



aruma labs
bringing new life to medicine

Titan

Product Information

THC: 30%
CBD: <1%



Product details

Product Name	Aruma Flower - Titan
Dosage form	Whole dried flower
THC	30% (w/w)
CBD	<1% (w/w)
Prominent Terpenes	Caryophyllene, Limonene, Farnesene
Cultivar	Diamond Mints
Plant type	Indica-dominant hybrid
Cultivation	Indoor
TGA category	Category 5

Product description

Titan is an indica-dominant hybrid bred by the world famous In House Genetics by pairing the Animal Mints and Platinum Kush Mints strains. Prominent terpenes include caryophyllene, limonene, farnesene, and linalool, resulting in a flavour and aroma of earthy spice, sour fruit, mint and vanilla.

This cultivar expresses visual characteristics from both parents, with olive green and purple buds with light ambers pistils and abundant trichomes. Titan is grown indoors in craft, small-batch conditions and is hang dried, hand-trimmed and hand-packed.

Aruma Titan is available as whole dried medicinal cannabis flower for inhalation via a TGA-approved vapouriser.

Indications

Aruma Titan is only available through the Special Access Scheme (SAS) and by Authorised Prescribers (AP) of medicinal cannabis products.

Aruma Titan does not have approved conditions. Use is at the discretion of the prescribing practitioner based on the individual needs of the patient and the evidence for the use of dried cannabis flower with a THC-dominant cannabinoid ratio.

The Therapeutic Goods Administration has approved Special Access Scheme applications including, but not limited to, the following indications¹:

- Anorexia and wasting associated with chronic illness
- Anxiety
- Cachexia
- Chemotherapy-induced nausea and vomiting
- Chronic and/or neuropathic pain
- Insomnia and sleep disorders
- Irritable bowel syndrome
- Palliative care
- Refractory epilepsy
- Post-Traumatic Stress Disorder
- Spasticity in neurological conditions

Dosage and administration

Dosage

Consistent with TGA recommendations and international guidelines, the general approach to dosing should be to 'start low, go slow'².

Individual response to medicinal cannabis may vary and it is important to slowly titrate.

Pharmacokinetic and pharmacodynamic properties in cannabis-naïve patients or those in a palliative care scenario will vary compared to average health adults. Such patients may only require 10-20% of the starting dose of a regular cannabis user to note effects (both positive and negative)³.

In populations who are not naïve to cannabis, dosing advice is to consider tolerance in these patients.

Administration

Aruma Titan is designed to be administered via inhalation using a TGA-approved vapouriser, according to the prescribing doctor's instructions. Smoking of Aruma Flower Titan is not recommended.

Titration

A titration period may be required to reach the optimal dose. Dosing of medicinal cannabis flower is highly individualised, therefore the dosage and timing of dosing will vary between patients.

To minimise the risk of adverse events, the dosage should be increased gradually. Morning doses should be taken at any time between waking and midday. Afternoon/evening doses should be taken at any time between 4 pm and bedtime.

Patients should be advised that it may take several weeks to find the optimal dose and that temporary undesirable effects can occur during this time. Physicians should consider maintaining the current dose, reducing the dose or interrupting, at least temporarily, the treatment depending on the seriousness and intensity of adverse events.

Consider the following example regimen:

Vapourise 0.1g according to a metered dosage schedule or as needed (PNS) according to doctor's recommendation (up to a maximum of 1g per day).

Day	1-2	3-4	5-6	7-8	8-9	9-10	10-11	11-12
Morning (g)	0	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Midday (g)	0	0	0	0.1	0.1	0.1	0.1	0.1
Evening (g)	0.1	0.1	0.1	0.1	0.15	0.15	0.2	0.2

Higher doses of Aruma Titan (exceeding 2-3g/day) may increase the risk of adverse events or induce tolerance without improving efficacy.

¹Therapeutic Goods Administration. 2021. Accessed at <http://sas.tga.gov.au>

²MacCallum, Caroline A., and Ethan B. Russo. 2018. "Practical considerations in medical cannabis administration and dosing." *European Journal of Internal Medicine* 49:12-19



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Safety information

Contraindications³

Aruma Titan is contraindicated in patients who:

- have hypersensitivity to cannabinoids
- have a personal or family history of serious psychiatric disorders (particularly schizophrenia)
- have unstable or severe cardio-pulmonary disease
- are pregnant, planning on becoming pregnant or are breastfeeding

Side effects

Like other medicines, Aruma Titan may cause side effects in some patients. In most cases, they will be minor and temporary.

Mild side effects may include:

- dizziness
- drowsiness or fatigue
- dry mouth
- increased or decreased appetite
- nausea, vomiting, and/or diarrhoea
- vertigo
- euphoria or other cognitive effects
- confusion
- anxiety

Rare side effects that may require medical attention and immediate cessation of Aruma Titan may include:

- hallucinations (auditory and/or visual)
- paranoia
- depression or suicidal thoughts
- difficulty breathing
- seizures or convulsions

Other side effects not listed above may occur in some patients.

Reporting side effects

Reporting suspected adverse reactions is important. It allows continued monitoring of the benefit-risk balance of the medicinal product. Healthcare professionals are asked to report any adverse reactions at www.tga.gov.au/reporting-problems.

Effects on ability to drive and use machinery

Patients should be advised that they are not able to drive while taking medicinal cannabis containing THC, including Aruma Titan as it may cause drowsiness and sedation.

Abuse potential

Patients who have a history of substance abuse may be more prone to abuse of medicinal cannabis products such as Aruma Titan. In patients with a history of addictions or drug seeking behaviour, a risk management strategy such as management of the frequency of dispensing may be advised.

Effects on laboratory tests

Patients should be informed that measurable concentrations of THC can be detected in saliva for many hours after administration and in urine for several days after use.

Pharmacokinetic properties⁴

Absorption

Medicinal cannabis dried flower products consumed via inhalation are more rapidly absorbed than orally ingested medicinal cannabis products. Onset is rapid, with effects generally being felt within 1-15 minutes. Bioavailability of vapourised cannabinoids is high (up to 30-60 per cent). Peak effects generally occur 20-30 minutes after consumption with effects typically lasting between 2-4 hours.

Distribution and excretion

As cannabinoids are highly lipophilic, they are quickly absorbed and distributed into body fat. The resultant concentrations in the blood following inhalation administration are higher than those obtained by orally administering the same dose of THC because absorption is higher and redistribution into fatty tissues is rapid.

THC and CBD may be stored for as long as four weeks in the fatty tissues from which they are slowly released at sub-therapeutic levels back into the blood stream, then metabolised and excreted via the urine and faeces.

THC and its metabolites are excreted through faeces and urine. It may take up to five days for 80 to 90 per cent of the total dose to be excreted.

Pharmaceutical particulars

Nature and contents of container

Each unit of Aruma Titan contains 10g of dried cannabis flower packed in a medical-grade plastic tub with a foil-induction seal, humidity pack, and a tamper-evident cap.

Poison schedule of the medicine

Schedule 8 - Controlled Drug
Possession Without Authority Illegal

Storage instructions

Store below 25°C, away from light and moisture.
Keep out of reach of children

Shelf-life

The shelf-life of Aruma Titan is 12 months.

Sponsor details

Aruma Labs Pty Ltd
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www.arumalabs.com.au

Date of revision

This product information brochure was prepared in February 2024. Version 1.0

³ Queensland Health. "Clinical Guidance: for the use of medicinal cannabis products in Queensland". August 2018

⁴ Huestis MA. Human cannabinoid pharmacokinetics. Chem Biodivers. 2007;4(8):1770-1804. doi:10.1002/cbdv.200790152