

Pharmtrue Cannabis and Autism Dosing Guide

Using CBD for Autism

Starting Dose: Suggested starting dose is 25 mg of CBD per dose.

Observation and Titration:

- If the child appears tired/sluggish: This indicates a high dose. The next dose should be lower.
- If the child is more hyper/agitated: This indicates a low dose. The next dose should be increased.
- Titrations can be done in 5 mg increments.

Frequency of Dosing:

- Begin with one dose in the morning, then observe and adjust accordingly.
- Maintain each dose for 3-4 days for evaluation. Adjust sooner if adverse effects are observed.

Tracking: Use tracking logs or apps like BEHCA for documenting behaviors and supplement/medication usage.

Using THC for Autism

Starting Dose: Begin with a low dose, such as 1-2 mg of THC, titrating up in 1-2 mg increments as needed.

Observation and Adjustment:

- No effects: This may indicate a low dose. Increase the next dose slightly.
- Opposite effects: This suggests an inappropriate THC chemovar for the child. Consider trying different strains.

Frequency and Titration:

- Similar to CBD, start with one dose and observe.
- Continue for 3-4 days before making changes, unless adverse effects are noted.

Using CBG for Autism

Starting Dose: Begin with 2-3 mg of CBG, increasing in 2-3 mg increments as needed.

Observation and Titration:

- No effects or tiredness/sluggishness: Adjust dose accordingly.
- Hyperactivity/agitation: Increase the dose slightly.

Dosing Frequency:

- Start with once daily, and adjust based on observations.

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- As with CBD and THC, maintain for 3-4 days for assessment.

General Guidelines for All Cannabinoids

- **Range of Effective Dosing:** The effective daily dose can vary widely (e.g., 10 mg to 1000 mg) depending on the individual and the cannabinoid used.
- **Strain and Terpene Considerations:** Different strains and terpenes can have vastly different effects. Selection should be based on individual responses.
- **Regular Consultation:** Regularly consult with healthcare providers, especially when starting or modifying treatment plans.

Which Formulations Are Best for Autism?

- **Whole-Plant Extracts:** Most studies and positive anecdotes involve whole-plant extracts with low THC components. However, some individuals may benefit from pure forms of CBD or THC.
- **Individualized Approach:** Autism is diverse, and responses to cannabis treatments are highly individual. Systematic trials may be needed to find the most effective strain and cannabinoid ratio.
- **Clinical Insights:** Experiences from clinicians like Dr. Alan Flashman and Dr. Bonnie Goldstein suggest a systematic approach to finding the optimal effect and fine-tuning the CBD:THC ratio.

Final Thoughts

- **Monitoring and Side Effects:** Carefully monitor for any side effects. Any treatment with cannabis, particularly in children, should be approached with caution and under medical supervision.
- **Legal and Safety Considerations:** Always ensure that you are compliant with local laws and regulations when using cannabis products for medicinal purposes.

Remember, this guide is not a substitute for professional medical advice. It should serve as a conversation starter between patients, families, and healthcare professionals to explore the potential benefits of cannabis in autism treatment, tailored to each individual's needs and circumstances. All users should consult their doctors or qualified health professionals regarding specific health questions.