UPDATE: Synthetic Marijuana and Potential Risk for Bleeding

A recent Centers for Disease Control and Prevention (CDC) alert updates the number of cases of coagulopathy associated with the use of synthetic cannabinoids. The increase in numbers of affected patients and states suggests that this is not an isolated issue. Fatalities have also been reported. CDC hypothesizes that the synthetic cannabinoids may be contaminated with brodifacoum since at least 3 synthetic cannabinoid product samples related to this outbreak have tested positive for brodifacoum. CDC is investigating cases, coordinating with multiple states involved, and reviewing calls to all U.S. poison information centers to identify suspect cases that may be related to the current outbreak.

Additional recommendations suggested by the recent CDC alert to accompany those provided in the original National PBM Bulletin include:

- Proceduralists (e.g., trauma/general/orthopedic/oral/OB-GYN/cosmetic surgeons, dentists, and interventional cardiologists/radiologists) should be aware that patients with a history of synthetic cannabinoids (e.g., K2, Spice, and AK47) use may be anti-coagulated without clinical signs of coagulopathy. These patients should be screened for vitamin K-dependent anti-coagulant coagulopathy by checking their coagulation profile (e.g., international normalized ratio [INR] and prothrombin time [PT]) prior to their procedure.
- Contact your local Poison Information Center (1-800-222-1222) for questions on diagnostic testing and management of these patients.
- Promptly report suspected cases of vitamin K-dependent antagonist coagulopathy associated with synthetic cannabinoids use to your local and State Department of Public Health.

Due to the evolving nature of this issue, any relevant future information will be summarized in our safety newsletter, Medication Safety in Seconds, as needed.

REFERENCES:

ACTIONS
- **Facility Director** (or physician designee): Forward this document to the Facility Chief of Staff (COS).
- **Facility COS and Chief Nurse Executives**: Forward this document to all appropriate providers and health care staff (e.g., primary care providers, emergency department staff, Hematology-Oncology staff, trauma/general/orthopedic/oral/OB-GYN/cosmetic surgeons, dentists, and interventional cardiologists/radiologists, and pharmacy staff, including contract providers, etc.). In addition, forward to the Associate Chief of Staff (ACOS) for Research and Development (R&D). Forward to other VA employees as deemed appropriate.
- **ACOS for R&D**: Forward this document to Principal Investigators (PIs) who have authority to practice at the facility and to your respective Institutional Review Board (IRB).