

# CANCER DOSING GUIDELINES

The Realm of Caring created this cancer dosing guide to help our clients through questions that may arise when adding cannabis to their cancer regimens. Our clients will use cannabis for (1) aiding symptoms from cancer treatments, and/or (2) fighting the cancer itself. Anecdotally, much higher dosing is needed for option two. It is important to remember that rigorous research is lacking, so expectations should be tempered.

The following guidelines have been set by applying the collective data from individuals in our program. Every person is unique and dosing may vary. According to recent studies, cannabis is becoming a promising adjunct therapy with cancer treatment. Research also suggests that in addition to cannabis therapy, **lifestyle changes** are pertinent to limiting and reversing toxicity, giving the body the best chance to heal. Eliminating toxic exposure can be challenging, but attainable. Toxins can come from **food**, **environment**, **habits** and even **emotions**. Realm of Caring encourages all of our clients to seek mental, physical and spiritual health as part of their holistic journey.

## HOW TO BEGIN

#### Realm of Caring recommends

Adult cancer clients start at 50 mg of CBD 2x daily (100 mg/day) Child cancer clients start at 25 mg of CBD 2x daily (50 mg/day)

You may futher divide daily dose by 3x or 4x daily. \*You can move up with dosing as quickly as the individual can tolerate.

If you are looking to combat symptoms like **nausea**, **vomiting**, **chronic fatigue** or **pain** etc from your cancer treatments, you may need significantly less. The Realm of Caring does not endorse replacing your doctor's treatment recommendations with cannabis, however we have witnessed many who use it in addition to help with side-effects.



## GENERAL DOSING

It is believed that it is safe to take cannabis in conjunction with traditional cancer therapies. In fact, there is research that suggests that cannabis can increase the effectiveness of **chemotherapy** and **radiation**. You should talk with your oncologist about this.

Anecdotally, many cancers respond to a 1:1 ratio, that is one part Cannabidiol (CBD) to one part tetrahydrocannabinol (THC). Cannabis has been known to cause **apoptosis** and can be an **antiangiogenic**. However, cancer is very complicated and cannabis research is ever evolving. There have not been any double blind studies to find effective dosing. To that extent, current studies have reported that CBD is showing promise in how oncologists are looking to treat breast, glioma, Leukemia, thyroid, colon and lung cancer. If you do not have access to THC or are not able to administer high milligram dosing, do not be discouraged. Some cannabinoid therapy has a better chance to help than none at all.

The exact milligram needed to cause apoptosis or be an antiangiogenic is unknown and can vary depending on cancer type and stage. As for administration, anecdotal evidence would suggest a daily ingestion requirement of 1 gram (1,000 mg or 500 mg CBD and 500 mg THC) a day or more, however, working up to that goal can be a lengthy process.

It is always best to administer the oil as close to the source of the cancer as possible. Rectal administration is an option for several cancers as well as to help reduce the psychoactive effect of the THC. Oil therapy can also be complemented with lotions and topicals for cancers that would apply. Incorporating multiple methods of administration can increase the effectiveness of the therapy.

A person's sensitivity to THC is a key factor in determining appropriate dosages. Therefore you will likely want to begin dosing and titrate up according to the THC content and not CBD. (For example, a dose of a concentrated hemp oil containing 1,000 mg of CBD may also contain 40 mg of THC. That amount of THC is enough to potentially cause a naive user to be uncomfortable). You can titrate up over time with likely no psychoactivity if done slow enough. An ideal individual goal is as much as can be tolerated while working up to the desired milligram or gram as fast as tolerated. You can find many personal reports that THC is needed if you are trying to fight cancer using cannabinoid therapies. Again, this is purely anecdotal.

The type of dosing that is recommended for clients in partial or complete remission is called "maintenance dosing" and its purpose is to feed the endocannabinoid system while hopefully keeping cancer at bay. Clients using maintenance dosing will FOR THOSE IN REMISSION

likely be using much lower levels of cannabinoid intake than if they were actively trying to fight cancer.

### Realm of Caring recommends

**Adult** cancer remission clients start at 100 mg of CBD 2x daily **Pediatric** cancer remission clients start at 25 mg of CBD 2x daily, go up to 1 mg/lb

### FINDING A PRODUCT

Take the following checklist when choosing a cannabinoid product,

**Cannabinoid content.** What cannabinoids are in the product?

**Concentration**. How many milligrams are in the product?

Ratio. If a product has more than one cannabinoid, what is the ratio of one to the other?

Quality. Is the product tested by third party laboratories? What are the manufacturing standards?

**Price.** What is the price per milligram of the desired cannabinoid?

**Realm of Caring** supports products meeting superior quality standards. Visit our website for an up-to-date listing.

