duration: Total 24 weeks (Active treatment 15

J Drug Addi Ther, 2022 Volume 3(2): 1-2

Citation: Lau Ho Chuen (2022) Traditional Chinese Medicine Offers Help to Marijuana Users Determined to Withdraw Report of Two Typical Cases . Journal of Drugs Addiction & Therapeutics. SRC/JDAT-127. DOI: doi.org/10.47363/JDAT/2022(3)121

- weeks, Steady follow-up 9 weeks)
- Medication: Starting with a 24 herbs formula, structured according to the principle discussed i.e. detoxicating, replenishing and regulatory, all directing towards restored Brain Function. (Details provided in Appendix)
- Visits: Total of 10 visits. Formula adjustments on Visit 7 and Visit 8, then continuation until the end visit.
- Outcome: Total withdrawal

Urine test confirmation: negative since 10th visit Further confirmations: negative 3 more times

Case 2 of Partial withdrawal

- Male 45, vegetable stall owner
- History of Marijuana dependence over 10 years
- Motivations for withdrawal: Bad temper, anxiety, sleep problems
- Treatment duration: Total 13 weeks
- Medication: similar to case 1. Sticking to the same principles
- Visits: Total 8 visits
- Formula adjustment at 7th visit in response to complaints.
- Outcome: At the last visit, both patient and attending Chinese Medicine expert were happy with the withdrawal results.
 Patient received 3 consecutive urine tests which were all negative.

Case was closed for active treatment but put under observation. It was learned subsequently that he still maintained on Marijuana "minimally" once or twice per week, and remained very "sensible" and "confident". The overall result could be labelled as: Partial Withdrawal

Discussion

The global wind that is fanning up the habitual use of Cannabis is giving a real challenge to our teenagers and youths. Those habituated at some stage, commonly look back and realize the need to terminate the addiction. Most of them, unfortunately will be disappointed to realize the lack of trustworthy medical offer. Specific therapy for specific complaints could be available like overcoming neuro psychological symptoms or anti-insomnia medications; nevertheless, withdrawal symptoms are complex, could be non-specific, yet grossly inter-related, making treatment difficult and unpredictable [6].

In Chinese Communities, the tradition and trust on Chinese Medicine persists although most, if not all, hospitals and clinical practices have turned modern. The disappointing modern clinical offers for withdrawal syndromes could be supplemented with the Traditional offer of herbal treatment. Our experience on a number of cases cannot claim total success in the withdrawal challenge; however, the possibility of giving solid support has been evident.

Classical herbal formulations, though effective, tend to be complex, cumbersome and unfavourable for generalization. It has been our intention to simplify the combinations, aiming to create a simple, harmonizing supplement, specific for cannabis withdrawal, for standard use.

Acknowledgement

Dr. Lau Ho Chuen treated the two patients in the report. He allowed Prof. P.C. LEUNG to restructure the case reports on his behalf.

References

- 1. Hall W, Solowij N (1998) Adverse effects of cannabis. Lancet 352: 1611-1616.
- 2. EMCDDA (2012) European Monitoring Centre for Drugs and Drug Addiction Annual report 2012: the state of the drugs problem in Europe. Luxembourg: Publications Office of the European Union.
- 3. SAMHSA (2011) Substance Abuse and Mental Health Services Administration, Results from the 2010 National Survey on Drug Use and Health: Summary of National Findings, NSDUH Series H41, HHS Publication No. (SMA) 11-4658. Rockville, MD: Substance Abuse and Mental Health Services Administration.
- 4. José AS Crippa, Guilherme N Derenusson, Marcos HN Chagas, Zerrin Atakan, Rocio Martín-Santos, et al. (2012) Pharmacological interventions in the treatment of the acute effects of cannabis: a systematic review of literature[J]. Harm Reduct J 9: 7.
- 5. Gustavo A Angarita, Nazli Emadi, Sarah Hodges, Peter T Morgan (2016) Sleep abnormalities associated with alcohol, cannabis, cocaine, and opiate use: a comprehensive review [J], Addict Sci Clin Pract 11: 9.
- Volkow D, Baler RD, Compton WM (2016) Adverse Health Effects of Marijuana Use. HS Public Access. Engl J. Med 370: 2219-2227.

Copyright: ©2022 Lau Ho Chuen. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

J Drug Addi Ther, 2022 Volume 3(2): 2-2