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# TOPICAL CANNABIS BASED MEDICINES: A NEW EPIGENETIC PARADIGM FOR WOUND MANAGEMENT

**Statement of the Problem:** The endocannabinoid system is ubiquitous throughout the human body and has recently been found to have a significant representation throughout the integumentary system, both cutaneous membranes and mucous membranes. Topical medical cannabis (TMC) based medicines are intrinsically lipophilic and contain both delta-9-tetrahydrocannabinols (THC) and cannabidiol (CBD) in varying proportions. Given that wound beds are largely lipophilic absorption of lipophilic agents, such as cannabinoids, is enhanced.

**Methodology & Theoretical Orientation:** A series of n=1 trials were initiated on a cohort of stalled recalcitrant wounds, composed of cases of greater than 12 months duration, were treated with TMC based medicines. All cases were previously afforded with all available evidence-based treatments that confirmed with local best practices and wound-bed preparation principles. Ten cases were studied for wound analgesia, ten cases for wound healing, and four cases for disease modulation. Etiologies represented within the cohort understudy included: pyoderma gangrenosum, leukocytoclastic vasculitis, cryoglobulinemia, antiphospholipid syndrome, sickle cell disease, Bowen's disease, and squamous cell cancer. Clinically significant analgesia, wound healing, and disease was noted in all cases. The TMC medicines were applied directly applied to wound beds. TMC was very well tolerated and no adverse reactions were observed.

**Conclusion & Significance:** The highly positive results observed in a cohort of the most challenging recalcitrant cases provoke realistic interpolation that TMC based medicines may be effective for a broader context within wound management. The endocannabinoid system is a viable epigenetic target and platform for exploring therapeutic options for skin and wound conditions. Therapies based on topical medical cannabis that interact at the level of the endocannabinoid system have significant potential to improve the three main target outcomes in wound management, namely, wound analgesia, wound healing and disease modulation that includes antineoplastic action.

## Biography

Vincent Maida is a Consultant in Palliative Medicine & Wound Management at the William Osler Health System in Toronto. He has graduated with his MD from the University of Toronto and was promoted to an Associate Professor at the University of Toronto in 2011 after the five years from his junior promotion. He has completed his MSc in Wound Management from University of Toronto in 2010. In 2011, he completed his Medical Teachers Certificate, and in 2014, he completed his Certificate in Patient Safety and Quality Improvement, both at the University of Toronto. He is an Active Researcher with particular interests in pain and symptom management, wound management, prognosis and medical education. Over the past 10 years, he has published four textbook chapters over 35 original research papers, created numerous original conceptual innovations in Palliative Medicine and Wound Management, as well as delivering over 100 national and international presentations on five continents, 15 countries, and over 50 cities. Over the past 10 years, his publications have been cited by other researchers and authors more than 500 times worldwide.

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