

maps updates

Ketamine research continues in Russia

Evgeny Krupitsky, MD, has completed the data analysis for the one year follow-up to his study of ketamine psychedelic therapy (KPT) in the treatment of heroin addiction. (The six-month follow-up was published in the last *MAPS Bulletin*, 9(4), 1999) Results are as positive as for the first six months. The differences in the rate of abstinence and the rate of relapse between the high dose of ketamine and low dose of ketamine groups are statistically significant. Research is continuing with a two year follow-up for those patients who have not relapsed.

Krupitsky also submitted a new protocol for a study of KPT to MAPS and Heffter Research Institute. The aim of this new project is to compare the efficacy of the multiple vs. single session approach to KPT ketamine psychedelic therapy in heroin addicts. The protocol is currently under review.

Psilocybin in the treatment of OCD

A manufacturer has been found to produce the material for the first FDA-approved study in more than 25 years to examine the use of psilocybin in a patient population. The two principal investigators, Dr. Pedro Delgado and Dr. Francisco Moreno, University of Arizona, plan to study the use of psilocybin in ten patients suffering from obsessive-compulsive disorder (OCD). Negotiations are in progress between the university lawyers and the manufacturer because the manufacturer needs a guarantee that it will not be sued in case someone has a bad experience in the study.

The researchers still need financial support for hospital and laboratory costs and for an approved supply of psilocybin. These costs amount to \$30,000. MAPS is assisting the researchers to raise \$30,000 for their study. If you would like to make a tax-deductible contribution to this historic study or would like more information, please contact MAPS.

References

- Delgado PL, Moreno FA, (Oct-Dec 1998) Hallucinogens, Serotonin and Obsessive-Compulsive Disorder, *J of Psychoactive Drugs*. 30(4) pp 359-366.
- Delgado PL, Moreno FA (1998) Different roles for serotonin in anti-obsessional drug action and the pathophysiology of obsessive-compulsive disorder. *Br J Psychiatry Suppl.* (35):21-5.
- Moreno FA, Delgado PL, (Jul 1997) Hallucinogen-induced relief of obsessions and compulsions. *Am J Psychiatry* 154(7):1037-8.

DanceSafe receives new grant

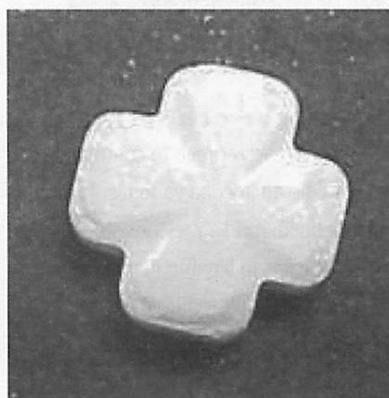
Early this year DanceSafe received a grant from the Promind Foundation to be put towards our ecstasy laboratory pill analysis program. This funding has enabled us to provide our adulterant screening services free to ecstasy users around the country (voluntary co-payment requested but not required). In February we received 18 tablets from a dozen different states including Arkansas, Illinois, Rhode Island, New York, California, Georgia, Connecticut, Maryland, Louisiana, Michigan, and Pennsylvania. Eleven of the tablets contained pure MDMA, two contained MDA only, and three contained DXM. Two others contained mixtures of caffeine, ephedrine, and/or aspirin.

The adulterated market and the adverse reactions resulting particularly from DXM-laced tablets are finally starting to get media attention. On Sunday, March 5th, 2000 the *Boston Herald* ran a front page story about ecstasy adulterants, mentioning DanceSafe and correctly reporting that many of the recent rave-related medical emergencies attributed to "ecstasy" are actually resulting from DXM-laced tablets, as well as GHB, which is often deceptively sold as "liquid ecstasy." Hopefully this article indicates a turning point in the generally confused press coverage surrounding "club drugs" and the causes of adverse drug reactions.

In other news, we have moved into a new office in downtown Oakland. It's 500 square feet with lots of natural light. We have hired a Bay Area director and will likely be adding four or five more local chapters to our national network this Spring and Summer. As raves and the use of ecstasy, GHB and other club drugs continues to grow, DanceSafe is expanding as well, offering fact-based drug information and harm reduction services to users across the US and Canada. •

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This Winter DXM-laced "white clovers" littered the ecstasy market across the entire country and were responsible for numerous medical emergencies.

Salvia Divinorum with Meditation Study

This amateur research project has progressed quite smoothly without the usual bureaucratic and approval delays that are the rule with professional studies. With proper guidance a project such as this can be carried out in a scientific and methodical way and deliver valuable data to other researchers. MAPS has purchased the materials and paid for the chemical analysis. Continuing assistance is being offered at no charge, in the spirit of amateur research, by MAPS (professional) members. Thanks to all who are currently contributing their knowledge to this project.

Establishing the dose

Preliminary sessions with .25 to 1.0 gram showed that the effects at this dosage level cannot be detected except when the subject sits quietly with eyes closed. This quantity is about one-half to one-tenth of the amount normally used to induce psychedelic states. The effects include alertness, unusual clarity of mind and an enhanced ability to concentrate. Some subjects are reporting space and time distortion effects. One unusual result that has been observed is headache relief. One subject who suffers from migraine found his headache completely eliminated over 30 minutes. Another observed the same effect with a minor headache. If informal results look promising we may do a follow up study to see if *Salvia divinorum* might have some merit for headache treatment. We have been contacted by another researcher who wants to start his own project to evaluate *Salvia divinorum* for headache relief.

Placebo challenges

Herbal double-blind studies are hard to do because it is difficult to duplicate a plant material. We had trouble coming up with a placebo. Dried Comfrey leaves are a close duplicate, but they lack the bitterness of *Salvia divinorum*. We had a breakthrough in July 1999 when we found that if you wash dried and crumbled *Salvia divinorum* leaves in two full glasses of water per gram, the bitterness of the *Salvia* dissipated (the active chemical, Salvinorin-A, is insoluble in water). However, the water washing method has not worked perfectly and some people can still detect the bitterness of the *Salvia divinorum* as compared to the Comfrey placebo material. We will need to add a small quantity of quinine (the bitter component of the Italian soft drink Brio or German "bitters") to match the bitterness.

Dose effects

In the non-blind dose establishment phase of this study we tested subjects on .5 gram, 1.0 gram, 1.5 grams and 2.0 grams of dried and crumbled *Salvia divinorum* leaves chewed and administered sublingually. At 0.5 grams, half of the subjects noticed a slight effect, a clearer than normal mind that is free from distractions. The other half noticed nothing at all. All subjects noticed 1.0 gram when they were in a quiet room with no distractions. The mind remained clear and

meditation was unusually easy with few distracting thoughts. This dose was only detected by subjects when they were trying to meditate. However, if they listened to music or did some activity they could not notice any effect at all. At 1.5 grams, half the subjects notice a trance-like state beginning. The effect was slight but it inhibited meditation for some. Generally subjects found 2.0 grams too strong for meditation. For some, this dose produced a slight trance-like effect with time distortion. The effect was enjoyable.

Starting out the year

We are starting in the new year with a meeting to taste test the placebo vs. the real thing. Two women in the group are nurses with experience in statistics and drug testing; they will be a great resource. We decided that 1.5 grams of dried herb is the maximum dose to use because some people experience gagging with 2.0 grams. We are setting the very low dose at 0.5 grams and the low dose as 1.5 grams. We plan to use group meditations where everyone follows a specific technique such as breath awareness. In addition, some subjects will do private meditation.

During the double-blind phase of the study, volunteers in each session will meditate as a group while holding a small quantity of the herb (or placebo) under the tongue. After the session each person will answer a questionnaire to evaluate the effects of the herb and to determine whether it enhanced their ability to meditate. The questionnaire is a customized version of the HRS (Hallucinogen Rating Scale) developed by Rick Strassman. •

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Ian Soutar with *Salvia divinorum* plant