SOMAÍ 25:1 INDICA MINT

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Different THC/CBD ratios to enable
a tailored treatment

RRP
£79

Mint

SOMAÍ 25:1
THC OIL INDICA MINT

25 mg/mL THC
Δ⁹- Tetrahydrocannabinol
<1 mg/mL CBD
Cannabidiol

Full Spectrum
Oromucosal Oil

SOMAÍ

30 mL

OROMUCOSAL USE

THC OIL

30mL

SOMAÍ 25:1

THC

POTENTIAL THERAPEUTIC INDICATIONS

- Appetite Stimulating[1]

- CINV[2]

- Chronic Pain[3,4]

- Spasticity[5]

- Palliative Care[6]

- Sleep Disorders[7]

- Other Indications as Clinically Justified

SOMAÍ 25:1 INDICA MINT

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Titration and Dosing

THESE TITRATION MODELS SERVE AS AN EXAMPLE AND MUST BE ADAPTED TO EACH PATIENT

| Days	Morning dose (mL of oral solution)	Evening dose (mL of oral solution)	Total daily dose (mL of oral solution)	THC total daily dose (mg)
1 – 2*	0	0.1	0.1	2.5
3 – 4	0.1	0.1	0.2	5
5 – 6	0.1	0.2	0.3	7.5
7 – 8	0.2	0.2	0.4	10
9 – 10	0.2	0.3	0.5	12.5
11 – 12	0.3	0.3	0.6	15

Titration scheme and practical dosing recommendations

The patient should take the minimum dose that provides effective symptom relief with tolerable side effects.[8] The titration should be conservative, done with increments of 2.5 mg THC every 2 days (or with increments of 1.25 mg THC for fragile patients).[8]

The dosage protocol can be adjusted according to the patient's profile. Increase dose as necessary and as tolerated, up to 15 mg of THC. Daily THC doses exceeding 20–30 mg may elevate the risk of adverse events or lead to the development of tolerance without improving efficacy.[8] Maximum recommended daily THC dose: 40 mg.[8,9]
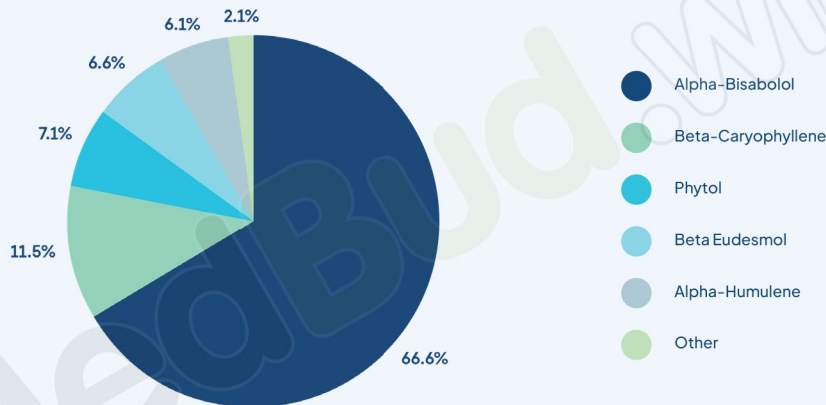
*Ideally, the administration should start with an evening dose to limit adverse events and encourage the development of tolerance.[10]

MINOR CANNABINOIDS PROFILE*,**

34%   22%   20%   11%   4%   9%
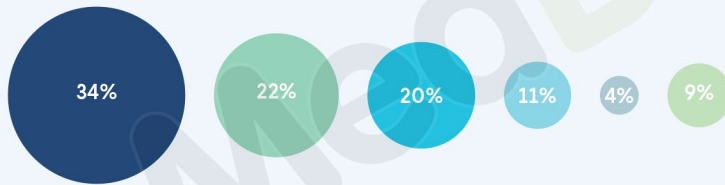
Tests	Minor Cannabinoids Relative Content (%)
CBN	34%
CBG	22%
CBC	20%
CBD	11%
CBCA	4%
Other	9%

TERPENES PROFILE**

2.1%
6.1%
6.6%
7.1%
11.5%
66.6%

- Alpha-Bisabolol
- Beta-Caryophyllene
- Phytol
- Beta Eudesmol
- Alpha-Humulene
- Other

* Relative content of minor cannabinoids is calculated based on the total of minor cannabinoids.

** These percentages are relative and have been determined using high-performance liquid chromatography as part of our quality control process. Please note that they may vary from batch to batch.

1. Razmovski-Naumovski V, Luckett T, Amgarth-Duff I, Agar MR. Efficacy of medicinal cannabis for appetite-related symptoms in people with cancer: A systematic review. Palliat Med. 2022;36(6):912-927. doi: 10.1177/02692163221083437. **2.** Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the prevention and management nausea and vomiting in Australia. January 25, 2024. https://www.tga. gov.au/medicinal-cannabis-guidance-documents **3.** Therapeutic Goods Administration (TGA). "Guidance for the use of medicinal cannabis in the treatment of chronic non-cancer pain in Australia". January 25, 2024. https:// www.tga.gov.au/medicinal-cannabis-guidance-documents. Accessed July 2024. **4.** Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the treatment of chronic non-cancer pain in Australia. January 25, 2024. https://www.tga.gov.au/medicinal-cannabis-guidance-documents. **5.** Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the treatment of multiple sclerosis in Australia. January 25, 2024. https://www.tga.gov.au/medicinal-cannabis-guidance-documents. Accessed July 2022. **6.** Therapeutic Goods Administration (TGA). Guidance for the use of medicinal cannabis in the treatment of palliative care patients in Australia. January 25, 2024. https://www.tga.gov.au/medicinal-cannabis-guidance-documents. Accessed July 2024. **7.** Suraev A, Mills L, Abelev SV, Arkell TR, Lintzeris N, McGregor IS. Medical Cannabis Use Patterns for Sleep Disorders in Australia: Results of the Cross-Sectional CAMS-20 Survey. Nat Sci Sleep. 2023;15:245-255. doi: 10.2147/NSS.S390583. **8.** MacCallum CA, Russo EB. Practical considerations in medical cannabis administration and dosing. European Journal of Internal Medicine. 2018; 49: 12-19. **9.** Larsen C, Shahinas J. Dosage, Efficacy and Safety of Cannabidiol Administration in Adults: A Systematic Review of Human Trials. J Clin Med Res. 2020;12(3):129-141. doi: 10.14740/jocmr4090. **10.** Bhaskar A, Bell A, Boivin M, et al. Consensus recommendations on dosing and administration of medical cannabis to treat chronic pain: results of a modified Delphi process. J Cannabis Res. 2021; 3(1): 22.

For Healthcare Practitioners Only