**Supplemental Table 4**. Characteristics of studies on cannabis.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1st author, year** | **Pain diagnosis** | **Diagnosis of neuropathic pain** | **Type of pain** | **Duration of pain in years (range or SD)** | **Baseline pain NRS (range or SD)** | **Age in years (range), gender (M/F)** | **Number of subjects in each group (Can/Com)** | **Active Rx, route** | **Comparator** | **Duration of treatment** | **Remarks** |
| Abrams 200742 | HIV peripheral neuropathy | Clinical  | Peripheral | 7.0 (IQR 3, 9) years | THC: 5.3 + 2.0Placebo: 5.4 + 2.3 | THC: 50 + 6Placebo: 47 + 7 48/7 | 55 (27/28) | Cigarettes containing 3.56% THC and weighing on average of 0.9g; smoked 3 times per day; total THC dose 32mg/day*a* | Placebo  | 5 days (7 days post-intervention followup) | No mention of continuation of baseline analgesic medication |
| Wilsey 200847 | Neuropathic pain of multiple etiologies*b* | Clinical | Central and peripheral | 6.0 (0.8-24.2) years | 5.5 + 2.1 | 46 (21-71); 20/18 | 38 (38//38/38) | Cued puff procedure of 3.5%, or 7% THC, cumulative 9 puffs per session; total THC dose 19.25-34mg/day*a* | Placebo | 3, 6 hour sessions | Crossover trial (three 6 hour treatments; at least 3 days between treatments [3-21 days])Pre-existing neuropathic pain medication continued |
| Ellis 200943 | HIV peripheral neuropathy | Clinical, Total Neuropathy Score (TNS) + EPT | Peripheral | Not reported | 11.1 (9.1, 13.7)*c* | 49.1 + 6.9; 33/1 | 34 (34/34) | Cigarettes with 1-8% THC titrated to tolerance (4.1% weighted average of completed patients) smoked 4 times per day; total THC dose/day not reported*a* | Placebo | 5 days (1 day titration with 4 days of maintenance) | Crossover trial (5 days of intervention with 2 week washout period) Pre-existing neuropathic pain medication continued |
| Wallace 201544 | Diabetic peripheral neuropathy | Clinical | Peripheral | 4.8 (2.6) | 6.7 + 1.6 | 56.9 + 8.2; 9/7 | 16 (16/16/16/16) | Vapourized cannabis with THC concentrations of 1%, 4%, and 7% corresponding to total of 4, 16, and 28mg of THC per session | Placebo | 4, 4 hour sessions | Crossover trial (four 4 hour treatments with 2 week washout period). Only 8 participants were on analgesic medication prior to trial commencement |
| Ware 201045 | Post-traumatic neuropathy | Clinical  | Peripheral | Not reported | 6.89 + 1.37  | 45.4 + 12.3;11/12 | 23 (23/23/23/23) | 25mg doses of various THC potencies (2.5%, 6.0%, 9.4%) smoked 3 times per day; total THC dose 1.875-7mg/day*a* | Placebo | 5 days of active intervention per crossover (8 weeks total) | Four period crossover design (5 days of intervention with 9 days of washout period) Pre-existing neuropathic pain medication continued |
| Wilsey 201346 | Neuropathic pain of multiple etiologies | Clinical | Central and peripheral  | 9 (0.5-43.4) years | THC 3.53%: 5.7 + 2.4THC 1.29%: 5.3 + 2.3Placebo: 5.8 + 2.3 | 50 + 11; 28/11 | 39 (39/39/39) | Cued puff (vapourized) procedure of 1.29% or 3.53% THC with cumulative 8-12 puffs per session; total THC dose up to 19.25mg/day*a* | Placebo | 3, 6 hour sessions | Crossover trial (three 6 hour treatments; at least 3 days between treatments [3-14 days]); Pre-existing neuropathic medication continued |

EPT: electrophysiological testing; THC: delta-9-tetrahydrocannabinol; TNS: total neuropathy score

*a*Total THC dose reported from systematic review by Deshpande et al.

*b* 22 of 38 patients had a diagnosis of CRPS type I pain

*c* Reported in Descriptor Differential Scale (24 point scale)