

Magic Medicine? A Multi-faceted Approach to Justifying Psychedelic Therapy

Abstract:

The sustaining popularity of psychedelic drugs, known for their mysterious psycho-activating properties, reflects how despite evolution, humans continue to crave connection beyond their conscious selves; perhaps the material advancement of our species has even heightened this desire. Movements to decriminalize psychedelic drugs have been recently popularized by growing evidence of their healing potential. Because psychedelic drugs can influence a patient's sense of trust, morality, and existence, the possibility of their legalization poses numerous ethical concerns in the research and clinical settings. Are the advantages of psychedelic-assisted psychotherapy worth the risks? How can risks be prevented or minimized? And how can researchers and policy makers best incorporate cultural context and sensitivity when studying and regulating the accessibility of psychedelic drugs? In order for psychedelic therapy to be accepted as a safe medical treatment, these concerns must be addressed not only through a scientific lens, but one that considers the range of cultural, medical, and legal issues that may arise from the functional complexities surrounding these fascinating creations of nature.

Sociocultural Considerations

In ancient India, from 1500 - 500 BCE, Soma-rasa ('the juice of immortality' in Sanskrit made with juice from the Soma plant) was offered to the Gods and the priest during Vedic rituals; the elixir was believed to heal disease and bestow fortune (1). During the late 20th century, Soma's hypothesized modern counterpart, psilocybin, was illegalized along with other psychedelics (psychoactive substances influencing consciousness and cognitive processes) in most countries following concerns of abuse potential. Today, psychedelic drugs have reemerged as a potentially powerful tool for treating psychiatric illnesses.

The historical journey of psychedelic drugs reveals a changing climate in psychotherapy and the field's intersection with spirituality; cultural communities can provide useful insights into the best methods to regulate and medically utilize psychedelic drugs. Followers of the Native American Church, for example, perform rituals involving consumption of peyote, a cactus containing the mescaline hallucinogen [1]. Because of the community's religious connection to peyote and a history of persecution faced by Peyotism, its inclusion in decriminalization arguments is not supported by all members of the Church; Miriam Volat, co-director of a philanthropic group focused on psychedelic advocacy through societal, psycho-spiritual, bio-cultural, and indigenous initiatives, explains "instead of saying, 'You owe us this plant,' the decriminalization movement should be saying, 'We'd like to help you take care of your sacred medicine'" [2]. Western ideologies have long governed policies that affect non-Western communities, an issue prevalent in psychedelic research and advocacy [3]. Psychedelics have been integral to indigenous communities long before colonization or Westernization, so their potential must be studied in the context of cultural significance.



Figure 1. Peyote cactus containing the hallucinogenic drug mescaline [4]

Lessons From Cases in Medical Psychotherapy

For patients of severe psychiatric disorders that are unresponsive to existing therapies, controlled psychedelic therapy may be the only gateway to a healthy future. One study by researchers from Imperial College London revealed dramatic reductions in neurological mechanisms linked with depression in participants after intake of psilocybin, the psychedelic compound found in ‘magic’ mushrooms [5]. A study conducted by Harbor-UCLA Medical Center researchers suggests psilocybin can also reduce anxiety in advanced-stage cancer patients [6]. Additional studies suggest psychotherapy with psilocybin or other hallucinogenic drugs such as MDMA and LSD may produce similar effects for other disorders such as post-traumatic stress disorder, suicidal tendencies, and addiction [7][8].

While the medical aptitude of some psychedelics are promising, their risks remain a forefront hindrance to widening accessibility. Side effects of psychedelics vary by drug, but include increased heart rate and energy, nausea, and heightened emotions. Dangers in psychedelic therapy typically arise from lack of informed consent. In an extreme case, a patient’s debilitated self-awareness may increase risk of sexual assault. As mentioned, psychedelics often heighten trust and vulnerability, which can be wrongfully manipulated by an unsupervised healer. One shamanic healing trainee closely escaped such abuse from her trainer while in Peru, under the influence of the ayahuasca psychedelic; the dosage given was abnormally large and other female visitors to the ceremony reported facing similar treatment. Further examples of such cases can be found from both Western psychedelic therapy and traditional ceremonies, which emphasizes that regulation and monitoring of the healer is indispensable to maintain patient boundaries within psychedelic therapy sessions [9].

Legal Justification: Combating Misinformation and Enhancing Diversity

Currently, psychedelics are Schedule I substances: drugs with high abuse potential that are not accepted for medical use. Access to therapies are limited to clinical trial volunteers, certain indigenous churches, and clients of ‘underground’ guides, which threatens safe rehabilitation for patients after therapy. Legalizing psychedelic drugs for psychotherapy demands consistent, proven safety, which can be improved by requiring supervision of the caregiver during therapy sessions and forbidding self-medication without professional oversight. Misinformation about psychedelics is another root cause of safety issues as it is near impossible to preconceive the impacts of hallucinogens without first-hand experience. However, demystified information on psychedelics for

both the general public and therapy-seeking individuals is still crucial to prevent incomplete assumptions about their potencies and risks.

Improved participant diversity and sample size in studies are also essential to make concrete claims about psychedelic treatment. Most clinical trials in this field report largely Caucasian participants and researchers, which is inconsistent with the fact that most indigenous communities have more experience with the substances' medical and spiritual capacities and adds uncertainty to the efficacy of psychedelic-assisted psychotherapy for different races and ethnicities. In addition, the cultural value of certain psychedelics must be respected by policies increasing accessibility of psychedelic drugs so those substances are neither jeopardized nor trivialized with integration into modern culture.

Today, close to one billion people around the world contend with a mental disorder, with one person committing suicide every forty seconds [10]. Global costs of mental illness are expected to reach 16 trillion U.S. dollars in less than a decade with existing treatment opportunities [11]. Legalizing psychedelics, if done with the proper ethical terms, could provide the much-needed beacon of hope in mental health millions have been waiting for.

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