



Complementary Therapies for MS Management

Hosted by Lower Mainland Chapter **Thursday, April 7, 2016** 6:00-7:30 pm (PST)









The MS Society, Lower Mainland Chapter gratefully acknowledges the educational grant received from Tilray which makes possible the **Complementary Therapies for MS Management** session. The MS Society does not approve, endorse or recommend any specific product or therapy but provides information to assist individuals in making their own decisions.

Identification of needs, determination of objectives, selection of content and speakers, educational methods and materials are the sole responsibility of MS Society staff and advisors.



MS Society of Canada

 Mission Statement: To be a leader in finding a cure for multiple sclerosis and enabling people affected by MS to enhance their quality of life.



Presenters

Dr. David Parton, MD, FRCP(C)

Medical Cannabis for MS symptoms

Margaret Evans RN, BScN, CPCC, Author Diet, Digestive Health, and MS



DR. DAVID PARTON

• Currently, Dr Parton practices as a neurologist at the MS Clinic, in Victoria, B.C.



- An Assistant Professor at UBC, teaching for the Vancouver Island Medical School and the UBC Neurology Residency program. He is honored to instruct students from first year medical school through to Interns, Residents and Post Graduate Fellows.
- Was an active member of several boards and committees in the past, including but not limited, to the Canadian Congress of Neurological Sciences, the Board of the BC Medical Association as President of the Specialist Section, and the BCMA Section of Neurology. He is currently a member of the MS Society's Volunteer Legal Advocacy Program's Advisory committee, and a member of the Board of Directors.
- Has active involvement in research and teaching. His clinical research includes Botulinum OAB study in association with Dr. Steinhoff Clinical Research and ongoing studies in new MS treatments through the Clinic.



•

MARGARET EVANS

- Registered nurse, a certified life coach, a mom to 4 grown children and Nana to 4 little grandchildren.
- Has an autoimmune disease, herself, and has successfully treated her symptoms using a grain-free, dairy free diet.
- Has over 30 years of experience working with clients facing the challenge of autoimmune disease and food sensitivities.
- Developed a unique process where she will help participants identify whether or not food is a likely cause of their symptoms and then help them figure out what trigger food is the culprit
- While there are many diets on the Internet claiming to improve the symptoms of MS, Margaret's approach will help you create an individualized plan that matches your own unique needs







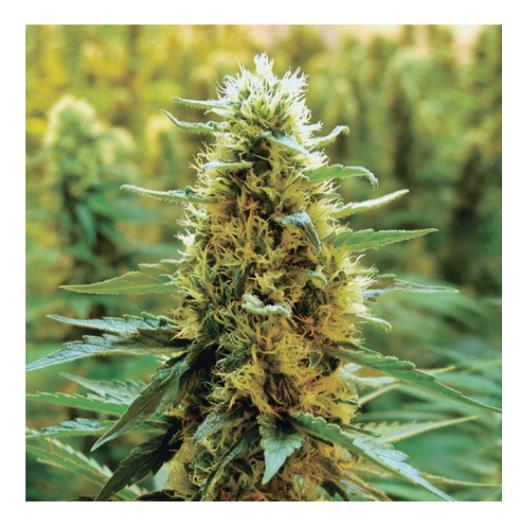
Dr. David Parton

Medical Cannabis: Its Role in Multiple Sclerosis



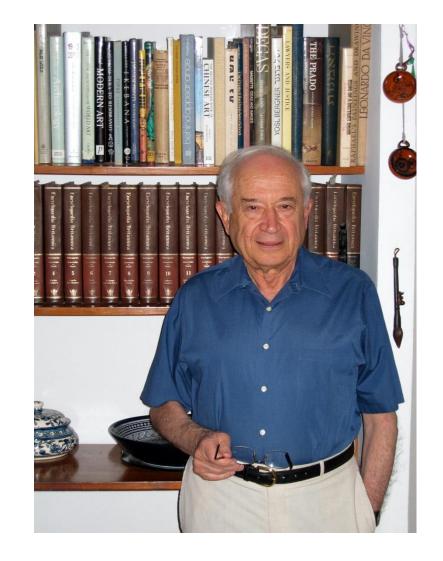


MS. All the fuss...

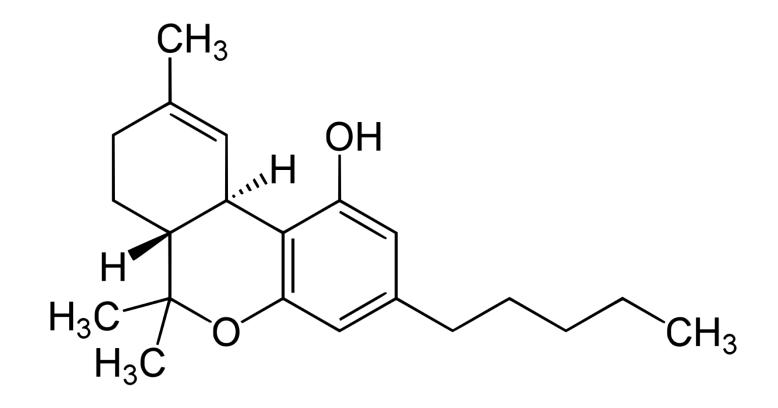




MS. Dr. Raphael Mechoulam

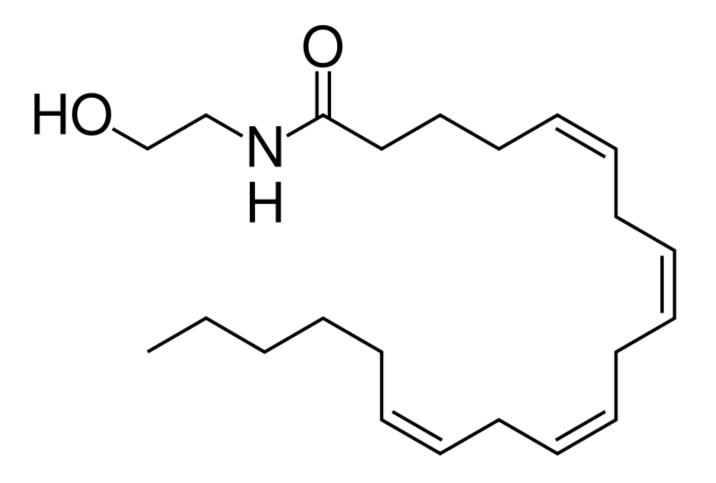






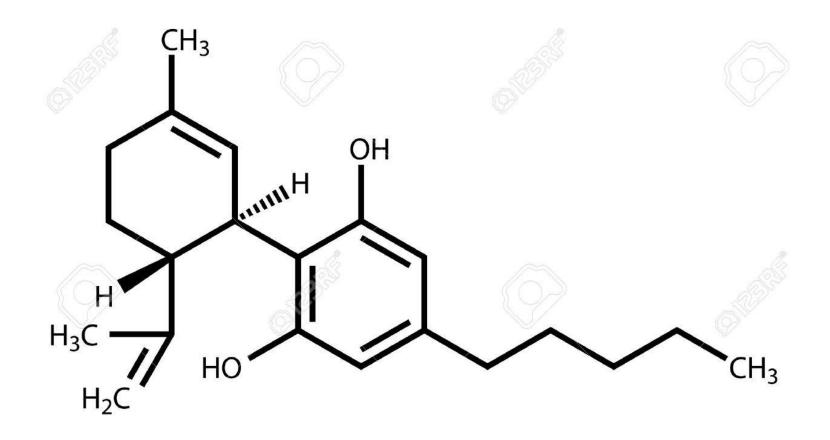


Anandamide





Cannabidiol



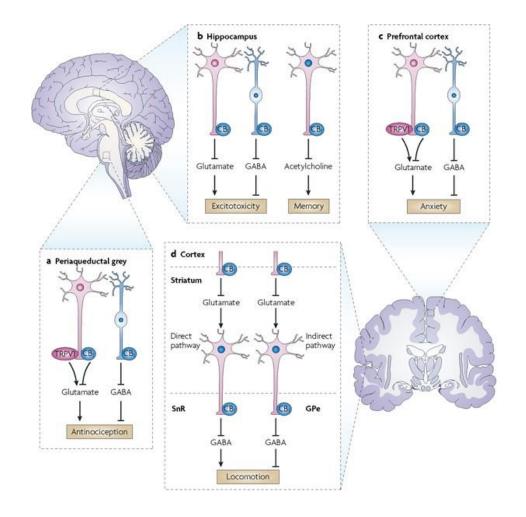


Clinical Checklist

- Are you using cannabis for your MS?
- What symptoms are you using it for (e.g. spasticity, pain, anxiety, etc)?
- How effective is it?
- How do you use it (smoke, vapor, oral, cream)?
- What is daily dose/frequency?
- Source (optional): LP, home grow, Compassion club

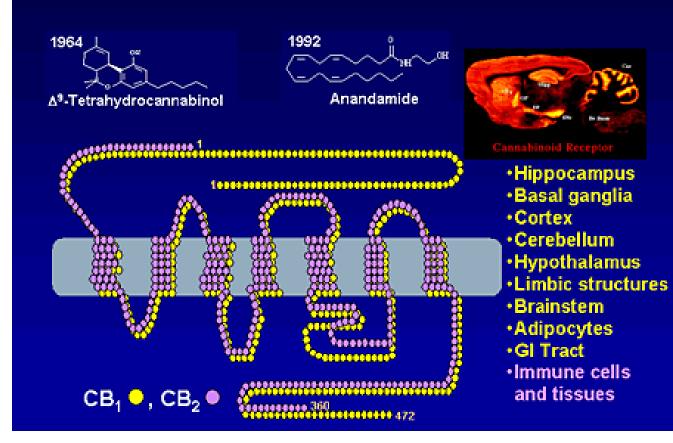


Some of the pathways endocanabinoids regulate





Cannabinoid Receptors





The EC System Is a General Stress-Recovery System and Is Overall "Silent"; It Becomes Transiently Activated To:

Relax

reduction of pain and anxiety; modulation of body temperature, hormone production, smooth muscle tone, and blood pressure

Rest

inhibition of motor behavior and sedation

Forget

extinction of aversive memories

Protect

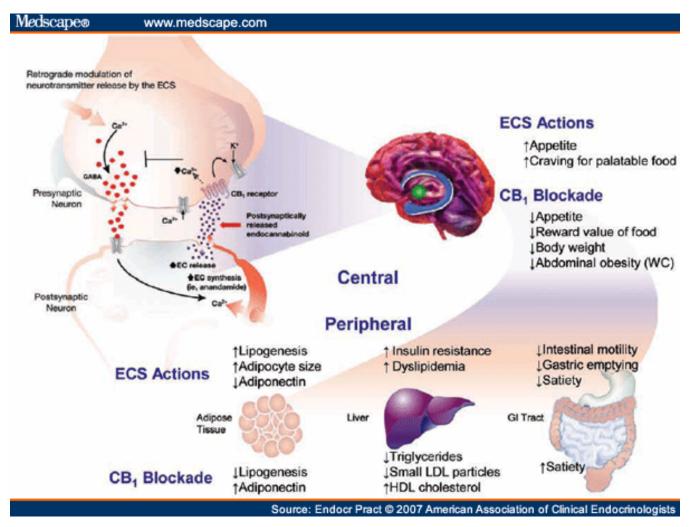
at both the cellular and emotional levels

Eat

appetite-inducing and reward-reinforcing effects



Endocannabinoids and Nutrition



MS. Historical use in Medicine

- Mentioned in Sanskrit texts 1500 B.B.
- Galen 150 A.D.
- Sir John Reynolds, physician to Queen Victoria, advocated use for headache and neuralgia
- Wm. Osler "Cannabis Indica is probably the most satisfactory remedy"



Endocannabinoids

Function in:

- Appetite regulation
- Sleep-Wake cycles
- Pain Modulation
- Anxiety control
- Pleasure / Relaxation



Canadian History 101

PRIOR TO 1970 Next to no use in Canada



Canadian History 101

1972

The LeDain Royal Commission recommends cannabis be regulated and dispensed by Government Made available to citizens



History continued

RESULTS NIL

Till 2008

Marijuana access program

2012

Licensed producers allowed



What do you think?

- Decriminalization?
- Licensed producers?



Medical Program

- Currently, a brief form indicating daily dose is all.
- No report to government or police
- Form faxed to Licensed Producer and Bud form delivered in mail monthly
- No Doctor or Nurse has ever been charged in relation to the program



Best Practice (as per DEP guidelines)

Dosage	> 1 gram per day
Route	> Smoke
	> Oral
	Vaporizer (Optimal Way)
• Q 4-6 hourly	
 No Driving for 4 hours after use 	
For ages 25 and over	



Safety Issues

- Respiratory

 Iung and CNS
- Psychiatric
 - association with first break
 - schizophrenia (?)
- Anxiety, tachycardia, orthostatic hypotension
- Driving



Driving

 US department of transportation studies of blood and oral secretion THC in accident victims did not correlate with increased risk of MVA and rates of accidents may be lower in THC users







Current Medical Uses

- Multiple sclerosis
 - spasticity, neuropathic pain
 - sleep disorder anxiety
- Post traumatic stress
 - military and DVA
- Fibromyalgia
 - central cannabinoid deficiency
- Migraine
- Central nausea, chemotherapy
- Chronic pain syndromes



MS. Double Blind Study







Margaret Evans Diet, Digestive Health, and MS











HOPE IS THE ANCHOR OF THE SOUL









A RADICAL NEW WAY TO TREAT ALL CHRONIC AUTOIMMUNE CONDITIONS

The Wahls Protocol

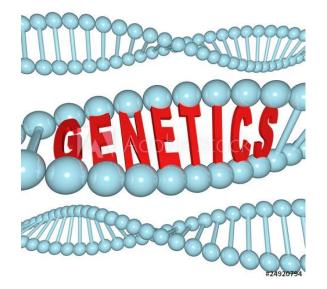
How I Beat Progressive MS Using Paleo Principles and Functional Medicine



TERRY WAHLS, M.D.

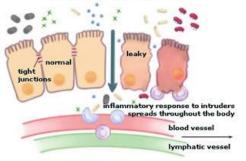
Founder of THE WAHLS FOUNDATION with Eve Adamson

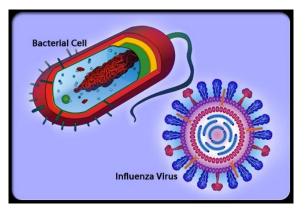




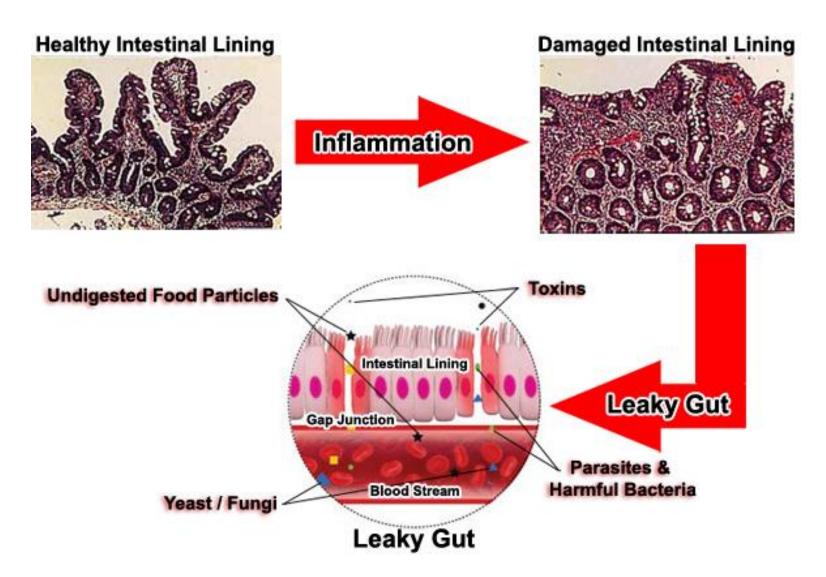


undigested food particles / toxins



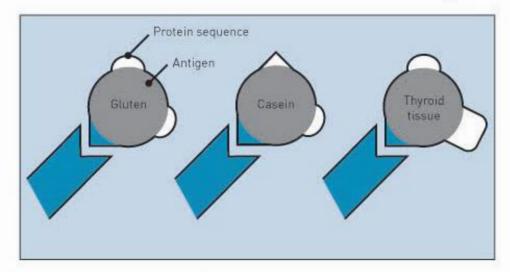


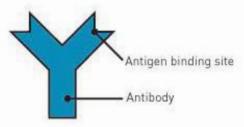






Molecular Mimicry





Antibodies bind to the specific protein sequences of antigens. While gluten, casein, and your own tissues may all be different, they share some of the same protein sequences. A cross reaction occurs when your immune system cannot distinguish between these molecules.





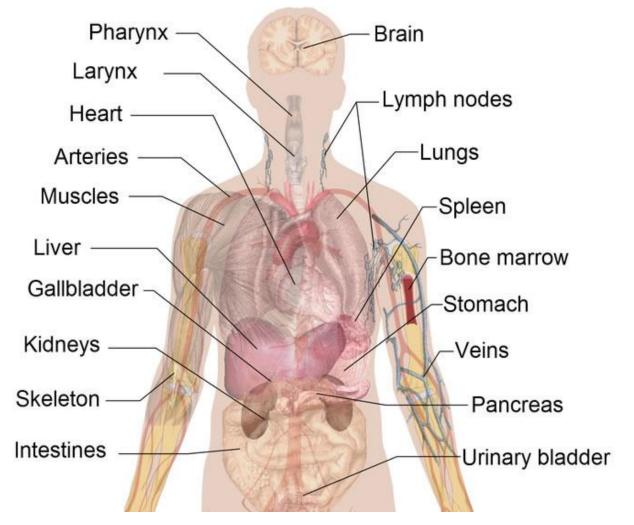


Leaky gut syndrome is almost always associated with autoimmune disease. In fact, reversing symptoms of autoimmune disease depends on healing the lining of the gastrointestinal tract. Any other treatment is just symptom suppression.

Jill Carnahan, MD



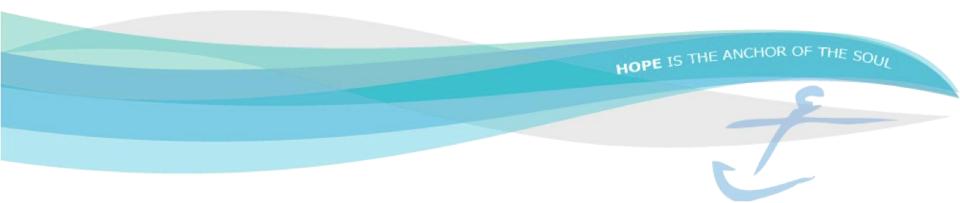
Human anatomy





Identification of Trigger Foods







The trigger food that is causing your symptoms is:

- The food that you consume, in some form or another, every day, and would find difficult to remove from your diet.
- The food you reach for when you are stressed, over-tired, or when your blood sugar is low.
- The food you craved and ate often as a child and a teenager.
- The food that you believe may have caused an increase in your symptoms following a course of antibiotics or a severe illness.

- The food that may have resulted in symptoms that can be traced back to infancy or toddlerhood.
- The food that has a history of being over consumed and craved by several members of your family.
- The food that produces unpleasant symptoms in other members of your family.
- THE FOOD YOU CAN'T IMAGINE EVER GIVING UP!

HOPE IS THE ANCHOR OF THE SOUL



Courage does not always roar. Sometimes it's the quiet voice at the end of the day saying, I will try again tomorrow.



For Further Information Please Contact

MS Society of Canada, Programs and Services staff 1103-4720 Kingsway, Burnaby, BC V5H 4N2 Phone : 604-689-3144 / 1-800-268-7582 (BC) Fax: 604-689-0377



