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## ▶ Treatment of cannabis use among people with psychotic or depressive disorders: a systematic review.

Baker A.L., Hides L., Lubman D.I.

Journal of Clinical Psychiatry: 2010, 71(3), 247-254.

Unable to obtain a copy by clicking title? Try asking the author for a reprint by adapting this prepared e-mail or by writing to Dr Baker at amanda.baker@newcastle.edu.au.

A review of psychosocial and medication-based treatments for people with co-occurring cannabis use and mental health issues reveals some positive results, but a need for more research.

**SUMMARY** Cannabis use is associated with negative outcomes for people with mental health issues. This paper reviews evidence for psychosocial and medication-based treatments for cannabis use among people with psychotic or depressive disorders.

The authors identified only two studies which examined cannabis use outcomes among participants prescribed medications for mental health issues, and five studies of participants given psychological therapies for both cannabis use and their mental health problems.

Participants prescribed medications used cannabis less after treatment. However, it was unclear whether this was due to the medications alone, as they were also being supported with unspecified psychotherapies.

Short-term reductions in cannabis use were reported in the studies of psychological therapies, but this was found regardless of the type of intervention. When these were compared, motivational interviewing, cognitive-behavioural therapy, self-help booklets, standard clinical interview and 'treatment as usual' generally had similar impacts. The studies which looked at longer-term outcomes following psychological treatments found that relapse to pre-treatment levels of cannabis use was common, but again, regardless of the type of intervention.

All these findings derived from brief psychological interventions. Only one study considered whether the length of the intervention would make a difference to outcomes, comparing brief motivational interviewing with a longer session of motivational interviewing or cognitive-behavioural therapy. It found that the longer treatments remained effective a year later, while the briefer intervention did not.

The authors concluded that though few studies have explored the effectiveness of treatments for cooccurring cannabis use and mental health issues, there is some evidence that effectively treating the mental health issue with medications can be associated with a reduction in cannabis use. For heavier users of cannabis and those with more chronic mental health issues, more intensive psychological interventions may be required, rather than brief interventions.

**FINDINGS COMMENTARY** Confidence in these findings is limited by the overall scarcity of evidence, and the lack of information in the selected studies about the wider support that participants were receiving, without which it is difficult to draw conclusions about the effectiveness of psychosocial and medication-based treatments alone.

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