

Dear MAPS

A series of letters on MDMA and cancer

The following letter arrived at the MAPS office recently:

Dear MAPS,

I'm not sure if you'll remember me, but I was in touch with you last Spring while I was caring for my father, in his last months of pancreatic cancer.

I was able to have two successful MDMA sessions with him which allowed for some major breakthroughs and permitted him to enjoy a few precious hours of pain-free "quality time" with his family. I wrote to you about both sessions, and you were kind enough to keep in close contact with me.

I'm sure it would not surprise you to learn that my father succumbed to his illness in June. In looking back, I find that the two MDMA sessions we had were two of the most joyous memories during his final weeks of existence.

That was the final of four letters. Here is the rest of "Patricia's" account:

The first session—April 1998

Dear MAPS,

Following this is my description of the MDMA session I conducted with my father, who is in the end stages of pancreatic cancer. It is as detailed as possible, to the best of my ability, in the hopes that this information might prove helpful to those engaged in research along these lines.

Before I begin the account, I will outline some background details about my father's condition and treatment. My father is 59 years old, and was diagnosed with primary pancreatic cancer in September 1997. He has refused chemotherapy and had one radiation treatment several months ago, preferring instead palliative treatment in the form of pain management. He has a 40 year history of alcoholism, was diagnosed with insulin-dependent diabetes in February 1997, and smokes up to a pack of cigarettes a day.

He is 6'4" and weighed 143 pounds, as of Friday, April 3, 1998 when he had his last doctor's visit. This is an increase of 6 pounds from the month before, which we mainly attribute to a steady diet of high-fat, high-protein foods. His blood tests were unremarkable, with no noticeable abnormalities on liver and kidney function tests. He tested slightly anemic and, of course, his glucose was high, but overall the tests were not as bad as they could have been. Rather than change the diet we currently have him on, the doctor instead preferred to increase his Humulin insulin intake to 30 units per day.

The medications my father is taking were not altered for the sake of the MDMA session, as per his wishes. They

are as follows:

- Dilaudid, administered subcutaneously at 20 mg QH.
- Bolus doses available at 8 mg Q 15 minutes PRN.
- Zoloft, 50 mg, 2 tabs BiD.
- Restoril, 15 mg, given QHS.
- Pancrease, strength unknown, given at mealtimes.
- Valium, 2.5 mg, given QiD.

It must also be noted that Dad had never ingested MDMA before this session. He has had experience with LSD, psilocybin mushrooms, marijuana, hash, cocaine, and other substances. Apart from marijuana and hash, none of these have been ingested for at least 15 years. Marijuana and hash are available to him as needed since his diagnosis, but he has not used them much.

On Sunday, April 5, my stepmother, my boyfriend and I woke up Dad at 6 p.m. from a 3-hour nap. He had not eaten since 11 a.m., when he had a full breakfast. Noting that he was hungry, we gave him a piece of homemade cheesecake. After going over specifics of what to expect (he had been informed several days before, but wanted a re-briefing), we administered 107 mg of pure MDMA in a capsule. This was obtained from a source with whom both my boyfriend and I are personally acquainted, so we trusted the quality. The powder was synthesized seven years ago, as per our source.

We had decided that we were all going to do the session together. In the days leading up to this, my stepmother, at first unwilling to consider the possibility of participating, had had a change of heart. After reading background information about the use of MDMA with cancer patients, she had decided that not only would the

experience be beneficial to Dad, but also for herself and all of us as well.

At 7:15 p.m. we took the MDMA. We gave my stepmother a half-dose to begin with, since she is small in stature and is prone to nausea/vomiting, with the understanding that we would check in with her after 45 minutes. If there was little or no effect at that time, we would administer the other half. With Dad, we opted to give him the full dose because of the meds he was taking, with the understanding that we would administer another full dose after 45 minutes if he was not feeling the effects.

At approximately 7:40 p.m., my boyfriend and I could begin to feel the effects. At 8:00 p.m., neither my Dad nor stepmother could feel what they thought was a difference, so we administered extra doses to them as outlined above.

At approximately 8:15 p.m., both of them began to feel the effects of the MDMA. At this time I was fully experiencing the tactile effects, as was my boyfriend. My stepmother remarked that she had “an overwhelming sense of well-being.” My father began to state that he was feeling something, too, and he liked it.

It is important to note our setting. We were all sitting in different corners of the room, with a pleasant visual video playing on the TV, muted, and a soft, mellow music CD playing. We have four cats in the house, and all four were making their way into the room, not especially interacting but wanting to be close.

At this time, Dad was lying on the sofa, propped up with pillows and covered by a blanket. My boyfriend had completed a lanyard which he intended to add on to the two I had created with my sister and which adorned the cane Dad has to use. When he was ready to present it, I moved onto the sofa next to Dad, my stepmother sat next to me, and my boyfriend was on the floor in front of Dad. We remained in these places for the remainder of the experience.

Very soon after we changed positions, I felt the urge to massage Dad's hands. As I did so, my stepmother decided she wanted to massage Dad's feet. After we did this, I massaged Dad's head and face, which he loved. The three of us just kept administering massage to Dad, wherever he wanted it. My boyfriend, who is an amateur massage therapist, massaged his back and neck. Dad's main remark was that “everything feels good” and that the sensations weren't as strong as he thought they would be. I had warned him that MDMA does not always come on very strong.

We all expressed how happy we were to be together, as a cohesive family. I turned to Dad and told him I loved him, and I saw genuine happiness in his eyes as he told it back to me. My stepmother remarked to him that she believes my presence in his life now—I've been living here with them for the last month—has definitively made an impact on the slowing of the disease process, to which he agreed. I reminded him of how important this time was and that I felt like we were living out a classical archetype, of the dutiful daughter come home to care for her dying father. He agreed.

We spent a good deal of time relating various anecdotal

stories to each other, and even though the stories were unremarkable, it is important to note that we had not, until this point, been at such ease with each other to feel comfortable enough to converse in such a way. The most notable change was between my stepmother and me, because we both felt we had not “known each other” to such an extent prior to the session.

I deliberately did not stray too far into psychological discussions because shortly into the session, Dad had remarked that he liked the sensations enough that he would like to do it again, and I felt that acquainting him with what to expect was enough for this time. We all enjoyed our session together tremendously, and that feeling has remained with us long after the effects have stopped. Dad has again expressed an interest in doing this again before he dies, and would like my sister to be included on the next go-around. My sister had expressed interest in participating, and was not in attendance this time because of logistics.

I do not know if we will have time to have another session before he goes, because I am aware of the diminished effects when two MDMA sessions are conducted in close proximity to one another. As of this writing, we have had three weeks since the session, and as of next weekend, my sister will be in attendance and we will probably plan for the next one soon after that. The source of our powder for the upcoming session has changed, but this other source is as reliable as the last and the strength of the capsules will be 120 mg instead.

It is important to note that we notified Dad's hospice nurse both before and after the MDMA session, and we all expressed an interest in having him present when we do the next session. All of us have bonded quite well with him and I don't foresee this to be a problem. We were unwilling to notify Dad's physician at the time of the session because Dad's wishes were to notify her afterwards instead. I realize this may go against safety measures but he is resolute that we only do so after the fact.

It is Dad's wish that we might have him go off the Zolofit a day or so prior to his next session in hopes that he feels more from the MDMA. It is impossible for him to decrease his pain meds at all as his dosage has been increased several times, based upon the amount of boluses he gives himself. My hope, however, is that the omittance of Zolofit prior to the next session will be effective in increasing the sensations afforded by the MDMA. We are all looking forward to the opportunity to try this again and, perhaps, delve deeper into issues as well.

Postscript

With regard to Dad adding some remarks of his own, we're still working on that. His time awake during the day has diminished and so much of his determination for “quality of life” has to do with being able to do some programming on his beloved computer. We've had some display adaptor problems lately which have consumed his every waking hour. I reiterated to him today that I want to

work on his comments about MDMA and I will persevere over the next few days to get it in a legible written form and send it to you. Thank you again for your personal attention to our progress. We are looking forward to another session soon which I will again document for your files.

My stepmother knows the Phase I safety studies with MDMA have been conducted and that further tests are being reviewed, and that was enough endorsement for her to overcome her aversion to anything illegal and drug-oriented. Now that she has experienced the effects firsthand, she is much more accepting of the whole concept.

One month later

I have been unable as of yet to get Dad to commit some remarks in a written form about his experience during our session. His time awake has diminished steadily over time, and there are so many things to attend to. For instance, he has not signed his will yet and is reluctant to do so, even though he knows he has very little time left. We have spent very little time together alone, and littler still time in front of the computer.

Dad's condition has deteriorated quite dramatically since I last wrote to you. He seemed to be stabilized when I left, but last week he "crashed" and was admitted for three days to the hospice facility for pain management. His dosage of Dilaudid jumped from 48 mg per hour to 175 mg per hour, and the additional diagnosis has been made that the cancer has spread to his bowels. Now he is on an additional med, Nembutal, for sleep, and he has a Foley catheter attached as well. It is obvious to all and to Dad that he does not have much time left, possibly as little as one to two weeks. The dynamic in the household has shifted accordingly and we all feel the dread creeping in.

Dad has reiterated his desire to do another MDMA session now that my sister is here, and we may consider it one of the days this coming week, as soon as he feels he has stabilized from coming home from the hospital. He has also reiterated his wish to have an LSD session, which will be involving just him and me. We recently conducted a session with mushrooms which did not give good results as the narcotics he is taking cancelled out the most noticeable effects. He and I were both disappointed, but we remain hopeful that the LSD will not be overshadowed by his Dilaudid. As for MDMA, we are aware that he may encounter diminished effect from the heavy dosage of Dilaudid, but we have enough on hand to incrementally increase his MDMA dose as needed. We will probably only have one shot at this, so I hope it goes well. I have with me several aids to use during the sessions—a comfortable set of headphones and a CD player so he can choose some of his favorite music to listen to in private moments. My stepmother and boyfriend are looking forward to a second MDMA session as well, and I have a feeling that part of his enjoyment will come when he sees the rest of us connecting, which has been his wish all along.

The second session—June 1998

Today was a big day for Dad and our family. He has been steadily getting worse, and the blow came today that he is not to be moved from the bed. With his final freedom taken from him, and with a heavy heart, Dad has finally allowed the gargantuan amounts of medication to run their course and is fully sedated. It comes as a blessing to all of us that he is resting now. His care level has increased dramatically in the last week or so and with him still awake and trying to be independent, our job was becoming quite difficult.

At this stage, we do not know how long he will hang on. Our hope is that with full-time sedation, he will go quickly and peacefully. This has been a long and arduous road for us and all we wish for at this point is that he remain out of pain until he passes.

I never did have any success in getting remarks from him to add to my journal. His times awake were consumed by trying to assert his mental clarity and physical strength and did not leave much room for nonessential tasks. He left much undone in many ways, which tore him apart.

We conducted one final MDMA session last weekend which met with quite a measure of success. Dad and I did it alone together this time, as my stepmother was asleep. As soon as we began to feel the effects, one of Dad's first comments was that he could feel no pain. That in and of itself was sufficient to make my day, but it got better. Together, we laid back on the bed, side by side, and held hands while we talked about anything that came to mind. Many subjects were covered, some major, some trivial. At that point in his illness, he was having trouble walking by himself, even to the bathroom, but he asked that I help him outside so he could look at his beloved garden for the last time.

Long after I would have expected the effects to wear off, Dad was bounding out of bed on his own to walk slowly back and forth to the bathroom, and was making jokes and making us laugh well into the night. Once my stepmother awoke, before she knew that we had conducted an MDMA session, she remarked that he seemed markedly improved. Once she was informed, she kept a close eye on him and could not deny that he appeared to be feeling better than he had in days.

Much later in the night, after the effects of the MDMA had long since worn off and everyone had gone to bed, Dad had a serious fall during one of his urgent calls to the bathroom. While he was not seriously injured, it sparked off the downward spiral we have witnessed since then. So it happens that Saturday was my last pleasant memory of Dad smiling and enjoying being alive. I will never forget it, and know that a major part of the reason for his improvement was the MDMA session.

Our two sessions will undoubtedly stick out in my memory as time passes and I can begin to mellow the memories of agony and cherish the ones of quality time spent together. I wish you continued success in getting the status of MDMA changed through research, to allow for others to participate in such beautiful experiences. •