144 Known Cannabinoids

144 Keys that mimic our 150 endogenous cannibinoid keys

Strains

Each strain is a different treatment, as unique as a fingerprint.

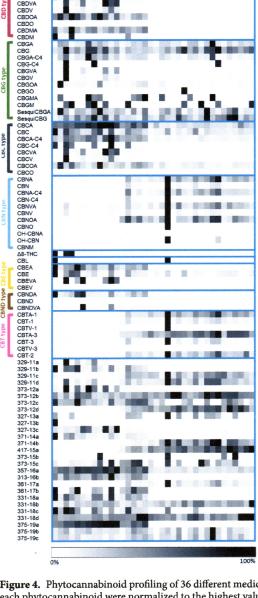


Figure 4. Phytocannabinoid profiling of 36 different medical *Cannabis* strains. The LC/MS concentrations of each phytocannabinoid were normalized to the highest value and compared per phytocannabinoid in a heat map. Strains were arranged according to increasing Δ^9 -THCA content (first line) and phytocannabinoids by subclasses.

Discussion

Cannabis's value and potential is changing all over the world. Patients, physicians, and governmental bodies are giving increased attention to medical Cannabis. In the past ten years, there has been a rapid growth in the discovery and use of Cannabis-based extracts for various therapeutic and medical purposes. The number of people worldwide that are currently using physician-prescribed medical Cannabis is estimated at a few millions⁴⁷. According to the ProCon organization, in the U.S. alone, as of 2018, this number was over 2.1 million patients⁴⁷.

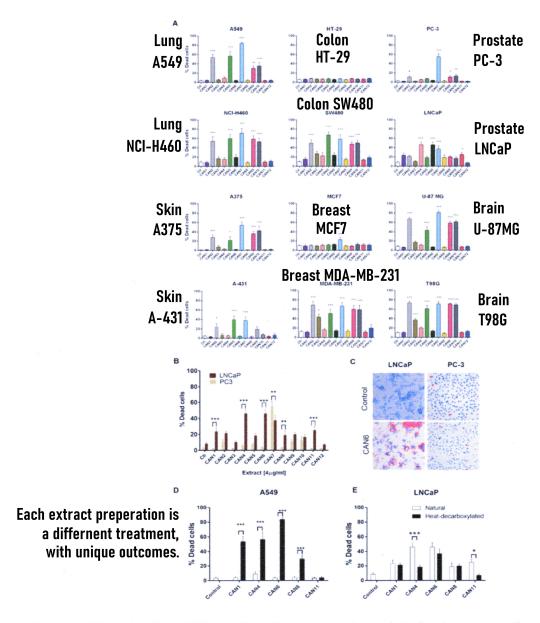


Figure 3: Differential effect of different Cannabis extracts on the survival of various cancer cells. Cancer cell lines of various tumor origins were treated with 4 µg/ml of 12 different Cannabis extracts for 24 h. Data are reported as mean \pm SE of % dead cells out of total cells (N=7). (A) The effect of different Cannabis extracts on cell lines A549, NCI-H460, A375, A-431, SW480, HT-29, MCF7, MDA-MB-231, LNCaP, PC-3, U-87 MG and T98G. Asterisks represent statistically significant differences compared to control *P < 0.05, **P < 0.0005; one-way ANOVA). (B) A comparison between the effect of Cannabis extracts on PC-3 and LNCaP prostate carcinoma cell lines. Asterisks indicate statistically significant differences between LNCaP and PC-3 cell lines (*P < 0.05, **P < 0.005; *P < 0.0005; two-way ANOVA with Bonferroni's post hoc multiple comparisons test) (C) Representative fluorescent images overlaid onto transmitted light images of LNCaP and PC-3 prostate cancer cells treated with or without (control) 4 µg/ml of CAN6 (blue-Hoechst- all cells, red- PI- dead cells). (D-E) A comparison between the effect of neutral (white columns) and heat-decarboxylated (black columns) phytocannabinoid contents of Cannabis extracts on A549 and LNCaP cells. Asterisks indicate statistically significant differences between extracts (*P < 0.05, **P < 0.005, ***P < 0.0005; two-way ANOVA with Bonferroni's post hoc multiple comparisons test).

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Chamber Of Cannabis Member

Jason Greninger CEO Atlas Alchemy LLC (702) 401-8620

https://journals.physiology.org/doi/pdf/10.1152/physrev.00002.2016

↑ PhysRev link to an amalgam of hundreds of peer reviewed experiments and data on your Endogenous Cannabinoid System (ECS) and cannabis.

PhysRev is a global source for peer reviewed data.

Copyrights Figure 4:

Sci Rep. 2018; 8: 14280.

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PMCID: PMC6155167 PMID: 30250104

A new ESI-LC/MS approach for comprehensive metabolic profiling of phytocannabinoids in **Cannabis**

Paula Berman, ¹ Kate Futoran, ¹ Gil M. Lewitus, ¹ Dzmitry Mukha, ¹ Maya Benami, ¹ Tomer Shlomi, 1,2 and David Meiri⊠1

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Link to document at NIH: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6155167/

Figure 3:

Oncotarget. 2019 Jun 25; 10(41): 4091–4106.

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PMCID: PMC6609248 PMID: 31289609

The heterogeneity and complexity of *Cannabis* extracts as antitumor agents

<u>Liran Baram, ¹ Ella Peled, ¹ Paula Berman, ¹ Ben Yellin, ¹ Elazar Besser, ¹ Maya Benami, ¹ Igal</u> Louria-Hayon, 1 Gil M. Lewitus, 1 and David Meiri 1

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Link to document at NIH: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6609248/

Good day namaste,

For the Record: Jason Greninger CEO of Atlas Alchemy & The KEY - Atlas Alchemy.com & CBDTheKey.com

Peer a reviewed exhibit with a link to an amalgam of hundred of experiments and data on our endogenous cannabinoid system & cannabis. In summary:

We humans have an endogenous cannabinoid system ECS that makes 150 endogenous cannabinoid keys. Your body uses these key to manage equilibrium throughout your body including diet, sleep, stress, pain, anxiety, sugar, and more.

All **your** cells membranes have up to **37** types of receptors for these cannabinoid keys. Many have heard of CB1 or CB2 receptor in school; that C stands for cannabinoid.

These keys are considered retroactive neurotransmitters, which means they create change in the nucleus of outward. We make our own endogenous THC, it is call Anadamide – ananda means bliss.

Cannabis makes **144** known phyto-cannabinoids; they are true mimics of our endogenous keys. Only 7 plants are known to make cannabinoids and most very few.

Whereas we have much to learn about this plant, we have clear indicators for medical need. It is important in our discussion to remind ourselves of why this conversation was started. Discoveries like Charlotte's Web, our endogenous cannabinoid system, and the data here.

...

Whereas our population, *our loved ones,* are making greater use of these whole plant products, and not only are they needed to manage symptoms of their specific illness, they also help manage the anxiety and stress related to their care needs. It is unfair to take that away from our loved ones, and *from ourselves,* when we transition to this care, ... when we need it most.

Whereas Schedule III will criminalize whole plant medicine. All that are not getting pharmaoids through a provider. Pharma does not use always use plants, they use bacteria and and fungi to grow cannabinoids. Epidolex has side effects and I know some that have used synthetic compounds have expressed poor results. Only whole plant medicine has been proven.

Thank you for your time and consideration.

I am happy to answer any questions you might have on our endogenous cannabinoid system, our receptors and the cannabinoid processes, or any other medical questions.

Setting the world standard for cannabinoid and herbal healing by qualifying and quantifying treatments with the latest technology and research.

S.A.M. Unique Entity ID: RZWJMRL7CRE3

namaste

Jason Greninger CEO 702-401-8620 AtlasAlchemy.com | CBDTheKEY.com

