**Supplemental Table 5**. Outcomes reported in studies on cannabis.

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| 1st author, year | Primary outcome | Secondary outcome(s) | Adverse Events | Remarks |
| Abrams 200742 | Mean daily VAS (graph)  Patients with >30% reduction in pain  Cannabis: 52%  Placebo: 24% | Improvements in cannabis group (vs placebo) in:   * Immediate reduction in chronic pain ratings   No difference between groups in:   * Long Thermal Stimulation procedure * Heat Capsaicin Sensitization model * PMS | More patients had AE (anxiety, sedation, disorientation, confusion, dizziness) during active treatment. No patient withdrew due to adverse effects | 1 patient had grade 3 dizziness, 1 patient had grade 3 anxiety  Placebo group achieved better improvement on depression-dejection portion of Profile of Mood States compared to cannabis |
| Wilsey 200847 | Absolute effects by time, pain intensity reduction (10 point VAS) per minute (SE)  THC 3.5%: -0.0085 + 0.001  THC 7%: -0.0085 + 0.001  Placebo: -0.0040 + 0.001 | Improvements in cannabis groups (vs placebo) in:   * Pain unpleasantness * PGIC * NPS   No difference between groups in:   * Allodynia * QST | No patient withdrew due to adverse effects. No specific reporting adverse effects. In general, side effects and changes in mood were relatively inconsequential |  |
| Ellis 200943 | Reduction in pain (using Descriptor Differential Scale) (graph):  Median difference in pain reduction = 3.3 DDS points; effect size = 0.60 | Improvements in cannabis group (vs placebo) in:   * SIP * PMS * BSR | Cannabis group patients had greater frequency of concentration difficulties, fatigue, sleepiness or sedation, increased duration of sleep, reduced salivation, and thirst | 1 patient withdrew due to psychosis, 1 patient withdrew due to intractable cough. Blinding effect was preserved in crossover |
| Wallace 201544 | Proportion of participants with >30% NRS reduction  THC 7%: 81%  THC 4%: 80%  THC 1%: 67%  Placebo: 62% | Improvements in cannabis groups (vs placebo) in:   * Evoked pain (foam brush and Von Frey)   No difference between groups in:   * Neurocognitive testing (mean differences from baseline between doses at different time points): Trail-making test A and B, PASAT | No patients withdrew form study due to adverse effects. Study only examined euphoria and somnolence as adverse effects with significant placebo effect (euphoria: 56%; somnolence: 38%) | Significant response to placebo for >30% NRS reduction. Higher % THC resulted in significantly higher subjective highness scores compared to placebo. |
| Ware 201045 | Average pain intensity score over five days of intervention  THC 9.4%: 5.4 (1.7)*a*  THC 6.0%: 6.0 (1.8)  THC 2.5%: 5.9 (1.9)  Placebo: 6.1 (1.6) | Improvements in cannabis group (vs placebo) in:   * Leeds Sleep Questionnaire*a* * Anxiety or depression of EQ-5D*a*   No difference between groups in:   * PMS * MPQ | No serious or unexpected adverse events reported. Most frequent drug-related adverse events reported in THC 9.4% group: headache, dry eyes, burning sensation, dizziness, numbness and cough | Participants in placebo and THC 9.4% correctly identified assignment >50% of the time during later cycles |
| Wilsey 201346 | Proportion of participants with >30% VAS reduction  THC 3.53%: 61%  THC 1.29%: 57%  Placebo: 26% | Improvements in cannabis groups (vs placebo) in:   * PGIC * NPS   No difference between groups in:   * Heat pain threshold * Mood | No patient withdrew due to adverse effects. | Participants in all 3 groups correctly identified assignment >60% of the time.  Dose effect differences seen in neuropsychological testing |
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BSR: Brief Symptom Recovery; EQ-5D: European Quality-of-Life 5 Domains; MPS: McGill Pain Questionnaire; NPS: Neuropathic Pain Scale; PASAT: Paced Auditory Serial Attention Test; PGIC: Patient’s Global Impression of Change; PMS: Profile of Mood States; QST: Quantitative Sensory Testing; SIP: Sickness Impact Profile

*a* Only THC 9.4% was statistically significant compared to placebo