Cannabis: Eye Candy for Eye Conditions

By Mary Lou Smart
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The National Eye Institute (NEI) studied glaucoma and cannabis in the 1970s and concluded that marijuana, when smoked, lowers intraocular pressure (IOP). They poured a great deal of money into developing a cannabis-or synthetic-cannabis topical ointment for the eye, which never panned out. When that effort failed, the organization abandoned medical cannabis and began promoting its long-standing, three-pronged argument that smoked cannabis can lower blood pressure, which might damage the optic nerve; that marijuana delivers an unacceptable psychoactive side effect; and that the Food and Drug Administration (FDA) has approved lots of “highly effective” medications for glaucoma treatment anyway so there is no need to delve any further into the proven benefits of cannabis.

Thanks to this federal policy, many with eye conditions suffer needlessly.

Becca Hollandsworth, operations director of the R.C. Randall Memorial Wellness Center and Cannalytics in Michigan, receives benefit from cannabis for several eye conditions. Diagnosed with glaucoma at age 28, almost four years ago, she finds that if she takes a hit of cannabis every few hours, it relieves her IOP. Her doctor has measured the pressure, and he tells her that her IOP is lower.

“I can feel in my eyes when the pressure is starting to rebuild,” she said. “At that point, I’ll excuse myself when appropriate, depending on the situation, and I will go to where I need to go to medicate.”

Hollandsworth also has cataracts, macular degeneration, dry eye syndrome and extreme sensitivity to light. Her eyes hurt if she is in rooms with harsh lighting. Extreme changes in light, walking from softer indoor lighting into the sunlight for example, cause pain.

Glaucoma causes damage to the optic nerve and can lead to blindness. Currently, 2.7 million Americans over age 40...
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have the condition. The NEI projects that this number will increase by 58 percent to 4.2 million by 2030. According to the World Health Organization, more than 60 million people have this group of diseases that can gradually steal sight away without warning.

Many states with medical cannabis programs list glaucoma as a qualifying condition for a medical cannabis recommendation. Most do not mention macular degeneration as a qualifying condition.

“They have to have another condition to become a patient, but I do have a lot of patients with macular degeneration,” she said.

With macular degeneration, the eye breaks down. Everything in the focal viewpoint becomes blurry. As it progresses, objects such as faces cannot be recognized. With medical cannabis therapy, Hollandsworth’s macular degeneration has stabilized.
“What my doctor is thinking, and I’ve heard other doctors say the same thing, is that the red eye look that comes with smoking cannabis is actually extra blood flowing into the eye creating extra oxygenation, which they think is helping to slow that deterioration process,” she said. “Blood flow to the eyes is one of the things that they’re thinking is really helping me to stay stable. We’re starting to see those results in other patients too.”

Online, patient testimonials regarding conventional medical treatments for glaucoma versus cannabis reveal that some of the conventional eye drops have been known to deliver a sensation not unlike pouring lemon juice onto an open wound. Hollandsworth would like to try a combination of conventional and natural remedies, but has no health insurance.

“One of the things that we’re finding is that there are so many patients that do not have insurance to be able to afford the care of eye specialists on a regular basis,” she said. “There are people who cannot afford eye drops and so medical marijuana is a cheaper solution to at least help them until they can get the eye drops and other various medications that get recommended to patients by eye specialists. I am not on any conventional medication at this point. I am one of those Americans who do not have insurance. I’m supposed to go every six months and get my eyes checked, but in the last three years I have not been able to because I have not been able to afford it.”

Cannabis, known to treat pain as well as inflammatory conditions, helps with the migraines that accompany spikes in IOP, Hollandsworth added.

It has been 12 years since the passing of Robert Randall, whose influence on the medical marijuana movement is significant.

Suffering from glaucoma, he realized in the 1970s that the plant he’d been enjoying for recreational use actually helped his condition by reducing ocular pressure. Told in his 20s that he’d be blind in two years, he became a strong advocate for medicinal marijuana and also retained his vision for the rest of his life. His anger over the denial of a simple medical solution, his compassion for those in need, and his strong communication skills made him an ideal advocate. With a master’s degree in rhetoric from the University of South Florida and speaking acumen, Randall was well equipped for the battles to come.

He and Alice O’Leary, his wife, were arrested in 1975 for growing his medical marijuana on their balcony in Washington D.C. Within days, Randall was conducting his own investigation. He was shocked to learn that individuals within the National Institute of Drug Abuse (NIDA) and the FDA understood that marijuana could help individuals with glaucoma.

“That just made him madder than hell,” said O’Leary. “I don’t know of any other way to put it. It irritated him that we were arrested for something that federal agents knew could be helpful. So we decided to fight the charges, which we did, and we won, and it was huge news.”

Concurrent with the legal fight, they petitioned the federal government through the FDA for legal access to federal supplies of marijuana for treatment of glaucoma, which he
received in November 1976. Randall was the first patient in the government’s Compassionate Investigational New Drug (IND) Program. Wanting to help others, Randall created protocols for prospective patients with glaucoma, multiple sclerosis, chronic pain and AIDS. With his help, several patients were accepted into the program. Together, the couple founded the Alliance for Cannabis Therapeutics in 1981 to educate patients.

“Alice O’Leary chose us to carry on the education portion of his work,” said Hollandsworth. “Studies done on her husband by Howard University and UCLA showed very clearly right out of the gate that when using medical marijuana throughout the day eye pressures stay lower and they stay stable. Of course, if you lose that access, the eye pressure will jump.”

Elvy Musikka was helped by Randall, and she is one of four remaining patients in the federal government’s IND program. Each month since 1988 she has received a can of 300 rolled cannabis cigarettes, eight ounces. Born with congenital cataracts, she developed glaucoma in both eyes. Prior to trying cannabis, surgery caused the loss of sight in her right eye.

“The 280 little laser cuts were more than my small eye could handle and so I hemorrhaged shortly thereafter and I lost the right eye completely,” she said.

It was not until the surgeries left her blind in one eye that she tried cannabis. Since that time, Musikka has devoted much of her life to letting people know how cannabis has helped her sight where conventional procedures failed.

“Marijuana was able to do it, to lower the pressure, from the very beginning!,” she said. “Cannabis is certainly responsible for maintaining the sight that I have left.”

Musikka reported early on that she and her doctor found that cannabis-infused edibles helped to lower her IOP. Hollander found the same benefit with edibles.

“Everybody’s biochemistry is different but the edibles haven’t really worked for me,” she said. “What I have found though is that coconut oil gel caps come in very, very handy. If I take those regularly throughout the day, I find that I don’t have to smoke as much.”

Hollander finds Indica strains to be preferable to Sativa strains for her condition. “I have found that the Indica strains relieve my pressure,” she said. “Most of the other glaucoma patients I know feel the same way. A good hybrid will also work well as long as it’s Indica-dominant. I know for me that on really bad days White Fire OG is a great help.”

Jim Greig is an Oregon patient who has an advanced case of Ankylosing Spondylitis (AS), a rheumatic disease that affects the entire body. After being diagnosed with the condition at age 38 in the 1980s, he was in a wheelchair within six months. He is bedridden most of the time, and has found great pain relief and muscle spasm relief with cannabis, which allows him to take fewer opiates.

Greig’s eyes were not spared, as a related arthritic condition, iritis or uveitis, dramatically impaired his sight not long after his AS was discovered. Described as a failure of the ocular immune system, iritis is arthritis of the eye that causes his eye pressure to spike, which can lead to blindness.

“When my eye pressure got high, I’d get a shot of cortisone in the eyeball,” he said. “That’s always fun. And then they’d take a laser beam, and shoot laser holes in there so that the excess fluid would have some place to drain off.”

Like Musikka, Greig lost sight in one eye before he found cannabis. Since beginning natural therapy, the pressure in his remaining eye has been under control. These days, he is trying CBD-rich cannabis strains, and feels that they might be extremely beneficial in treating his issues.

“It may be a coincidence, but I recently received a couple of ounces of a high-CBD strain named Sour Tsunami,” he said. “I have been using a little every day. I went to an optometrist for new glasses two weeks ago and my eye pressure was lower than it has been in decades.”