Supplementary Text

Clinical Assessment

The clinical profile sheet was specially devised for the purpose of study and was used to record age of initiation, frequency, duration and type of cannabis use. Edinburgh handedness inventory (EHI) is a self-rated questionnaire with dichotomous responses to an inventory of 10 items of everyday habit which allow for distinction in laterality. Mini International Neuropsychiatric Interview (M.I.N.I.) is a brief structured interview for diagnosis of psychiatric disorders in both DSM-IV and ICD-10 classifications. Psychiatric Research Interview for Substance and Mental Disorders (PRISM) is a semi-structured interview schedule for assessing psychiatric disorders that are commonly co-occurring with substance use disorders. It has a specific purpose of differentiating between expected effects of intoxication and withdrawal, substance-induced disorders and independent or primary disorders in patients using substances. It follows the DSM-IV criteria to assess for present and lifetime diagnosis. For the purpose of our study, we used PRISM section 8 (a,b,c) specific to psychotic disorders for differentiating between cannabis induced psychosis and schizophrenia with cannabis use. PANSS is a scale for rating of positive and negative symptoms based on severity and global psychopathology in schizophrenia. The Positive and Negative Syndrome scale (PANSS) evaluation for the current study was specific to assessing remission and included the 8 items recommended by the Working Group for study of Remission in Schizophrenia. When presenting with a severity score of mild or less i.e., ≤ 3 for a period of 6 months or more signify remission.

Image acquisition-

Images were acquired using a body coil for transmission and a standard quadrature coil for reception. In addition to the diffusion data, T2 axial, T2 Flair axial, 3D T1 magnetization prepared rapid gradient-echo/ spoiled gradient recalled echo (MPRAGE/SPGR) and susceptibility weighted sequences (SWI/SWAN) images were acquired and used for clinical

evaluation of gross brain abnormalities in each subject. A comfortable padding for holding the head was used to prevent motion and reduce noise during imaging.

<u>Diffusion imaging</u>-Full brain DKI sequences were acquired with a diffusion sensitized dual spin echo prepared echo-planar imaging (SE-EPI) sequence. To increase the image registration fidelity, facilitate white–grey matter classification, and enhance the specificity of region-ofinterest analysis T2-weighted images were acquired from the same location as DKI. Diffusion kurtosis images were acquired using the following diffusion sequence: "TE=77 ms, TR=5800 ms, matrix = 128×128 , field of view = 256×256 mm, in-plane resolution = 2×2 mm, slice thickness= 3 mm without gap, 48 axial slices, 25 encoding diffusion directions with two values of b (b = 1000 and 2000 s/mm2) for each direction and 10 non-diffusion weighted images (b = 0 s/mm2)". Anatomical T1w data was acquired using a MPRAGE sequence. DTI sequences were also acquired using the same scanner with appropriate pre-set sequences.

MRI data processing-

The segmentation process began with automated stripping of the skull from the images, inhomogeneity filtering of the spin-echo images, and co-registration of the spin-echo data set to the T1-weighted images. In the next step, the software chose specific samples of grey matter, white matter, and CSF and assigns all of the voxels in the brain to these three tissue categories. Volumetric and, DKI and DTI data set post-processing was done offline i.e., at our computer system and online i.e. by sending images to laboratory at University of Miami using diffusion kurtosis estimator (DKE) software version 2.6. The steps of data post-processing included inhomogeneity filtering, motion correction, de-noising, and co-registration with Johns Hopkins University- Montreal Neurological Institute Maps (JHU-MNI) i.e., JHU-T1w-MNI and JHU-DTI-MNI. The software processed the images to give voxel wise distribution of the whole brain. The pre-defined ROIs were automatically identified through co-registration with the JHU-MNI maps. The numbers of voxels assigned to the ROIs were used to calculate the volumes of those ROIs as well as to assess the diffusion metrics in each voxel.

MRI data metrics-

Diffusion imaging metrics-

The standard diffusion metrics derived through post-processing with the DKE are: Axial diffusivity (AD), Radial diffusivity (RD), Mean diffusivity (MD), Fractional Anisotropy (FA), Axial kurtosis (AK), Radial kurtosis (RK), and Mean kurtosis (MK). As per the study protocol, MD and FA for diffusion tensors and MK and KFA for Kurtosis were included in analysis. The diffusion metrics for a specific ROI were calculated on the basis of number of voxels assigned to it and presented as the number of voxels assigned, diffusion metric according to the hemisphere of brain i.e., left or right, range i.e., minimum and maximum diffusivity among the voxels allotted to a ROI, mean diffusivity of voxels allotted to the ROI and standard deviation of diffusivity of the voxels allotted to the ROI.

Volumetric imaging metrics-

Brain structures for volumetric analysis including grey matter (GM) ROIs and lateral ventricles were selected for comparison between the study groups. In addition, whole brain volume was calculated for comparison as well to serve as a covariate in comparison of individual GM ROIs between the study groups. These brain structures were selected on the basis of a meta-analysis of over 18,000 subjects from various morphometric studies in patients of schizophrenia. Data post-processing and co-registration with JHU-MNI T1w maps was done for each subject and volumes of GM ROIs were calculated from the output.

Supplementary Table 1 Socio-demographic profile of the study groups- Cannabis induced psychosis group (*CIP*), Schizophrenia with cannabis use (SZC) and Control group (CG)

Socio- demographic variable	<i>CIP</i> (n=20)	SZC(n=20)	CG (n=20)	Fischer's exact	p value
Marital status					
Single	16	14	7	12.622	0 000**
Married	3	5	13		0.006**
Divorced	1	1	0		
Occupation					
Unemployed	5	10	0	28.259	
Clerical/shop/farm	1	2	1		<.001***
Skilled worker	4	3	4		
Semi-skilled worker	6	3	10	-	
Student	4	0	1		
Semi-professional	0	2	0		
Professional	0	0	4		
Monthly income					
Nil	5	10	0	32.358	- 004***
1351-3999	3	1	0		<.001***
4000-6499	2	4	0		
6500-9999	7	1	1		
10000-12999	0	3	3		
13000-26499	0	0	10		
26500 and above	3	1	6		
Religion					
Hindu	16	16	19	2.450	000
Non-Hindu	4	4	1		.360
Type of family					
Nuclear	12	13	14	.491	0.10
Extended/Joint	8	7	6		.942
Locality					
Urban	9	14	18	9.314	.011**
Rural	11	6	2		.011

-Significant; *-Highly significant

Supplementary Table 2a Comparison of grey matter volume patients with cannabis induced psychosis group (*CIP*), Schizophrenia with cannabis use (SZC) and control group (CG)

Brain	PRIS	Volume (n	nm³)		ANOV	GLM	
structure	М			Α	F (p		
	group			Range		F (p	value)
	N= 20	Mean	Std.	Minimu	Maximu	value)	Post-Hoc
	in		Dev.	m	m	Post-	Bonferro
	each					Нос	ni
	group					Tukey	
Whole brain	CIP	1219770.	100024.	998189.3	1428032.	0.440	
		2	1		6	(0.646)	
	SZC	1190196.		1046683.	1359814.	-	
		3	85321.1	7	8		
	CG	1204111.	112205.	1035365.	1420463.	-	
		2	9	4	7		
Lateral	CIP	7178.5	3099.9	1687.5	13687.5	0.833	0.932
ventricle	SZC	6686.2	2444.6	3562.1	13115.8	(0.440)	(0.400)
Left	CG	6099.1	2333.7	2677.1	10801.6	-	
Lateral	CIP	6941.0	1984.1	3688.5	10087.1	2.908	3.060
ventricle	SZC	5825.1	2265.0	2704.5	11351.3	(0.063)	(0.055)
Right	CG					CIP>C	CIP>CG
		5282.6	2384.6	1594.1	10812.6	G	(0.05)
		5262.0	2304.0	1394.1	10012.0	(0.055)	
Hippocamp	CIP	3219.6	492.2	2402.2	4221.6	1.986	2.268
us Left	SZC	3113.5	455.2	2490.5	3897.4	(0.147)	(0.113)
	CG	2898.8	597.6	1967.6	4221.6		、 /
Hippocamp	CIP	3138.2	697.3	2226.2	5145.8	2.212	2.118
us Right	SZC	2925.5	649.5	2028.3	4502.4	(0.119)	(0.130)
	CG	2898.6	597.3	2619.2	3178.5	()	(0.1.00)
Amygdala	CIP	1650.7	472.2	1082.9	2830.9	0.586	0.391
Left	SZC	1502.5	427.1	885.0	2578.0	(0.560)	(0.678)
	CG	1553.4	422.6	841.1	2501.1	(0.000)	(0.0.0)
		1000.4	722.0	0 - 1.1	2001.1		

Amygdala	CIP	1699.1	567.7	1055.4	3226.7	1.014	0.844
Right	SZC	1491.1	349.7	747.5	2253.7	(0.369)	(0.436)
	CG	1554.1	478.3	824.5	2589.1		
Fusiform	CIP	16481.6	1779.7	12654.0	20410.3	0.559	0.348
Gyrus Left	SZC	15921.2	1573.1	13517.1	18425.9	(0.575)	(0.707)
	CG	16516.5	2516.9	13115.8	23444.7	1	
Fusiform	CIP	16939.2	2473.4	12252.8	22169.4	0.456	0.228
Gyrus Right	SZC	16156.5	2434.1	12983.9	20641.2	(0.636)	(0.797)
	CG	16865.6	3540.5	12549.6	23257.8	1	
Superior	CIP	10359.1	1684.2	6750.3	13000.4	1.293	2.946
Temporal	SZC	11300.7	2369.4	8437.9	17326.5	(0.296)	(0.061)
Gyrus Left	CG	10693.3	1597.1	8828.1	14297.7	1	
Superior	CIP	13110.3	1696.9	11329.3	17117.6	2.274	1.932
Temporal	SZC	11973.2	1924.9	9037.1	18332.5	(0.112)	(0.154)
Gyrus	CG	12091.7	1930.4	9779.1	16952.7	1	
Right		12091.7	1930.4	5119.1	10932.7		

PRISM- Psychiatric research interview for substance use and mental disorders; **ANOVA**-Analysis of variance; **GLM-** General linear modelling; * p<0.05 (after Bonferroni test)

Supplementary Table 2b Comparison of grey matter volumes among patients with cannabis induced psychosis group (*CIP*), Schizophrenia with cannabis use (SZC) and control group (CG)

Brain	PRISM	Volume	(mm³)	ANOVA	GLM		
structure	group		0.1	Dener		F (p	F (p value)
	N= 20	Mean	Std.	Range			Post-Hoc
	in		Dev.	Minimum	Maximum	Post-	Bonferroni
	each					Нос	
	group					Tukey	
SFG PFC	CIP	22086.6	3698.6	15259.6	28864.7	0.181	0.353
Left	SZC	21797.8	4185.1	15023.3	32201.4	(0.835)	(0.704)
	CG	21375.9	3337.8	16210.6	28584.4		
SFG PFC	CIP	21293.1	4255.4	14418.6	29562.8	0.190	0.148
Right	SZC	20628.0	4005.8	14286.7	30310.4	(0.827)	(0.863)
	CG	20629.1	3505.1	14594.5	27177.1		
SFG	CIP	6397.1	1415.1	4721.9	10625.7	3.346	3.041
Frontal	SZC	5592.3	1651.6	3094.8	9696.7	(0.042)	(0.056)
Pole Left	CG	5321.9	937.2	2479.1	7311.1		
SFG	CIP	6755.2	1504.6	4315.1	10977.5	1.790	1.513
Frontal	SZC	6010.6	1863.4	2116.3	9322.9	(0.176)	(0.229)
Pole	CG	5898.2	1238.9	2649.5	8382.9		
Right		5050.2	1230.9	2049.0	0002.9		
SFG Post	CIP	19633.1	3138.5	11323.8	24857.4	0.109	0.865
Segment	SZC	20034.1	3629.4	16128.2	29573.8	(0.897)	(0.427)
Left	CG	20068.7	3054.1	14616.5	24351.7		
SFG Post	CIP	22225.4	3910.1	12632.1	28969.1	0.254	0.036
Segment	SZC	21377.2	4006.6	16727.3	33707.6	(0.777)	(0.965)
Right	CG	21658.4	3582.8	15930.3	26896.8		
Insula	CIP	5107.2	750.4	4089.7	7239.5	0.818	0.618
Left	SZC	4844.2	856.7	3836.9	6700.8	(0.447)	(0.543)
	CG	4798.3	861.5	3254.2	6398.5		
Insula	CIP	4494.8	1077.6	2979.3	7415.4	1.039	0.852
Right	SZC	4155.7	959.1	3149.7	6728.3	(0.360)	(0.432)
	CG	4086.4	822.9	2852.9	5497.1		

Post	CIP	5685.8	924.3	4007.3	8223.5	1.714	0.019
Cingulate	SZC	5575.1	996.1	4128.2	7706.5	(0.189)	(0.981)
Left	CG	5685.8	1429.9	3831.5	8861.6		
Post	CIP	7292.8	1417.2	5678.6	12159.3	0.146	0.517
Cingulate	SZC	7287.5	975.5	5711.3	9795.6	(0.865)	(0.599)
Right	CG	7598.5	1487.8	5255.1	9971.4		
MFG	CIP	18757.1	3348.1	9311.9	23796.5	0.523	1.283
DPFC	SZC	16939.3	2610.8	12170.3	20811.6	(0.595)	(0.285)
Left	CG	17584.3	3419.9	11114.9	23829.5		
MFG	CIP	19676.5	4237.2	10829.1	29364.9	2.726	2.956
DPFC	SZC	18105.1	4389.4	7778.2	25709.4	(0.074)	(0.060)
Right	CG	16760.1	3110.2	9515.3	23081.9		

SFG- Superior frontal gyrus; **MFG-** Middle frontal gyrus; **PFC-** Pre frontal cortex; **DPFC-** Dorsal pre frontal cortex; **PRISM-** Psychiatric research interview for substance use and mental disorders; **ANOVA-** Analysis of variance; **GLM-** General linear modelling; * p<0.05 (after Bonferroni test)

Supplementary Table 2c Comparison of grey matter volumes among patients with cannabis induced psychosis group (*CIP*), Schizophrenia with cannabis use (SZC) and control group (CG)

Brain	PRIS	Volume			ANOV	GLM	
structure	М			Range		Α	F (p value)
	group	Mean	Std.			F (p	Post-Hoc
	N= 20		Dev.	Minimu	Maximu	value)	Bonferron
	in			m	m	Post-	i
	each					Нос	
	group					Tukey	
MFG Post	CIP	17053.	3103.	8108.1	21405.3	0.146	0.453
Segment		6	9	•••••		(0.865)	(0.638)
Left	SZC	17142.	3510.	12643.1	23686.5		
		9	8	1201011	20000.0		
	CG	16624.	3119.	11818.5	24676.1		
		1	5	11010.0	21070.1		
MFG Post	CIP	16294.	3540.	12126.3	27567.4	0.253	0.340
Segment		2	2	12120.0	21001.1	(0.595)	(0.713)
Right	SZC	15484.	3668.	10350.8	23758.1		
		2	2	10000.0	20100.1		
	CG	15281.	2638.	11301.8	22075.9		
		1	4	11001.0	22010.0		
IFG Pars	CIP	5666.5	1339.	2402.1	8064.1	0.221	0.421
Opercularis		0000.0	9	2102.1	0001.1	(0.803)	(0.658)
Left	SZC	5695.9	1464.	3204.7	8289.4		
		0000.0	4	0204.1	0200.4		
	CG	5437.1	1232.	2913.4	7294.5		
			9	2010.4	1201.0		
IFG Pars	CIP	5698.4	1099.	3891.8	7602.3	0.231	0.128
Opercularis		5000.1	7		1002.0	(0.795)	(0.880)
Right	SZC	5505.5	1245.	2677.1	8982.1		
		0000.0	9	2011.1	0002.1		
	CG	5485.1	917.7	3364.1	7272.5		

IFG Pars Orbitalis	CIP	7367.1	3014. 1	5134.2	180d63.1	0.986 (0.379)	1.075 (0.348)
Left	SZC	7251.9	2164. 9	4738.4	12747.5		
	CG	6418.8	1590. 1	4221.7	9993.5		
IFG Pars Triangulari	CIP	7136.7	1635. 7	3908.3	9762.6	0.891 (0.416)	1.018 (0.368)
s Left	SZC	6975.6	1544. 8	4452.5	9251.4		
	CG	6517.7	1371. 4	4727.4	9130.5		

IFG- Inferior frontal gyrus; **PRISM-** Psychiatric research interview for substance use and mental disorders; **ANOVA-** Analysis of variance; **GLM-** General linear modeling; * p<0.05 (after Bonferroni test)

Supplementary Figure 1 Axial view of the cerebellum in the co-registered subject space mean kurtosis (MK) MR image and the John's Hopkin's University-Montreal Neurological Institute (JHU-DTI-MNI) map space [Please use colour]

