

Subjects in this study enter Johns Hopkins Hospital in Baltimore, Maryland on any Monday night of their choosing, completing their tests Friday around noon. NIDA pays all transportation expenses of the subject and \$400 compensation. NIDA is spending about \$6,000 per subject, and at completion of the experiment all personal data will be given to the subjects. The spinal tap procedure has a reputation much more fearsome than deserved. Though it feels very weird, it is relatively painless. The main complication, which occurs to about a third of the subjects, is spinal headaches which go away when you lie down but can last a week or more. I had one after my first spinal tap and not after my second, two years later. For more information about participating in this experiment, contact Dr. George Ricaurte at (301) 550-0993. Feel free to contact me as well.

SWITZERLAND PSYCHEDELIC RESEARCH UPDATE

Last summer, the MAPS newsletter began with the heading GREAT NEWS and reported on the legal therapeutic use of LSD and MDMA in Switzerland, at the time the only place in the world where such work was legally taking place. Permission to prescribe MDMA or LSD was granted by the Swiss Health Authorities to a small group of six Swiss psychiatrists, all of whom belonged to the Swiss Association for Psycholytic Therapy (SAPT). A custom designed in-patient treatment ward was opened at the Swiss Red Cross Hospital in Bern for the more seriously ill patients.

Since permission was granted, several hundreds of patients have been successfully treated with MDMA and LSD-assisted psychotherapy for psychological conditions ranging from post-traumatic stress syndrome, anorexia, depression, phobias and obsessive/compulsive disorders to marital counseling and psychological aspects of terminal illness.

A survey of the six Swiss psychiatrists using psychedelics was conducted under the direction of Dr. Christian Scharfetter by Swiss researcher Ernst Benz, for his Ph.D thesis. Also newly minted, Dr. Benz reported that "MDMA was described as the safest of the drugs, since it caused anxiety in so few patients, and effected a mild and positively experienced emotional expansion so that patient resistance to the drug rarely occurred. Patients rarely had feelings of physical disintegration or isolation from their bodies [Note: As sometimes occurs with LSD]. MDMA inspires symbolic understanding and, above all, physical sensation and insight, strengthening patients enthusiasm for interaction and making communication more direct so that they deal with one another more easily and feel better able to tolerate others. All members of SAPT are of the opinion that MDMA in a standard dose of up to 150 mgs. is relatively non-toxic." (Ernst Benz's thesis, which also reviews the work of Drs. Grof and Leuner, is available for \$30 from MAPS but only in the original German.)

UNSUCCESSFUL MAPS ATTEMPTS AT COLLABORATIVE RESEARCH

Due to the opportunity Swiss psychiatrists had to actually administer MDMA, MAPS attempted to initiate collaborative research on MDMA neurotoxicity between Swiss psychiatrists and Dr. George Ricaurte. Dr. Ricaurte visited the Swiss psychiatrists and prepared a protocol which called for spinal fluid to be taken from patients before and after exposure to MDMA, then placed in liquid nitrogen for shipment to Johns Hopkins for analysis.

Unfortunately, the Swiss psychiatrists decided that MDMA neurotoxicity was not an important concern of theirs. They were also less than enthusiastic about conducting research into the therapeutic use of MDMA and LSD, despite the offer of psychiatrists at Harvard Medical School to collaborate on experimental design.

The Swiss psychiatrists are psychotherapists and not researchers, who realize that research protocols often inhibit the process of psychotherapy. Protocols preferred by the FDA are double-blind placebo studies. Because of the placebo, half of the therapeutic sessions, often conducted with patients who seriously need treatment, are seen by the psychiatrists as being less effective therapeutically than the patients deserve. In addition, the studies fail to remain double blind since experienced therapists and patients can determine the content of the pill by the presence or absence of the dramatic effects which psychedelics catalyze. Since the Swiss Health Authorities did not explicitly require formal research, scientific studies were never begun in Switzerland.

SWISS RESEARCH HALTED - RESUMPTION POSSIBLE BUT NOT CERTAIN

Early this summer, a very tragic, unfortunate, incident resulted in the temporary withdrawal of official permission for the medical use of LSD and MDMA.

At the present time, all use of LSD and MDMA in Switzerland has been stopped. There is currently nowhere in the world where LSD and MDMA are legally available to psychiatrists for the treatment of patients. Use will resume about November 1.

One of the Swiss psychiatrists led a psychotherapy group in France using psychedelics. Instead of LSD or MDMA, one patient received ibogaine, a drug derived from an African root which has been used to assist psychotherapy for many years and has recently been reported to be effective in the treatment of addictive disorders. Ibogaine produces vomiting in most people who take it and has not found a wide use. For reasons which are still uncertain, the person who tried the ibogaine experienced medical complications and died. An explanation for what occurred awaits autopsy results. In the psychedelic literature, deaths from ibogaine have not previously been reported.

As a precaution, the Swiss Health Authorities decided to halt all medical use of all psychedelics pending receipt of the autopsy report. The psychiatrist is facing legal complications and a patient is dead. Since the autopsy indicated that neither MDMA or LSD was involved, the Swiss authorities have decided to allow the Swiss psychiatrists permission to resume their work with MDMA and LSD, which have an excellent safety record and have demonstrated therapeutic efficacy. One new condition is being insisted upon by the Swiss authorities. Future use must be part of a research protocol, excellent news for those of us interested in psychedelic psychotherapy research.

NEW MAPS MDMA RESEARCH PROJECT - CZECHOSLOVAKIA

Another country may be about ready to open the door to psychedelic research. In July, I met with Czechoslovakian psychiatrist Dr. Zdenek Dytrych in Washington, D.C., during his visit to the US for a conference. Dr. Dytrych had been told about MDMA by Dr. Stan Grof, with whom he used to conduct LSD research in the 1950's and 1960's. Dr. Dytrych is the head of social psychiatry at a psychiatric research institute in Prague and has extensive experience with LSD research.