Yes. In the UK, a cannabis-based medicine can be prescribed for some people with multiple sclerosis (MS) whose spasticity has not responded adequately to other treatments. The best-known option is nabiximols, sold as *Sativex*, a mouth spray containing THC and CBD.

That does not mean cannabis is routinely prescribed for MS, that every patient will qualify, or that cannabis products are "fully legal" in every circumstance. The rules depend on what you mean by *legal*: having a valid prescription, possessing a controlled medicine, supplying it, or importing it are different matters.

This guide explains what changed in 2018, how NHS and private access differ, and what to check before contacting a clinic. It is general information, not individual medical or legal advice.

Quick answer: cannabis treatment for MS spasticity in the UK

- **A licensed option exists:** nabiximols (Sativex) is a THC:CBD mouth spray for MS-related spasticity.
- **NICE guidance sets a threshold:** a specialist may offer a four-week trial when moderate-to-severe spasticity has not responded adequately to other treatments. Treatment should continue only if there is a meaningful improvement.
- **Prescribing is specialist-led:** cannabis-based medicinal products are not something a patient can obtain by self-prescribing or asking a GP to start.
- **NHS availability can vary:** whether treatment is offered depends on clinical assessment and local NHS pathways.
- **Private treatment is not automatic:** a clinic still needs to assess suitability, and costs and follow-up arrangements matter.

What did the UK change in 2018?

On 1 November 2018, the UK changed the classification of certain cannabis-based products for medicinal use. The change allowed a specialist doctor to prescribe a qualifying product in circumstances set out in the regulations. It followed public attention to children with severe epilepsy who had been unable to access cannabis-based medicines through ordinary routes.

The change did *not* legalise recreational cannabis, make all cannabis products medicines, or give patients a general right to buy or possess cannabis. Cannabis remains a controlled drug. A prescription must meet the relevant rules, and the product and its supply must come through lawful channels.



In practice, there is an important distinction between:

- **A licensed medicine:** a product authorised by the Medicines and Healthcare products Regulatory Agency (MHRA) for specified uses, such as Sativex for MS spasticity.
- **An unlicensed cannabis-based medicinal product:** a product without a UK marketing authorisation for that use. A specialist doctor may consider prescribing one when the legal and clinical requirements are met, but it is not a routine alternative to licensed treatment.

The 2018 change created a legal route for specialist prescribing; it did not create a standard NHS pathway for every condition or guarantee that a particular product would be funded.

Which cannabis spray is used for MS in the UK?

Sativex, or nabiximols, is a mouth spray containing THC and CBD. It is used for MS-related spasticity: muscle stiffness, tightness, or spasms that can affect movement, comfort, sleep, and daily activities. It is a spray applied inside the mouth, not a product intended to be smoked or vaped.

NICE technology appraisal TA254 advises clinicians to consider nabiximols for adults with moderate-to-severe MS spasticity when other drug treatments have not provided adequate relief. The recommendation includes a time-limited trial. After four weeks, treatment should be stopped if the person has not experienced at least a 20% reduction in spasticity symptoms on the relevant assessment.

That trial requirement matters. “Cannabis spray MS UK” searches may bring up clinics or product pages, but suitability is determined by a clinician, not by a search result or a symptom description alone. The prescriber will consider previous treatments, other medicines, medical history, potential side effects, and the likely benefits for that individual.

Does everyone with MS spasticity qualify?

No. MS spasticity varies, and a cannabis-based medicine may not be appropriate for everyone. A clinician may discuss possible effects such as dizziness, sleepiness, impaired concentration, or other adverse reactions. THC-containing medicines can also affect driving and day-to-day activities. Patients should ask their prescriber about the product information, safety precautions, and how to report side effects.

It is also worth separating symptom treatment from disease treatment: Sativex is used to manage spasticity symptoms. It is not a cure for MS and should not be presented as a treatment that changes the underlying course theukrules.co.uk of the disease.

Who can prescribe cannabis for MS spasticity?

For a cannabis-based product prescribed under the 2018 framework, the decision must be made by an appropriately qualified specialist doctor on the General Medical Council (GMC) Specialist Register. The GMC maintains that register; patients can use its online medical register to check a doctor's registration and specialist status.

A GP cannot independently start a cannabis-based medicinal product prescription under this specialist-only route. A GP may be involved in a patient's wider care or receive information from a specialist, but patients should not assume that a GP can initiate treatment simply because they already manage their MS medicines.

When checking a service offering **specialist neurology cannabis** care, use a short checklist:

1. Ask who will assess you and check the doctor's status on the GMC register.
2. Ask whether the proposed product is licensed for your condition or is an unlicensed product.
3. Ask what treatments and records the clinician needs to review before deciding.
4. Get clear information on follow-up, side effects, and what happens if treatment does not help.
5. Confirm the full costs and whether prescriptions, medicine, consultations, and reviews are charged separately.

NHS versus private access

NHS access

NHS access is possible, but it is not universal or necessarily straightforward. Sativex has a defined place in NICE guidance for a suitable trial, yet actual access depends on clinical assessment and how care is organised locally. Patients can ask their MS neurologist or MS team whether they meet the criteria and what the local pathway is.

If the answer is no, ask for the reason: for example, whether other treatments need to be tried first, whether the NICE threshold is not met, or whether the service needs more clinical information. A patient's GP may help coordinate records or refer back to a specialist, but should not be expected to begin the specialist-only prescription themselves.

Private access

Private clinics may offer consultations about cannabis-based medicines, including for MS symptoms. A private appointment does not guarantee a prescription. The doctor still has to decide that prescribing is clinically appropriate and lawful, and an unlicensed product should not be treated as interchangeable with a licensed medicine.

You know what's funny? before paying, check whether the quoted price includes only the consultation or also the medicine, dispensing, and follow-up. Ask how often reviews are expected and what happens if you have side effects or the treatment is ineffective. Companies such as Releaf may appear in searches for private medical cannabis services; assess any provider by checking its clinicians, prescribing process, fees, and aftercare rather than relying on marketing claims.

Review platforms can help you understand what other customers say about their experience, but they cannot confirm that a treatment is clinically appropriate or that a particular service is the right choice. Trustpilot is one source of customer reviews. Similarly, SimilarWeb can give a broad indication of website traffic and audience patterns; it is not a regulator and does not verify clinical quality. Look for the limits of any review or traffic data, and compare it with information from named regulators and the clinic itself.

What remains illegal or restricted?

The 2018 rescheduling did not remove the wider controls on cannabis. In general terms:



- **Recreational use:** cannabis possession and supply remain controlled under UK drug laws. A medical prescription is not permission to use recreational cannabis.
- **Possession without lawful authority:** a person should not assume that buying a product online or describing it as “medical” makes possession lawful. The prescription and supply must be valid under the applicable rules.
- **Self-prescribing:** patients cannot prescribe controlled medicines to themselves. The specialist doctor must make the clinical decision and issue any prescription through a lawful route.
- **Importing:** a prescription does not automatically give a patient permission to import cannabis or cannabis products from another country. Controlled-drug import rules apply; check with the relevant authorities before attempting to bring a product into the UK.
- **Smoking:** smoking cannabis is not the same as using a prescribed mouth spray or another prescribed formulation. Do not assume a prescription authorises smoking a product.

Rules can depend on the exact product and circumstances. For a specific question about possession, travel, importation, or a dispute with a supplier, get advice from an appropriate regulator or legal professional. Irwin Mitchell solicitors, for example, may be one legal-services provider people encounter when searching for advice, but patients should confirm that the firm or adviser handles the particular issue they need help with.

How to prepare for a specialist appointment

A little preparation can make a consultation more useful. Consider bringing:

- a list of current and previous treatments for spasticity, including whether they helped;
- your main symptoms and how they affect sleep, mobility, comfort, or daily activities;
- details of other medicines and any relevant side effects or health conditions;
- questions about the four-week trial, how improvement will be measured, and when to stop or review treatment;
- questions about driving, work, costs, and follow-up.

If you are already under an MS team, ask them how to discuss the NICE criteria and whether a specialist assessment is appropriate. If considering a private clinic, use the same clinical questions and verify the prescriber rather than treating a private route as a shortcut around medical assessment.

Bottom line

The UK does prescribe a cannabis-based medicine for some people with MS spasticity. Nabiximols (Sativex) is a licensed mouth spray, and NICE recommends a four-week trial for eligible adults when other treatments have not adequately controlled moderate-to-severe symptoms, with continuation dependent on benefit.

The 2018 change made specialist prescribing of qualifying cannabis-based medicinal products possible; it did not legalise recreational cannabis or remove restrictions on possession, supply, self-prescribing, and importing. NHS access is shaped by clinical criteria and local pathways, while private access still requires a proper specialist assessment and clear information about costs and follow-up.

In short: ask an MS specialist about eligibility, verify any prescriber on the GMC register, and distinguish a lawful prescription from other forms of cannabis use or supply.