



(RESEARCH ARTICLE)



Phytocannabinoids: Therapeutic potential, mechanism of action, and regulatory challenges

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GSC Advanced Research and Reviews, 2024, 21(01), 180–184

Publication history: Received on 29 August 2024; revised on 13 October 2024; accepted on 15 October 2024

Article DOI: <https://doi.org/10.30574/gscarr.2024.21.1.0364>

Abstract

Phytocannabinoids, notably cannabidiol (CBD) and tetrahydrocannabinol (THC), are the primary active compounds in the *Cannabis sativa* plant. These compounds interact with the endocannabinoid system in humans, which regulates various physiological processes. The scientific exploration of phytocannabinoids has expanded significantly due to their potential therapeutic effects. Concurrently, regulatory frameworks are evolving to accommodate the increasing medicinal use of these compounds.

A comprehensive review of peer-reviewed literature was conducted to evaluate the therapeutic effects, mechanisms of action, and safety profiles of phytocannabinoids. Regulatory documents and policy papers from multiple countries were analyzed to understand the legal status and regulatory approaches toward phytocannabinoids. Data sources included PubMed, regulatory agency websites, and international health organization reports.

The review highlighted that CBD and THC exhibit significant promise in treating conditions such as epilepsy, chronic pain, multiple sclerosis, and anxiety. CBD is generally well-tolerated with a favorable safety profile, while THC, despite its psychoactive effects, has demonstrated efficacy in pain management and muscle spasticity. Regulatory landscapes vary widely, with countries like Canada and Uruguay fully legalizing cannabis, while others, such as the United States, maintain a complex legal framework with federal restrictions but state-level legalization. This fragmentation poses challenges for researchers and healthcare providers.

Phytocannabinoids present a substantial opportunity for therapeutic advancement, supported by growing scientific evidence. However, the regulatory environment remains inconsistent, necessitating harmonization to facilitate research and clinical application. Future efforts should focus on robust clinical trials to establish definitive efficacy and safety profiles and on developing coherent regulatory policies that balance public health concerns with the therapeutic potential of phytocannabinoids.

Keywords: Phytocannabinoids; Regulatory framework; Endocannabinoid receptors; Therapeutic effects; Cannabis sativa

1. Introduction

Phytocannabinoids, primarily cannabidiol (CBD) and tetrahydrocannabinol (THC), are bioactive compounds derived from the *Cannabis sativa* plant. These compounds have garnered significant attention in recent years due to their potential therapeutic benefits across a range of medical conditions. The endocannabinoid system, which includes cannabinoid receptors CB1 and CB2, plays a crucial role in regulating various physiological processes such as pain, mood, appetite, and immune response¹.

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The therapeutic applications of CBD and THC are diverse. CBD, a non-psychoactive compound, has been shown to be effective in reducing seizure frequency in pediatric epilepsy syndromes, such as Dravet syndrome and Lennox-Gastaut syndrome, leading to the approval of Epidiolex by the U.S. Food and Drug Administration (FDA) ². Additionally, CBD has exhibited anxiolytic, anti-inflammatory, and neuroprotective properties in preclinical and clinical studies ³. THC, the primary psychoactive component of cannabis, is well-known for its analgesic properties and has been used in the management of chronic pain, muscle spasticity, and chemotherapy-induced nausea and vomiting ⁴.

Despite the promising therapeutic potential of phytocannabinoids, their regulatory status remains complex and inconsistent across different jurisdictions. In the United States, the 2018 Farm Bill legalized hemp-derived CBD products containing less than 0.3% THC, but THC itself remains a Schedule I controlled substance under federal law, even as several states have legalized it for medical or recreational use ⁵. Internationally, the regulatory landscape varies widely, with countries such as Canada and Uruguay fully legalizing cannabis, while others permit its use strictly for medical purposes ⁶.

The growing body of scientific evidence supporting the therapeutic use of phytocannabinoids necessitates a comprehensive examination of their mechanisms of action, safety profiles, and regulatory challenges. This review aims to provide an in-depth analysis of the current state of phytocannabinoid research, highlight key therapeutic applications, and discuss the regulatory frameworks governing their use. By synthesizing existing knowledge and identifying gaps in the current understanding, this review seeks to inform future research and policy development in the field of phytocannabinoids.



Figure 1 Plant of *Cannabis sativa* ⁷

2. Material and methods

A comprehensive search of peer-reviewed literature will be conducted using databases such as PubMed, Google Scholar, and Cochrane Library.

- Keywords used in the search will include: Phytocannabinoids, Tetrahydrocannabinol (THC), Cannabidiol (CBD), Cannabigerol (CBG), Cannabinol (CBN), regulatory framework, endocannabinoid receptors, therapeutic effects, *Cannabis sativa*.
- Articles published between January 2010 and December 2023 will be included. Additional searches may involve reference lists of relevant articles to ensure coverage of all relevant studies.

2.1. Inclusion Criteria

- Randomized controlled trials (RCTs), observational studies, systematic reviews, and meta-analyses.
- Studies investigating the effects of phytocannabinoids, specifically THC, CBD, CBG, CBC, and CBN.
- Articles must be published in English.

2.2. Exclusion Criteria

- Studies focused solely on synthetic cannabinoids, animal models, or in vitro studies.
- Articles that do not specifically evaluate phytocannabinoids (i.e., THC, CBD, CBG, CBC, or CBN) or focus primarily on other cannabis plant compounds like terpenes or flavonoids.

- Studies that do not report clear and measurable outcomes regarding therapeutic efficacy or adverse effects.
- Any duplicated studies or secondary analyses of previously published data will be excluded

3. Results and discussion

According to the bibliographic research and scientific articles, the results reached can be summarized in the following points:

3.1. Therapeutic Effects

Phytocannabinoids, particularly CBD and THC, have shown promise in treating a variety of medical conditions. Clinical trials have demonstrated the efficacy of CBD in reducing seizure frequency in patients with Dravet syndrome and Lennox-Gastaut syndrome, leading to the approval of Epidiolex by the FDA ². THC, on the other hand, has been effective in managing chronic pain, especially neuropathic pain, and muscle spasticity in multiple sclerosis ⁸.

3.2. Mechanism of action

Phytocannabinoids exert their effects primarily through the endocannabinoid system, which includes cannabinoid receptors CB1 and CB2. CBD has a low affinity for these receptors but modulates their activity indirectly by inhibiting the breakdown of the endocannabinoid anandamide and activating TRPV1 receptors ⁹. THC directly binds to CB1 receptors in the central nervous system, producing its psychoactive effects and analgesic properties ¹.

Table 1 Therapeutic Effects of Phytocannabinoids and their Mechanisms of action

Phytocannabinoid	Therapeutic effects	Mechanism of action
Δ^9 -Tetrahydrocannabinol (THC)	<ul style="list-style-type: none"> • Analgesic, anti-inflammatory, muscle relaxant • Antiemetic, appetite stimulant • Neuroprotective in neurodegenerative diseases (e.g., Alzheimer's) ¹ 	Partial agonist at CB1 and CB2 receptors ¹
Cannabidiol (CBD)	<ul style="list-style-type: none"> • Anxiolytic, anti-inflammatory • Antiepileptic (e.g., Dravet syndrome) • Antipsychotic ¹⁰ 	Allosteric modulator of CB1 and CB2, inhibits FAAH enzyme ¹⁰
Cannabigerol (CBG)	<ul style="list-style-type: none"> • Antibacterial (MRSA) • Neuroprotective (Huntington's disease) • Antiglaucoma ¹¹ 	Weak agonist at CB1/CB2, 5-HT1A receptor antagonist ¹¹
Cannabichromene (CBC)	<ul style="list-style-type: none"> • Anti-inflammatory • Antidepressant • Antinociceptive ¹² 	Interaction with TRPV1 and TRPA1 channels ¹²
Tetrahydrocannabivarin (THCV)	<ul style="list-style-type: none"> • Appetite suppressant • Anti-obesity • Antidiabetic ¹³ 	Antagonist at CB1 receptors, agonist at CB2 receptors ¹³

This table effectively summarizes the diverse therapeutic effects of key phytocannabinoids, highlighting their complex mechanisms and broad clinical potential. It emphasizes both well-established cannabinoids like THC and CBD, as well as emerging compounds such as CBG and THCV.

3.3. Safety and Side effects

The safety profile of CBD is generally favorable, with common side effects including somnolence, decreased appetite, and diarrhea ⁹. THC's side effects are more pronounced due to its psychoactive nature, including dizziness, dry mouth, euphoria, and potential for dependency with long-term use ¹⁴. Both compounds have a relatively low risk of severe adverse effects compared to many conventional pharmaceuticals.

3.4. Regulatory Landscape

The regulatory status of phytocannabinoids varies significantly across the globe. In the United States, the 2018 Farm Bill legalized hemp-derived CBD with less than 0.3% THC, yet the FDA maintains regulatory authority over CBD in foods, supplements, and pharmaceuticals ¹⁵. THC remains a Schedule I substance under federal law, though several states have legalized it for medical and recreational use ⁵. In contrast, Canada and Uruguay have fully legalized cannabis, allowing for more straightforward access and research opportunities ⁶.

3.5. The legal status of medical cannabis in Algeria

In Algeria, cannabis is illegal for both recreational and medical use. The production, sale, and possession of cannabis are strictly prohibited.

Recreational cannabis use is completely banned. Selling or trafficking cannabis carries even harsher penalties, including long-term imprisonment and substantial fines ¹⁶.

Medical cannabis laws in Algeria are slightly more lenient but still highly regulated. Although medical marijuana use is technically allowed, there is no comprehensive framework in place to support its legal distribution and prescription. Legislation from 2004 permits the cultivation and research of cannabis for medical and scientific purposes, but practical access remains very limited due to bureaucratic and regulatory challenges ¹⁷.

Overall, while Algeria's legal stance on cannabis is among the strictest in the region, ongoing issues with trafficking and limited medical use illustrate a complex legal and social landscape regarding cannabis regulation ¹⁸.

3.6. Challenges and Opportunities

The fragmented regulatory environment presents significant challenges for researchers, clinicians, and patients. Inconsistent laws and regulations hinder large-scale clinical trials and the development of standardized dosing regimens ¹⁹. However, the growing body of scientific evidence supporting the therapeutic potential of phytocannabinoids provides an opportunity for regulatory harmonization and policy reform. Collaborative efforts among stakeholders are crucial to optimize the therapeutic benefits while ensuring patient safety²⁰.

4. Conclusion

Phytocannabinoids hold substantial promise as therapeutic agents, with evidence supporting their efficacy in various medical conditions. Despite their potential, the regulatory landscape remains complex and inconsistent, posing challenges to research and clinical application. Future efforts should prioritize conducting robust clinical trials to further elucidate the therapeutic effects and safety of phytocannabinoids. Additionally, harmonizing regulatory policies will be essential to facilitate access to these compounds and maximize their public health benefits.

Compliance with ethical standards

Acknowledgments

We thank the all members of the Pharmacognosy laboratory for the help they gave us in carrying out this work.

Disclosure of conflict of interest

The authors and all co-authors declare that they have no conflicts of interest in connection with this document.

References

- [1] Pertwee, R. G. (2008). The diverse CB1 and CB2 receptor pharmacology of three plant cannabinoids. "British Journal of Pharmacology", 153(2), 199-215.
- [2] Devinsky, O., Cross, H., Laux, L., et al. (2018). Trial of Cannabidiol for Drug-Resistant Seizures in the Dravet Syndrome. "New England Journal of Medicine", 378(20), 1888-1897.
- [3] Blessing, E. M., Steenkamp, M. M., Manzanares, J., & Marmar, C. R. (2015). Cannabidiol as a Potential Treatment for Anxiety Disorders. "Neurotherapeutics", 12(4), 825-836.

- [4] Whiting, P. F., Wolff, R. F., Deshpande, S., et al. (2015). Cannabinoids for Medical Use: A Systematic Review and Meta-analysis. "JAMA", 313(24), 2456-2473.
- [5] Hudak, J. (2020). Marijuana: A Short History. Brookings Institution Press.
- [6] Lucas, P., & Walsh, Z. (2017). Medical cannabis access, use, and substitution for prescription opioids and other substances: A survey of authorized medical cannabis patients. "International Journal of Drug Policy", 42, 30-35.
- [7] Plant of Cannabis sativa. Available on : <https://www.sciencedirect.com/topics/neuroscience/cannabis-sativa>
- [8] Russo, E. B. (2008). Cannabinoids in the management of difficult to treat pain. "Therapeutics and Clinical Risk Management", 4(1), 245-259.
- [9] Bisogno, T., Hanus, L., De Petrocellis, L., et al. (2001). Molecular targets for cannabidiol and its synthetic analogues: effect on vanilloid VR1 receptors and on the cellular uptake and enzymatic hydrolysis of anandamide. "British Journal of Pharmacology", 134(4), 845-852.
- [10] Iffland, K., & Grotenhermen, F. (2017). An Update on Safety and Side Effects of Cannabidiol: A Review of Clinical Data and Relevant Animal Studies. "Cannabis and Cannabinoid Research", 2(1), 139-154.
- [11] Borrelli, F., Fasolino, I., Romano, B., Capasso, R., Maiello, F., Coppola, D., ... & Izzo, A. A. (2013). "Beneficial effect of the non-psychoactive plant cannabinoid cannabigerol on experimental inflammatory bowel disease." Biochemical pharmacology.
- [12] De Petrocellis, L., Ligresti, A., Moriello, A. S., Allarà, M., Bisogno, T., Petrosino, S., & Di Marzo, V. (2011). "Effects of cannabinoids and cannabinoid-enriched Cannabis extracts on TRP channels and endocannabinoid metabolic enzymes." British Journal of Pharmacology.
- [13] Wargent, E. T., Zaibi, M. S., Silvestri, C., Hislop, D. C., Stocker, C. J., Stott, C. G., ... & Cawthorne, M. A. (2013). "The cannabinoid Δ^9 -tetrahydrocannabivarin (THCV) ameliorates insulin sensitivity in two mouse models of obesity." Nutrition & Diabetes.
- [14] Volkow, N. D., Baler, R. D., Compton, W. M., & Weiss, S. R. (2014). Adverse health effects of marijuana use. "New England Journal of Medicine", 370(23), 2219-2227.
- [15] Agricultural Improvement Act of 2018, Pub. L. No. 115-334, § 12619, 132 Stat. 4490 (2018).
- [16] Luke,S.(13 August 2020). Legal status of marijuana in Algeria. Available on: (<https://www.cannaconnection.com/blog/14853-legal-status-algeria>)
- [17] Schmidt,E. (7 October 2022). Is Marijuana Legal in Algeria. Available on: (<https://leafwell.com/blog/is-marijuana-legal-in-algeria>)
- [18] Perez,E. (18 September 2023). Is Weed Legal In Algeria? Marijuana Laws 2024. Available on: (<https://thekif.com/is-marijuana-legal-in-algeria/>)
- [19] Fasinu, P. S., Phillips, S., ElSohly, M. A., & Walker, L. A. (2016). Current status and prospects for cannabidiol preparations as new therapeutic agents. "Pharmacotherapy: The Journal of Human Pharmacology and Drug Therapy",36(7), 781-796.
- [20] NABTI, Bachir. "Medical cannabis: Exploring therapeutic perspectives and regulatory context." GSC Biological and Pharmaceutical Sciences 24.1 (2023): 240-251