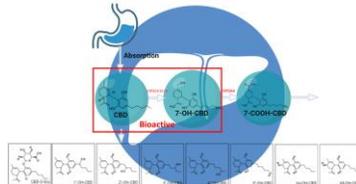


## BACKGROUND

Epidiolex® is the first FDA-approved drug containing purified cannabidiol (CBD) derived from the cannabis plant, approved for the treatment of seizures associated with **Lennox-Gastaut syndrome** and **Dravet syndrome** [1]. Moreover, CBD is a non-psychoactive cannabinoid that is widely used as an **over-the-counter supplement** and can be a component of medical cannabis [2].

The metabolism of CBD in humans has been published previously [3]. After oral administration, CBD is extensively metabolized to its major active metabolite, **7-hydroxy-cannabidiol (7-OH-CBD)**, primarily by the cytochrome P450 enzymes CYP2C19 and CYP2C9 [4,5]. Seven-OH-CBD showed comparable pharmacological activity to the parent compound [5] and is subsequently metabolized to **7-carboxy-cannabidiol (7-COOH-CBD)** by CYP3A4 [6]. Notably, 7-COOH-CBD, an inactive metabolite, reaches plasma concentrations higher than CBD itself (Figure 1) [7].



**Figure 1.** Primary metabolic pathway for CBD in humans.

The understanding of the pharmacology of CBD continues to evolve. Clinically, CBD's primary therapeutic effects include sedation and anticonvulsant properties [8]. Its central nervous system (CNS) activity is largely attributed to its role as a negative allosteric modulator of the type 1 cannabinoid receptor (CB1) [9]. CB1 is predominantly located on GABAergic and glutamatergic neurons in the hippocampus, and functions as a presynaptic receptor [10]. Antagonism of CB1 enhances the release of GABA and glutamate, which increases inhibitory neural activity and leads to psychological sedation [11]. Besides CNS, the CB1 receptor is also distributed in the adrenal cortex [12] and peripheral neurons [13].

Numerous studies have explored the biological role of CB1 in steroid regulation. Research indicates that **CB1 plays a key role in modulating the hypothalamic-pituitary-adrenocortical (HPA) axis**, which primarily governs the regulation of circulating glucocorticoids [14] [12] [15]. Additionally, in vitro studies suggest that CBD may affect both male and female reproductive systems by influencing sex-related steroid hormones [16,17]. However, a comprehensive clinical investigation into the effects of CBD on circulating steroid hormones has yet to be conducted.

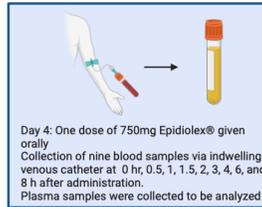
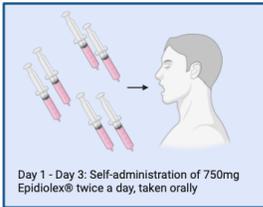


**Figure 2.** Epidiolex®.

## METHODS

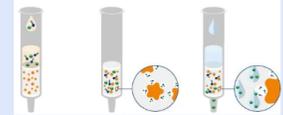
### Study Design and Drug Administration

- The study protocol was approved by the University of Florida Investigational Review Board
- 12 healthy subjects (6 male, 6 female) completed the entire protocol
- CBD was well-tolerated. No significant side effects reported



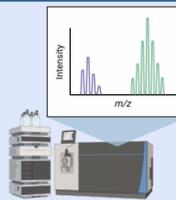
Day 4: One dose of 750mg Epidiolex® given orally  
Collection of nine blood samples via indwelling venous catheter at 0 hr, 0.5, 1, 1.5, 2, 3, 4, 6, and 8 h after administration. Plasma samples were collected to be analyzed

### Bioanalytical Method



- Triple solid supported liquid-liquid extraction using a solution of 1:1 Methyl t-butyl ether:Ethyl acetate
- Dried under nitrogen
- Resuspended in 50:50 Water:Methanol

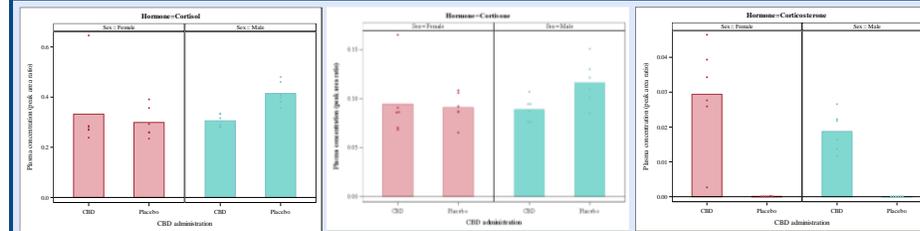
- Gradient method LC-MS/MS  
Mobile phase A: 0.1% formic acid in LC-MS grade water  
Mobile phase B: 0.1% formic acid in LC-MS grade acetonitrile
- Internal standard: tolbutamide



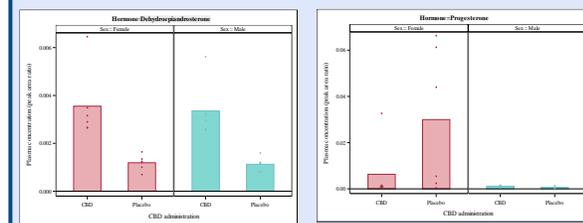
### Statistical analysis

- Statistical Analysis was performed by SAS9
- A t-test was conducted for each hormone with the CBD and placebo groups for male and female subjects
- Each data point represented the average plasma concentration of 9-time points

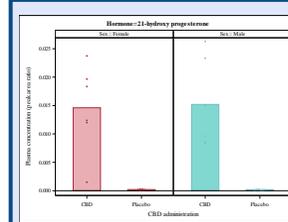
## SELECT RESULTS



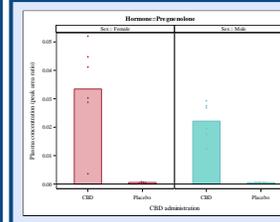
**Figure 3.** Glucocorticoid plasma concentration changes with CBD administration.



**Figure 4.** Sex-related steroid plasma concentration changes with CBD administration.



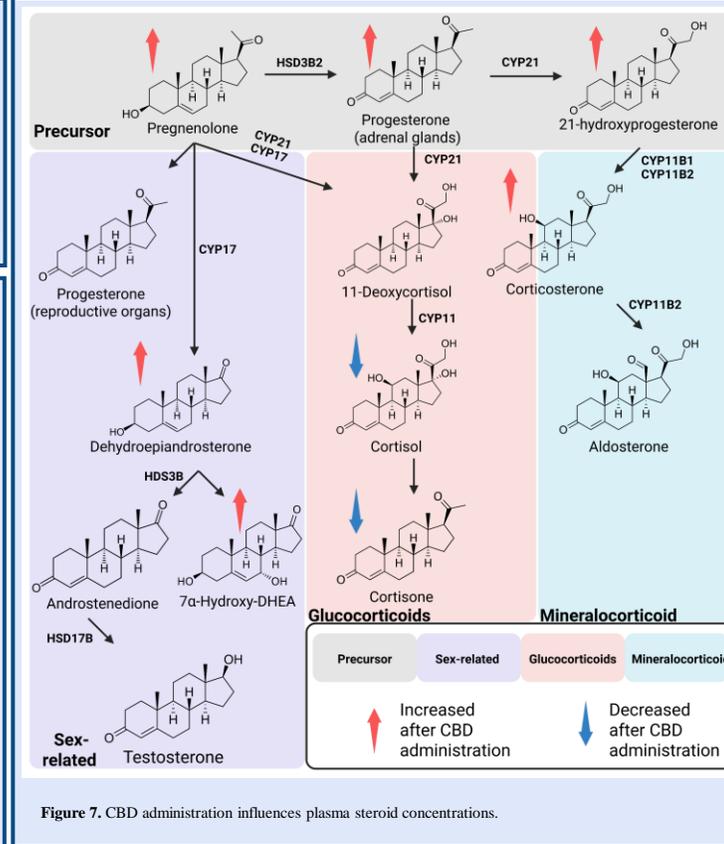
**Figure 5.** Mineralocorticoid plasma concentration changes with CBD administration.



**Figure 6.** Precursor steroid plasma concentration changes with CBD administration.

Type	Hormone	Sex	CBD administration	P-value (CBD vs Placebo)
Glucocorticoids	Corticosterone	Female	CBD	0.0008
		Male	CBD	<.0001
	Cortisol	Female	CBD	0.6359
		Male	CBD	0.0005
	Cortisone	Female	CBD	0.8247
		Male	CBD	0.0288
Mineralocorticoid	21-hydroxyprogesterone	Female	CBD	0.0011
		Male	CBD	0.0009
	Progesterone	Female	CBD	<.0001
Sex-related steroids	Dehydroepiandrosterone	Female	CBD	0.0031
		Male	CBD	0.0009
	Progesterone	Female	CBD	0.1129
		Male	CBD	0.0239
	Androstenedione	Female	CBD	0.0008
		Male	CBD	<.0001
7α-Hydroxy-DHEA	Female	CBD	0.0008	
	Male	CBD	<.0001	

**Table 1.** T-test results for hormone concentrations following CBD administration.



**Figure 7.** CBD administration influences plasma steroid concentrations.

## CONCLUSIONS

- Exposure to short-term high-dose oral CBD was associated with the following steroid hormone changes:
- In males: **Significant decrease in cortisol, cortisone, progesterone**
- In both sexes: **Significant increase in pregnenolone, DHEA, 7α-hydroxy-DHEA, corticosterone, and deoxyprogesterone**
- No significant changes observed in: 11-deoxycortisol, testosterone, androstenedione, or aldosterone
- These changes may be related to the inhibition of CB1 receptors within the HPA axis

## FUTURE DIRECTIONS

- Comprehensive analysis of circulating estrogen levels to explore sex-specific responses
- Validation of findings through replication in a larger population
- In vitro enzyme kinetics studies to assess CBD's impact on key CYP enzymes involved in steroidogenesis
- Mechanistic pharmacology investigations of CBD's influence on steroidogenesis via CB1 receptor activation

## LIMITATIONS

- The sample size was relatively small (n = 12)
- Inter-individual variability in hormone levels, particularly across time and female menstrual cycles, requires further investigation
- Certain hormones, such as estrogens, were not measured due to analytical challenges
- Hormone concentrations were expressed in relative units, preventing direct comparison with established clinical reference ranges

## ACKNOWLEDGEMENTS

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## REFERENCES

