

**As I write this**, the world is mesmerized by the technologies of war. In times of fear, trauma, and stress, MAPS' mission of developing technologies of healing becomes even more critical. While our efforts to initiate psychedelic and medical marijuana research are primarily directed at the treatment of patients with diagnosable psychiatric and medical illnesses, collateral benefits are anticipated. Psychedelic and medical marijuana research can also contribute to the treatment of cultural pathologies. These include the divisive and counterproductive Drug War and the prioritization of ideology and fundamentalism over science, common sense and compassion, as evidenced by the federal prosecution of medical marijuana patients and providers in California. Societies more open to psychedelic experiences are likely to be less blind to their own demons and prejudices, and perhaps less likely to wage wars of all types. The sort of blind prejudice I mean is typified by a stock reply of ex-Drug Czar General Barry McCaffrey that he once offered me, without obvious irony, admitting "I may frequently be wrong, but I am never in doubt." Suppressing research may temporarily keep doubt at bay, but it isn't healthy public policy.

Open-mindedness is not a hallmark of societies at war, making the research approval process much more difficult. Yet another Institutional Review Board (IRB) has seemingly been influenced by non-scientific social prejudices in its review of Dr. Michael Mithoefer's MDMA-assisted psycho-

## **Letter from Rick Doblin, Ph.D., MAPS President**

therapy in the treatment of posttraumatic stress disorder (PTSD) (p. 4). In addition, we are meeting increasingly stubborn and unjustifiable resistance from the Drug Enforcement Administration (DEA) in regards to Dr. Mithoefer's 10-month wait for a license to possess and administer 3 grams of MDMA to patients in his study. Similarly, DEA has been obstructing Prof. Lyle Craker's efforts to obtain a license for a MAPS-funded medical marijuana production facility at UMass Amherst (p. 12). Even the International Narcotic Control Board (INCB), the body that monitors and enforces compliance with international drug control treaties, issued in its 2002 annual report a cautionary statement about MAPS' efforts to support MDMA/PTSD research. In paragraphs 171 - 172, under the heading "Provision of MDMA-assisted psychotherapy in the treatment of posttraumatic stress disorder," the INCB warned the signatory parties to the treaty (which include virtually all the countries in the world) to beware that "While the Board has been encouraging all Governments to support sound research on the medical use of controlled drugs, it has also been concerned over the possible misuse of research activities for the propagation of the non-medical use of drugs." I haven't determined whose fingerprints are on these paragraphs, but it's probably either the DEA or the Spanish Antidrug authorities (p. 7).

Despite these political pressures, MAPS stands on the verge of blossoming into a non-profit pharmaceutical company, in actuality as well as in intent, to develop psychedelics and medical marijuana into government-approved prescription medicines. Though we've been on the verge for a long, seemingly interminable time, I'm more convinced than ever that the non-profit research approach offers substantial promise. For example, on March 31, 2003, the Bill and Melinda Gates Foundation announced it would donate \$60 million to a non-profit organization to develop a topical gel to block the transmission of HIV. For-profit pharmaceutical companies considered the profit potential to be small and weren't doing the research. The abortion pill, RU-486, was also developed into an FDA-approved medicine by a non-profit organization.

In the midst of war, visions of healing must be sustained and developed. The MAPS staff is deeply grateful for your support in these difficult, challenging and promising times.

— *Rick Doblin, Ph.D., MAPS President*