Methodology — Medical Marijuana & Chronic Pain (2025)

Publisher: Green Health Docs

Population: U.S. adults living with chronic pain (self-reported)

Sample size (N): 1,450

Fielding: March-August 2025

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Study Overview

This report summarizes findings from an online survey exploring how adults with chronic pain manage symptoms, with a focus on the role of medical cannabis alongside other pain-management strategies. Results are descriptive and intended for journalism, education, and public interest.

Design & Fielding

- **Design:** Cross-sectional, online questionnaire.
- Mode: Self-administered web survey.
- **Survey length:** ~8–12 minutes (median completion).
- **Geography:** United States.
- Language: English.

Eligibility & Recruitment

• Eligibility: 18+ years old; self-report currently living with chronic pain.

- **Recruitment:** Respondents reached via Green Health Docs digital channels (e.g., website and email).
- Incentives: None/nominal; participation was voluntary.
- Consent: Informed consent obtained prior to participation.

Measures

- Pain history: Duration of chronic pain; self-rated severity/impact.
- **Treatment mix:** Use of prescription pain medications, over-the-counter treatments, physical therapy/behavioral approaches, interventional procedures, and medical cannabis.
- Cannabis patterns: Frequency of use, duration of use for pain, perceived effectiveness (0–10 scale).
- Change since starting cannabis: Self-reported changes in prescription pain-medication use (stopped all, stopped some, reduced dose/frequency, no change).
- **Quality of life:** Self-reported improvement level since using cannabis (significant, moderate, little/none).
- **Sustainability:** Whether cannabis is viewed as a sustainable long-term option for pain management.

Key Definitions

- **Daily use:** Respondent selected "Daily" for cannabis use frequency.
- Perceived effectiveness (8–10/10): Share rating cannabis 8, 9, or 10 on a 0–10 relief scale.
- Opioid-sparing indicators: Aggregated categories of stopped all, stopped some, or reduced dose/frequency of prescription pain meds after starting cannabis.

• **Improvement levels:** Self-reported **significant**, **moderate**, or **little/none** improvement in pain symptoms.

Data Quality & Cleaning

- **Device/duplicate checks:** One response per device/session; removal of obvious duplicates.
- **Speeding/straight-lining:** Excluded completes with unrealistically fast times or invariant/illogical response patterns.
- **Logic checks:** Internal consistency checks across related items (e.g., frequency vs. duration).

Weighting & Analysis

- **Weighting:** Post-stratification by **age**, **sex**, **and region** to approximate national distributions of U.S. adults.
- **Estimation:** Percentages rounded to one decimal where applicable; totals may not sum to 100 due to rounding or item non-response.
- **Breakouts:** National-level results are primary; subgroup comparisons (e.g., age 65+) are reported where sample size is sufficient.
- **Uncertainty:** As a nonprobability, opt-in survey, traditional margins of error do not apply; results should be interpreted as descriptive of the sample.

Handling Missing Data

- Item non-response: Percentages are calculated on valid responses per question.
- **Derived categories:** Some "remainder" values are computed from stated categories (noted in captions/footnotes where used).

Limitations

- Self-report: Measures reflect respondent perceptions and recall.
- **Selection:** Opt-in sample recruited via Green Health Docs channels; results may not generalize to all adults with chronic pain.
- **Dose/formulation heterogeneity:** Cannabis products and dosing vary; the survey does not standardize product type or potency.
- Causality: Cross-sectional design does not establish causal relationships (e.g., between cannabis use and medication changes).

Ethics & Privacy

- **Ethics:** The survey followed standard ethical practices for minimal-risk research; no personally identifiable information (PII) was published.
- **Privacy:** Responses were collected and stored securely; reporting is at aggregate levels only.

Data Availability & Attribution

- **Data access:** De-identified slices/crosstabs may be shared for bona fide reporting upon request; raw datasets are not public.
- **Preferred citation:** "Green Health Docs, Medical Marijuana & Chronic Pain 2025 patient survey (N=1,450)."
- Media/technical contact: tyler@greenhealthdocs.com

Version History

• v1 (Oct 21, 2025): Initial public summary aligned with press materials.