

MEDICAL MARIJUANA FOR CANCER CACHEXIA? WHAT YOU SHOULD KNOW.

FLORIDA LAW DOES NOT RECOGNIZE CANCER CACHEXIA AS A DISTINCT QUALIFYING CONDITION FOR MEDICAL MARIJUANA; HOWEVER, CANCER IS A QUALIFYING CONDITION.¹

WHAT IS CANCER CACHEXIA?

- Cancer and its treatments can lower appetite (desire to eat) and affects the sense of taste and smell. Cancer and its treatment may also cause dry mouth, trouble swallowing, sores in mouth and throat, and nausea, making it harder to eat and get the nutrients the body needs.²
- Cancer related cachexia includes loss of appetite, weight and muscle mass loss, leading to weakness. This makes daily activities harder, increases side effects from cancer treatment, and lowers how people feel and function in daily life.³⁻⁵
- Cancer related cachexia is common in people with cancer, specifically in patients with advanced cancer.⁵

CAN MEDICAL MARIJUANA HELP WITH CANCER CACHEXIA?

- There is not yet enough evidence to recommend for or against the use of medical marijuana in managing cancer-related cachexia.^{5,6}
- Some studies suggest that cannabinoids (chemicals found in medical marijuana) do not improve appetite, quality of life, or cause changes in weight or total energy intake in people with cancer, but evidence is mixed and still developing.^{6,7}

WHAT SHOULD I ASK MY HEALTHCARE PROVIDER?

1. Discuss any prescription medications you are taking, including those for cancer, pain, depression, or autoimmune disorders.

Tell your provider about any other health problems you have. There are many possible interactions between medical marijuana and diseases, or other substances. Some medicines may need dose adjustments guided by a physician.⁵

2. Report and discuss any concerning effects of medical marijuana with your physician.

The use of medical marijuana can cause dizziness, confusion, dry mouth and worsen nausea and vomiting symptoms.^{4,5} Therefore, regular communication with your healthcare provider can assist in identifying risks and side effects.



1. The 2020 Florida Statutes, Title XXIX, Chapter 381, section 381.986: Medical use of marijuana.

2. Milliron BJ, Packer L, Dychtwald D, et al. When Eating Becomes Torturous: Understanding Nutrition-Related Cancer Treatment Side Effects among Individuals With Cancer and Their Caregivers. *Nutrients*. 2022;14(2):356. Published 2022 Jan 14. doi:10.3390/nu14020356

3. Chowdhury IH, Rahman S, Afroze YJ, Shovah ST. IUPHAR ECR review: Cancer-related anorexia-cachexia in cancer patients: Pathophysiology and treatment. *Pharmacol Res*. 2024;203:107129. doi:10.1016/j.phrs.2024.107129

4. Eric J. Roeland et al. Management of Cancer Cachexia: ASCO Guideline. *J Clin Oncol* 38, 2438-2453(2020). doi:10.1200/JCO.20.00611

5. Ilana M. Braun et al. Cannabis and Cannabinoids in Adults With Cancer: ASCO Guideline. *J Clin Oncol* 42, 1575-1593(2024). DOI:10.1200/JCO.23.02596. Accessed February 19, 2026.

6. Simon L, Baldwin C, Kalea AZ, Slee A. Cannabinoid interventions for improving cachexia outcomes in cancer: a systematic review and meta-analysis. *J Cachexia Sarcopenia Muscle*. 2022;13(1):23-41. doi:10.1002/jcsm.12861

7. Creangă-Murariu, I., Rezuş, Il., Karami, R. et al. Indications of Cannabinoids for the Palliation of Cancer-Associated Symptoms: A Systematic Review and Meta-Analysis. *Curr Oncol Rep* 27, 1080–1096 (2025). doi: 10.1007/s11912-025-01695-x