

Table 1. Plant-Derived Cannabis Medicinal Extracts

Author Year Country Research Design Score Total Sample Size	Methods	Outcome
<p>Wade et al., 2003 UK RCT cross-over Level 1 PEDro=8 N=24</p>	<p>Objective: To determine whether plant-derived cannabis medicinal extracts can alleviate neurogenic symptoms unresponsive to standard treatment, and to quantify adverse effects.</p> <p>Population: 24 participants with a neurological diagnosis (multiple sclerosis, n=18; SCI, n=4; brachial plexus damage, n=1; and limb amputation due to neurofibromatosis, n=1) 10M, 10F Mean age 48 years</p> <p>Treatment: Participants were assigned to each of the following groups for two weeks:</p> <ul style="list-style-type: none"> • Experimental group 1: Whole-plant extracts of delta-9-tetrahydrocannabinol (THC) • Experimental group 2: Cannabidiol (CBD) • Experimental group 3: 1:1 CBD:THC • Control group: Matched placebo <p>Self-administration by sublingual spray at doses determined by titration against symptom relief or unwanted effects within the range of 2.5–120 mg/24 hours.</p>	<p>1. No statistically significant difference ($p>0.05$) between groups (NRS [SD]: placebo=5.0 [2.4], CBD=4.6 [2.4], THC=4.2 [2.2], CBD:THC=5.2 [2.5]).</p>

	<p>Outcome Measures: Short-oriented memory concentration test, Ashworth, Rivermead Mobility Index, Barthel Activities of Daily Living Index, the General Health Questionnaire, and numeric rating scales (NRS) of fatigue, pain, spasticity and urinary incontinence, measured at baseline and each two weeks.</p>	
--	---	--