



CHRONIC PAIN AND FATIGUE
RESEARCH CENTER

May 2024

The Health Equity Core's

Spring



NEWSLETTER



OUR MISSION: We aim to improve pain care and reduce inequities by elevating the voices of patient communities in research.





We want to know which
pain-related topics interest

YOU

Take Our Survey at
<https://tinyurl.com/Chronic-Pain-Topics>

UPCOMING EVENTS

YOGA THERAPY SESSION



Saturday, June 8th

11 AM to 12 PM at the UM Detroit Center

Scan the QR Code or follow the link to register:

<https://tinyurl.com/HEC-Yoga-Therapy>

CANNABIS & PAIN

Cannabinoids are a class of active drug found in the *Cannabis sativa*, also known as cannabis or marijuana. While there are over 100 active cannabinoids found in cannabis, the two most common and best-studied cannabinoids are Δ^9 -tetrahydrocannabinol (THC) and cannabidiol (CBD). Cannabinoids work by interacting with the endogenous cannabinoid system in the body, which helps regulate complex behaviors and responses such as pain, sleep, and mood. The exact mechanisms of how THC and CBD work to reduce pain have not been fully determined.

THC and CBD have significantly different effects. THC is responsible for the cannabis “high” and consequently, the abuse and addiction potential of cannabis. Therapeutically, THC can be used to stimulate appetite in chemotherapy-induced nausea and vomiting, help manage chronic pain, and help reduce muscle spasticity in multiple sclerosis. CBD is non-intoxicating and has very little abuse potential. CBD can be used to decrease seizures in rare childhood epileptic conditions, such as Dravet syndrome. In preclinical studies with non-human animals, CBD has been shown to reduce inflammation, pain, and anxiety, but these findings have not been translated to humans. CBD may also enhance the therapeutic effects of THC, as demonstrated by clinical trials in which a combination of CBD and THC are given together.

At the end of April 2024, it was announced that the U.S. Drug Enforcement Administration (DEA) plans to reclassify cannabis as a less dangerous drug. Moving from Schedule I to Schedule III, this reclassification will recognize the medical uses of cannabis and acknowledge that cannabis has less potential for abuse than drugs like heroin. Uncertainty remains about how this will impact the use of cannabis products for chronic pain care and research.



RESEARCH OPPORTUNITIES



The MIVetsCan clinical trials are now open to enrollment!
Contact the study team to learn more or visit MIVetsCan.org.
Email: MIVetsCan@med.umich.edu
Phone: (734) 998-6088



The Translational Physical Activity Laboratory is seeking participants for a lupus study to understand the relationship between SLE and exercise. For more information, contact tpalaboratory@umich.edu.

ADDITIONAL RESOURCES

Conquer Lupus

<https://www.conquerlupus.com/>

PASC Guide

<https://www.pascguide.com/>

Sickle Cell

<https://abettermewithscd.com/>

Pain Guide

<https://painguide.com/>



CONTACT US

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