**A comprehensive patient and public involvement programme evaluating perception of cannabis-derived medicinal products in the treatment of acute postoperative pain, nausea and vomiting using a qualitative thematic framework**

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**Background**

Surgeons are seeking to reduce epidural and opioid use in the postoperative period due to their significant side-effect profiles. There is evidence that cannabinoids have anti-emetic properties and in combination with opioids have synergistic analgesic effects in part signalling through the delta and kappa opioid receptors. The aim of this patient and public involvement(PPI) programme was to determine perception of perioperative cannabis-derived medicinal products(CDMs) in our local population and to inform design and clinical end-points of a double-blinded clinical randomised controlled trial(RCT).

**Methods**

The programme used qualitative data from focus group(n=14) and semi-structured interviews(n=4). Qualitative data analysis was based on the framework methodology. Verbatim transcriptions were coded categorically into analytical frameworks for thematic analysis. Emergent themes and associated degree of consensus/dissent were determined.

**Results**

The participants were composed of a representative population cohort of patients and relatives(M:F=1:1, age range 33-85). Consensus across the PPI programme was that potential benefits of CDMs were attractive compared to the known risk profile of perioperative opioid use. Decrease in opioid-dependence was agreed to be an appropriate clinical end-point for a RCT and there was high concurrence of a therapeutic schedule of 5 days. Participants identified constipation and nausea as the most significant opioid side-effects. Negative cannabinoid perceptions included addiction, dysphoria, and adverse effects in psychiatric sub-populations. Sub-lingual or oral administration was the most acceptable route of administration, with some expressing that smoking delegitimises therapeutic properties. All participants find randomisation with placebo acceptable in co-administration with current analgesic gold standard and would theoretically accept to be randomised in such a trial.

**Conclusions**

The perception of postoperative cannabinoid therapy was overwhelmingly positive in this West London population. The data from this thematic analysis can inform protocol development of clinical trials to determine analgesic and anti-emetic properties of cannabinoids.