CHRD 2024: Abstract Submission Form

Presenter Name Manik Chhabra

Role in the project Design Perform Experiments Analyze Data Write Abstract

Title

Real-world safety of Cannabidiol and its Clinical Drug Interactions in Children and Adolescents: Insights from Pharmacovigilance Study and Systematic Literature Review

Background

With the increasing use of Cannabidiol (CBD) for medical purposes, very little is known about its real-world safety and clinical drug interactions in children.

Objective

We aimed to study the real-world safety profile of CBD in children using open pharmacovigilance databases and systematically review evidence from the literature on CBD-related clinical drug interactions in children.

Methods

CBD-related spontaneous reports from the FDA Adverse Event Reporting System (FAERS) and EudraVigilance databases were analyzed to review suspected CBD-related AEs. We conducted a descriptive analysis of data from spontaneous reports, followed by a disproportionality analysis of FAERS data to generate signals using OpenVigil 2.1. MEDLINE, Embase, and Cochrane Library were searched to identify literature on CBD-related clinical drug interactions in children. Two reviewers independently performed the screening and data extraction.

Results

In total, 2,068 spontaneous reports (274 from FAERS, 104 from the regulated EudraVigilance CBD, and 1690 from the unregulated EudraVigilance CBD) were identified. Strong Signals were detected for seizures [PRR 19.767 (95% CI 18.035-21.665), 328 reports], sudden unexplained death in epilepsy [PRR 27.641 (95% CI 10.065-75.909), 4 reports], death [PRR 30.829 (26.03-36.514), 176 reports], and hospitalization [PRR 30.829 (26.03-36.514)]. Of the 19 included studies on CBD-related clinical drug interactions (546 children and adults), 68.4% (n=13/19) exclusively included children (267 children). A total of 14 CBD-related clinical drug interactions were reported in children. The most common was clobazam reported in 42% (n=8/19) of the studies, followed by valproic acid in 21% (n=4/19), and mTOR inhibitors in 15.7% (3/19) of the studies. CBD interaction with topiramate and zonisamide was reported in 10.5% (n=2/19) of studies.

Conclusion

CBD has a complex pharmacological profile; it is reported to interact with multiple medications and increase the risk of adverse events; therefore, there is a need for cautious monitoring in children receiving CBD along with other medications. In addition, there is a need to generate long-term safety and drug interaction data on CBD use in children.

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No

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