

# MAPS

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## Letters to the Editor

Dear MAPS,

I just wanted to let you know that I'm asking all of my friends to donate to MAPS in lieu of a gift for my 60th birthday next week (I already have more "stuff" than I need or could ever want). Jeezzz, am I really 60 already? How time flies.

Hope that all is well with you. Keep up the great work!

Best,  
Susan P. Robbins, Ph.D., LCSW

**MAPS** (Multidisciplinary Association for Psychedelic Studies) is a membership-based organization working to assist researchers world-wide to design, fund, conduct, obtain governmental approval for, and report on psychedelic research in humans. Founded in 1986, **MAPS is an IRS approved 501 (c)(3) non-profit corporation funded by tax deductible donations.** MAPS is focused primarily on assisting scientists to conduct human studies to generate essential information about the risks and psychotherapeutic benefits of MDMA, other psychedelics, and marijuana, **with the goal of eventually gaining government approval for their medical uses.** Interested parties wishing to copy any portion of this publication are encouraged to do so and are kindly requested to credit MAPS and include our address. The *MAPS Bulletin* is produced by a small group of dedicated staff and volunteers. **Your participation, financial or otherwise, is welcome.**

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

Rick Doblin, Ph.D.  
[rick@maps.org](mailto:rick@maps.org)

TOGETHER, WE'VE SUCCEEDED against all odds. After twenty-two years of difficult struggles since MAPS was founded in 1986, we've overcome enormous obstacles and, finally, have successfully concluded our first MDMA-assisted psychotherapy study. We've demonstrated that we can provide clinically and statistically significant relief to subjects with treatment-resistant posttraumatic stress disorder (PTSD). A tantalizingly promising new world of opportunity now lies ahead for MAPS.

Our pioneering U.S. MDMA/PTSD pilot study has outperformed the pharmaceutical industry in the quest to develop effective treatments for PTSD. To do so, we've had to overcome aggressive suppression of research, and massively exaggerated estimates of the risks of MDMA put forth by anti-drug authorities around the globe—seeking to block research into the beneficial uses of MDMA. I can now see the next ten years laid out ahead of us, during which we'll transform MDMA—and perhaps other psychedelics and marijuana—into approved prescription medicines.

To paraphrase Winston Churchill, while we're not yet at the beginning of the end (of integrating the medical uses of psychedelics and marijuana into our culture), we are at the end of the beginning. In our rigorous, methodologically well-designed MDMA/PTSD Phase 2 study, we've produced data demonstrating safety and efficacy that even the most skeptical of critics will need to acknowledge.

This October, like the Phoenix rising from the ashes, partial results from MAPS' Spanish MDMA/PTSD dose-response pilot study will appear in the 40th anniversary edition of the *Journal of Psychoactive Drugs* (originally called the *Journal of Psychedelic Drugs*). We began the study in 2000, only to heartbreakingly and helplessly watch as it was prematurely aborted in 2002 before completion by Spanish and U.S. anti-drug forces, who were politically opposed to the world's first controlled, clinical study of the therapeutic use of MDMA. At present, there are over 3000 scientific papers indexed in Medline about MDMA and/or Ecstasy. Yet this paper about MAPS' Spanish MDMA/PTSD study will be the first paper ever published in the scientific literature presenting evidence from a controlled, clinical trial about the use of MDMA-assisted psychotherapy. Sometime in 2009, a paper about our U.S. MDMA/PTSD study will appear in the scientific literature, marking an historic achievement.

We've now passed a critical turning point. MAPS has completed our U.S. MDMA/PTSD pilot study and is currently sponsoring additional ongoing MDMA/PTSD studies in Switzerland and Israel. We're working to obtain permission for further Phase 2 MDMA/PTSD studies in Canada, Spain, France, Jordan, and the U.S., and we catalyzed and arranged for the funding of a study at Harvard Medical School into the use of MDMA-assisted psychotherapy in treating anxiety in advanced-stage cancer patients. We're refining our MDMA/PTSD treatment manual that describes our method of MDMA-assisted psychotherapy for PTSD patients. We're also developing a therapist training program for the twenty to thirty

male/female co-therapist teams who will eventually conduct our large-scale, multisite Phase 3 studies, that will be required by the FDA and the European Medicines Agency (EMA) to prove safety and efficacy prior to approval of MDMA for prescription use.

The challenge ahead is daunting. For the next two years, we'll be conducting and completing several additional Phase 2 studies, designed to gather data necessary for an "End of Phase 2" meeting with the FDA to determine the design of our two, large Phase 3 multisite studies, with perhaps six hundred subjects. These Phase 3 studies will take an additional three to five years, followed by

FDA and EMA review of the data lasting another year or two.

For the last ten years, I've spoken and written about a five million dollar, five-year plan to develop MDMA into a prescription medicine. Based on the last decade of experience, I'm now thinking in terms of a \$10 million, 10-year plan which, if we're lucky, may end up as a \$7 million, 7-year plan. In any case, what's a few years and a few million dollars either way, when the goal is so tremendous?

MAPS is also involved in LSD and MDMA and, eventually, psilocybin research, in people with anxiety associated with end-of-life issues. We plan to expand our research into the use of ibogaine in the treatment of substance abuse. If we can break the federal monopoly on the supply of marijuana for legal research, we'll also work to start developing marijuana into a prescription medicine.

Together, we can work wonders and make a positive and lasting contribution to this magnificent yet hugely suffering world.

Rick Doblin, MAPS President.

A tantalizing,  
promising new world  
of opportunity  
now lies ahead  
for MAPS.

## Letter from the Editor **David Jay Brown**



David Jay Brown  
Davidjay@maps.org

Thanks to MAPS,  
and sister organizations...  
psychedelic drug research  
is once again  
a legitimate area  
of scientific study.

Editing this *Bulletin* completes my eight month commitment with MAPS as their Guest Editor—a spot that that I was temporarily filling, while MAPS found a new Director of Communications to replace Jag Davies, who is now working with the ACLU. (But joins us in this *Bulletin* to report on the legal logistics of MAPS vaporizer study that is being held up by NIDA.) The next issue of the *Bulletin* will be edited by Randolph Hencken, MAPS' new Director of Communications and Marketing. This issue of the *Bulletin* contains a warm introduction from Randy, so please join me in welcoming him to the MAPS community.

It's been a real pleasure working with everyone at MAPS these past few months, and an honor to be part of this dedicated team of public policy reformers and researchers. Although I'll be bowing offstage, and leaving you all in Randy's capable hands, this won't be the last that MAPS members will be seeing of me. I'll be back again as Guest Editor next Spring to compile and edit another special theme issue of the *Bulletin*. This special issue will be devoted to the theme of "ecology and psychedelics." Increased ecological awareness is an important lasting effect of many psychedelic experiences, and at this juncture in our species' evolution it certainly seems like a timely topic for discussion. Please contact me if you are interested in contributing to this special issue of the *Bulletin*: davidjay@maps.org

Twenty years ago, when I was in graduate school studying psychobiology, what I wanted more than anything else was to be able to conduct psychedelic drug research—but the opportunities just weren't available. Today, things are different. Thanks to MAPS, and sister organizations like the Heffter Foundation, psychedelic drug research is once again a legitimate area of scientific study. Last Fall I was delighted to be able to summarize this exciting new research in a feature article for *Scientific American Mind* magazine. (Available in the media section at: www.maps.org) In the article I discussed the revival of medical research into LSD, psilocybin, ibogaine, MDMA, and DMT—and stressed the vital role that MAPS is playing in this psychedelic renaissance. The research that I dreamed about doing as a graduate student has now become a reality for many scientists around the world, and the

future of psychedelic medicine looks very bright indeed.

I'm thrilled to be able to help report about this new wave of psychedelic drug research. The *Bulletin* that you're holding in your hands represents the very cutting-edge of this research, precious reports from the exciting frontiers of psychedelic medicine. If this issue of the *MAPS Bulletin* were to be suddenly transported back in time, and land on the lap of a frustrated psychedelic drug researcher in the early 1970s, she would likely sing her praise to the Heavens. For example, in this issue Swiss psychiatrist Dr. Peter Gasser reports on the first six months of his LSD-assisted psychotherapy study with people suffering from anxiety associated with advanced stage life-threatening disease. This is the first government-approved scientific study with LSD and human subjects on planet Earth in over thirty-five years!

Thirty-five years is a pretty long time to just be sitting on a substance that has—in previous studies—demonstrated so many remarkable abilities for safely treating a wide range of difficult-to-treat medical conditions.

Also very exciting are Dr. Peter Oehen's and Dr. Michael Mithoefer's reports on their MDMA/Posttraumatic Stress Disorder (PTSD) studies. The preliminary results from both of these studies, which are reported on in this issue, are extremely encouraging, and Dr. Mithoefer's Phase II study is now almost complete. I'm fully convinced that MAPS—along with our sister organizations—will eventually accomplish our mission of making MDMA, LSD, psilocybin, DMT, mescaline, ibogaine, and marijuana into legal prescription medicines. It looks like MDMA will probably be the first. The forces of evolution are with us, to be sure, but part of the reason that I'm so confident about this is a result of my personal interactions with Dr. Rick Doblin, founder and president of MAPS.

I met Rick in 1994 at a conference in Los Angeles, sponsored by the Laura Huxley Foundation, called "Children: Our Ultimate Investment," which addressed children's issues in our present society. Within moments of meeting Rick, I witnessed his trademark, closed-mouthed grin—reminiscent of an MDMA afterglow—and after hearing him talk about his ideas for advancing psychedelic research, I was instantly charmed. Over the years, I've watched in awe at Rick's near-miraculous ability to communicate across great cultural divides, to patiently and persistently navigate his way through bureaucratic mazes and government blockades—that appeared impassable even to the Hindu deity Ganesh—and to make the seemingly impossible happen with psychedelic drug research.

Rick has an uncanny ability to communicate effectively with hard-nosed scientific researchers, cautious govern-

ment officials, frightened patients, curious students, concerned parents and teachers, counterculturally-minded trippers, skeptical mainstream journalists, and mystically-minded visionary artists. I think that this culture-bridging ability that Rick has so skillfully mastered is the secret to MAPS' great success, and this is why I think its success will only continue to snowball. I share Rick's vision and I believe in MAPS' mission, as do many people, across many disciplines. I think that making therapeutic psychedelic experiences legally available to all who need them is one of the most important things that we can be doing, and I look forward to the day when Rick can use his untapped shamanic skills as a fully-licensed and practicing psychedelic psychotherapist.

It seems pretty clear that our planet is currently in a deep ecological and spiritual crisis, and that there isn't a whole lot of time left to rescue our biosphere from serious damage. I've personally witnessed how psychedelic experiences can psychologically transform people, how those very human traits that seem to be at the root of our problems as a species—ecological blindness, greed, shortsightedness, rigid belief systems, ego-centeredness, fear, prejudice, anger, pain, etc.—can transform into a greater sense of compassion, empathy, insight, and ecological awareness. Personally, I don't know of anything else besides psychedelics that can so consistently and so completely transform people, in such positive, healthy ways, so quickly—over night, like Scrooge in *The Christmas Carol*. This knowledge motivates me, and it's why I believe so strongly in what MAPS is doing. I encourage you to contribute what you can to MAPS, to get involved and spread the word—because without you, and without your help, none of this would be possible.

The research  
that I dreamed about  
doing as a  
graduate student  
has now become  
a reality for many  
scientists  
around the world

## MAPS' US MDMA/PTSD Phase II Study:

### The 12th and **Final** Progress Report



Michael Mithoefer, M.D.  
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ON JULY 18, 2008 we conducted the final all-day experimental session of our MDMA/PTSD study. It was the third MDMA-assisted session for our 21st and last subject, who had previously had two placebo experimental sessions during the double-blind stage of the protocol. After a series of integration sessions with Annie and me, the subject will meet with Mark Wagner, Ph.D. in mid-September for her final symptom measures, at which point this Phase II study will be completed. Our longer-term follow-up study is considered a separate study and will be initiated shortly after the final subject's two-month follow-up is completed. Since the study started treating subjects 4 1/2 years ago, we'll be evaluating subjects from one to 4 1/2 years after treatment.

The study has now included 51 MDMA-assisted experimental sessions, 16 placebo experimental sessions, 337 non-drug therapy sessions for preparation and integration, and 128 psychological testing sessions. During the four and a half years over which these sessions have taken place there have been no serious drug-related adverse events.

The next step will be statistical analysis of the data and publishing the results in a peer-reviewed journal. Mark Wagner, the neuropsychologist who has done all the screening, symptom measures and neuropsychological testing, has begun work on the data analysis. We will not be prepared to publish the results prior to peer-reviewed publication, however we continue to be very encouraged by the changes we are seeing in PTSD symptoms and the lack of evidence for any adverse neuropsychological effects.

In the meantime, we have been turning our attentions to preparation for the much larger multi-center trials that are required for FDA drug approval. Before MAPS is in a position to apply for approval of these Phase III studies, they will need data from at least one other Phase II study to demonstrate that our results can be replicated. The studies that are ongoing in Switzerland and Israel (and in the design and approval process in Vancouver) will likely produce this data within the next year or two. The preparations that we'll be working on during this time are related to the design of Phase III trials and the training of therapists to work in Phase III.

**Design:** Data from the present study will allow us to request FDA and IRB permission to streamline the protocol for Phase III trials in various ways, such as eliminating the presence of an ER nurse, not monitoring liver enzymes after experimental sessions, and decreasing the frequency of vital sign measurements. One of the major remaining challenges in Phase III design is to maximize the effectiveness of the double-blind by making it more difficult for investigators and subjects to distinguish full-dose MDMA sessions from placebo sessions. In our study we used an inactive placebo and compared it to 125 milligrams of MDMA (followed by a supplemental dose of 62.5 milligrams in our later subjects).

There is some PTSD research experience with lower doses. In a Spanish study conducted by Jose Carlos Buso and colleagues--which was stopped for political reasons before full doses were reached--six subjects received either an inactive placebo, 50 milligrams of MDMA or 75 milligrams of MDMA. The Swiss, Israeli and Canadian studies mentioned above

are all using low-dose MDMA as an "active placebo." We are currently discussing the possibility of doing an additional Phase II study with low, intermediate, and full-dose MDMA in a small group of PTSD patients, in order to help determine the best active placebo dose for Phase III trials.

**Training:** In order to conduct a valid study at multiple sites, with different therapists, it is necessary to have a standardized approach to therapy, as defined in a treatment manual and also as a means of determining whether or not different therapist teams are in fact using the same approach. June May Ruse, Ph.D. has spent many hours listening to recordings of our study sessions and has taken the lead role in developing drafts of a treatment manual--with contributions from Rick Doblin, Ilsa Jerome, Annie Mithoefer, and me, along with editing assistance from Elizabeth Gibson. June has also written a draft of about ten rating scales, each focusing on one of the central aspects of our therapeutic approach, which will be necessary for an observer to confirm whether or not a therapist team is adhering to the manual.

Along with the manual and adherence scales, we are designing a training program for potential Phase III therapists. In August, June, Annie, and I scheduled a week to intensively review audio and video recordings from the study sessions in order to further refine the Treatment Manual, the adherence scales, and the training program design. We are well aware that our approach to MDMA-assisted therapy does not lend itself to "manualizing" as readily as some other forms of therapy. Our approach is largely non-directive and, except for the introductory sessions, there is not a predetermined structure regarding what is dealt with in a particular session.

Nevertheless, we believe we can describe the essential elements in a manual, and design valid adherence measures for them. Our approach is largely based on what we've learned from the writings of Stanislav and Christina Grof and others, and in our Holotropic Breathwork training with Stan and Christina. We recognize that our experience in this one study does not give us the definitive answer about the best way to conduct MDMA-assisted therapy. What it does provide is evidence that this can be an effective approach, and is a worthwhile model to carry forward into larger studies.

We're delighted to be bringing this study to completion with encouraging therapeutic results and a good safety profile. At the same time the feeling is bittersweet, because we have so enjoyed working with all the people who have volunteered to participate in this study. We feel great respect and appreciation for their courage and willingness to do this deep experiential work, especially in an experimental protocol. We know that doing so often presented considerable logistical as well as emotional challenges. Their determination to heal has inspired us, as has the community of supporters whose generosity and hard work has made it possible to offer this tool to facilitate healing.

The study has now included 51 MDMA-assisted experimental sessions, 16 placebo experimental sessions, 337 non-drug therapy sessions for preparation and integration, and 128 psychological testing sessions.

...we continue to be very encouraged by the changes we are seeing in PTSD symptoms and the lack of evidence for any adverse neuropsychological effects.

## Swiss MDMA-assisted Psychotherapy Study: Update on Study Progress



By Peter Oehen, M.D.  
peter.oehen@hin.ch

Both subjects reported that the MDMA-assisted psychotherapy had helped them to some degree, and both felt that additional MDMA sessions could help assist them further on their way to healing from PTSD.

THE first half of the MAPS-sponsored Swiss MDMA/PTSD study has been completed. So far, six subjects have completed the MDMA-assisted psychotherapy study protocol--which involves twelve subjects who suffer from treatment-resistant posttraumatic stress disorder (PTSD)--and are now in the follow-up phase of the protocol. Subjects will be evaluated several times during the year after their third and last MDMA-assisted session.

Two subjects have dropped out of the study. They both decided to discontinue participation in the study after their first MDMA-assisted sessions. One of the subjects received the full dose of MDMA and felt unable to face and endure reliving the trauma--as well as its emotional sequelae--under the influence of the MDMA. After a disturbing first week following the MDMA experience, he stabilized and eventually returned to his usual state of mind. This demonstrated to us that even in a very difficult situation--which we assessed as an expected adverse event--the MDMA experience can be handled safely.

The other subject who dropped out of the study had received an active placebo. This is a low dose of MDMA (25 milligrams), followed by booster dose of 12.5 milligrams of MDMA two and a half hours later. This subject had to face previously suppressed, traumatic memories during the active placebo session--intensely reliving the trauma, but without receiving specific support from the MDMA. This also proved to be a very trying situation for both the subject, as well as the therapists, and required additional support for the integration of the experience in the following two to three weeks after the subject had decided to drop out.

A few months later we experienced a similar situation with another subject, who also received an active placebo. This situation helped to highlight the question of how the active placebo was "more active than a placebo." This low dose of 25 milligrams is distinctly below the commonly accepted threshold dose of 80 milligrams, and it can actually activate PTSD symptoms in some sensitive subjects. This is an important ques-

tion to look into with regard to developing future MDMA studies.

Two of the subjects who finished the protocol were evaluated as "non-responders." This means that they did not improve significantly after the MDMA-assisted psychotherapy, with the full dose of MDMA, as assessed by the main outcome measure and by the principal investigator's clinical judgment. Both subjects reported that the MDMA-assisted psychotherapy had helped them to some degree, and both felt that additional MDMA sessions could help assist them further on their way to healing from PTSD. We therefore applied for two additional MDMA sessions, with the possibility of administering a twenty percent higher MDMA dose. Final approval from the Swiss health authorities was obtained for this at the end of April 2008.

The first of the "non-responders" has completed the two additional sessions--with the higher MDMA dose of 150 milligrams, followed by a booster dose of 75 milligrams. This was well tolerated in both sessions, and did not lead to any significant rise in blood pressure, temperature, or any increase of typical MDMA side-effects. The follow-up measurements have yet to be performed, but the subject reported feeling further improvement. We have not yet been able to tell if this improvement is due to the additional sessions or the higher dose of MDMA. The other "non-responder" subject will go through the two additional sessions soon.

Along with Michael and Annie Mithoefer, we were able to present the preliminary results of our U.S. and Swiss MDMA/PTSD pilot studies at the World Psychedelic Forum conference in Basel, Switzerland in March 2008. Our work received a lot of positive attention from conference participants--and from the media, which is now helping us to recruit additional subjects for the Swiss study. With the help of the media, we have now received inquiries from another six potential subjects. If recruitment continues to be as promising as it is at the moment, then we hope to be able to finish the study within a year.

## MAPS Data Management

"Sherbie" (pseudonym)

Every step in a clinical trial is geared towards fostering the collection of high quality data--to support the protocol hypothesis, and to demonstrate that the drug is safe.

THERE ARE MANY KEY PLAYERS in the design and conduct of a clinical trial: the doctors, nurses, patients, regulatory agencies, ethical committees, etc. One of the most important players, which may sometimes not be considered from the lay perspective, is the data. Every step in a clinical trial is geared towards fostering the collection of high quality data--to support the protocol hypothesis, and to demonstrate that the drug is safe. My role is to take care of the data, from the very inception of the trial, to the final study report. I am a Clinical Data Manager (CDM).

The CDM is a behind-the-scenes player in the world of Clinical Trials. Typically, it is my job to design the data collection forms, to build the database(s), to enter the data, and to review the data ensuring that it is complete, clear, and consistent. The CDM works with raw data, in various forms, to prepare it for statistical analysis and reporting. I have been a CDM for many years in the pharmaceutical and biotech industry; this is my first time working with MAPS.

Over the past few months I have been working diligently to design a database for MAPS to use in storing data from this, and other MAPS trials. I have also been reviewing the data in paper form and entering them into the new database system. Once the data entry is complete, I will review the data to ensure that they are complete and consistent.

With the imminent completion of the first pilot MDMA study at Dr. Michael Mithoefer's clinic in South Carolina, it is now time for MAPS to collect, database, review, and analyze their results. Over the past few months I have been working diligently to design a database for MAPS to use in storing data from this, and other MAPS trials. I have also been reviewing the data in paper form and entering them into the new database system. Once the data entry is complete, I will review the data to ensure that they are complete and consistent. Missing information or inconsistencies will be investigated and resolved by sending formal queries to the investigative site for clarification. After all queries are resolved, the data will be put through a quality control step and the database "locked," so that no further changes can be made. At that time, the data will be ready for formal unblinding, analysis, and reporting by the MAPS statistician: a highly anticipated first step on the road to FDA approval.

## MAPS Clinical Research Team Explores **New Research Sites** in France and Spain—And Speaks in Ibiza



By Valerie Mojeiko,  
MAPS Clinical Research Associate  
valerie@maps.org

As MAPS' flagship MDMA/PTSD study in Charleston, South Carolina draws to a close with promising results, MAPS clinical research monitoring team has been busy scouting out potential new sites where we hope to replicate our results.

In June we traveled to Lyon, France and Barcelona, Spain to explore new possibilities for future research.

We frugally combined this with another trip to Ibiza, where I was invited to speak at the Club Health 2008 conference, with all expenses paid by conference organizers from John Moore University in Liverpool, England. I opened as a keynote panelist at the conference and spoke about MAPS' revolutionary grassroots work applying psychedelic therapy techniques to those people who are having difficult psychedelic experiences at festivals. It was fun and productive to network with a slightly different, though allied, set of people and organizations at this harm reduction event—and it significantly cut MAPS' travel expenses, since the conference paid for my trip across the Atlantic (as well as room and board in an Ibiza resort for a few days).

After departing from Ibiza, we arrived in Lyon, France, where we met with French psychiatrist Dr. Fred Rosenfeld, M.D. Rosenfeld and his colleague Olivier Chambon, M.D., are interested in conducting an MDMA/PTSD study with MAPS. They are currently in the very early stages of negotiating the maze of bureaucratic and political approval before they can even submit a formal protocol,

but our meeting set the next steps in motion and hopefully inspired collaboration in this process.

In Lyon, we boarded the train and traveled down the coast to Barcelona, Spain, where we took a few days off and were graciously shown around the city by psychedelic documentarian Ben de Loenan. (De Loenan directed and produced the Ibogaine documentary which is for sale in the MAPS online store.) We returned to work by heading to the Hospital de San Pau, a prestigious and historic hospital in the heart of Barcelona, blocks from Gaudi's famous Sagrada Familia.

The head of the clinical research unit—along with researchers Jose Carlos Bouso, Ph.D. and Jordi Riba M.D.—warmly welcomed us to their impressive inpatient research center. They presented us with a detailed slide show showcasing their broad research capabilities and experience. MAPS' first MDMA/PTSD study started in Madrid, Spain in 2000, under the direction of Bouso. Unfortunately, this study was shut down in 2002 as a result of pressure from the Madrid Anti-Drug Authority. Bouso said he has been patiently waiting for the right opportunity to resume his research, and he has now found the place to do it. MAPS is eager to renew MDMA/PTSD research in Spain, both as a symbol that we've overcome the political suppression of scientific research, and also because we need to treat more subjects in Phase II clinical trials.

It has been a long summer vacation, and with any luck we will be back to Barcelona and Lyon soon—next time to initiate these promising studies.

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Peter Gasser, M.D.  
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## LSD-Assisted Psychotherapy in Switzerland: An Update

SINCE MY LAST REPORT in the Autumn 2007 MAPS Bulletin, we have now completed six months of our fully-approved study "LSD-assisted psychotherapy in persons suffering from anxiety associated with advanced stage life-threatening disease." After the final step of approval was completed with the Swiss Ministry of Health (BAG), this became an intense and rich time of publicity for us. All of a sudden, there was a huge interest in Switzerland and abroad about this "first psychotherapy study with LSD in 35 years." I was also enthusiastic about reporting in this field, and, of course, it was an honor for me to become a person of interest just over night.

But this was not the main thing that I was concerned with. Far more important for me seemed the fact that it was now possible to speak in public about LSD therapy, and to provide "good" information about the topic. In other words, this new research has allowed me to leave the very polarized field of the 'War On Drugs,' on the one hand, and on the other hand, to take a more neutral or scientific position than in the counterculture movement. My intention was to find something in between, that would make LSD therapy more of a normal thing, like other therapies.

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It consumed a lot of personal energy to answer all of the journalists' questions, although—with only one exception—all of these people were fair and interested professionals who did not try to make a flat sensational story out of it. The exhausting aspect of all this was that I always had to think about what the right information and the core message that I wanted to give was, and how this will be read or listened to by the people who receive it.

Finally, I had to learn that people who are really against "drugs," and who fight against "drug consumption," put some pressure on the authorities. I also learned that there are some people in the Swiss parliament who are very critical of this new study. These observations were signals for me to withdraw from all the publicity until I am able to present some, hopefully, positive results from the work that I am currently doing.

So, since Easter 2008, it has become much quieter around the study, and that is okay, because it allows me to fully concentrate on the scientific and therapeutic aspects of the work. This was an abrupt

change in my own "information policy," as, for awhile, I feared that my publicity could bring the whole study in danger. However, there was an entirely positive aspect to all this in the way that it developed. Albert Hofmann was very happy to see that his work will be continued, and that his longtime wish will become realized—that LSD will once again become a medicine in the hands of medical doctors.

Albert was pleased to see how positive the new LSD research was accepted by the public, and the last television interview that he gave on December 19, 2007 on the Swiss national TV network was like a blessing over the study from his side. Since Albert died this past Spring, I am grateful that he was able to see the start of our work.

Recruiting subjects for the study has not been as easy as I thought it would be, and as other people told me it would be. Although our publicity reached hundreds of thousands of people, and, in this way, obviously, hundreds of potential candidates, there were only few people inter-

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ested in participating, and even fewer people were recruited for the treatment. I don't know the reason for that. Maybe it has to do with the possibility that people are afraid to be confronted about their disease and are also scared of being confronted with LSD. The public attitude does not help people to accept entering a deep process of self-exploration. The way the recruitment generally takes place has much more to do with personal contact and relationship. That is, physicians and therapists who know of the work with mind-altering substance inform and motivate potential subjects for the study, and so potential candidates then come to us.

As of this writing (June 22, 2008), we will soon be running the second LSD or placebo session with the first subject. The second subject that we examined did not qualify for the study because of his daily consumption of marijuana, which is an exclusion factor. He would have had to withdraw for sixty days before starting the study, and then for another three to five months during the treatment phase. The third subject, who has been fully approved at the baseline exams, will start the study in the next month. Two further subjects are currently waiting for the baseline examination with the independent rater. So far, all five subjects are men. Two subjects are suffering from cancer, one from HIV/AIDS, another from progressive muscular disease, and the other from a neurological disorder.

The first subject had his initial LSD/placebo session in early June. The subject, the other therapist, and I were all con-

vinced that he had the LSD dose. However, at the moment the seal of the blinding has not yet been broken. In his session the subject entered a deep process of psychic pain and sadness about his life situation, his loneliness, and his loss of trust in life after his diagnosis of stomach cancer two years ago. He experienced a sense of deep relaxation and cultivated a spiritual feeling of turning negative things into good, but he also experienced a deep despair about his depressed withdrawal from his girlfriend, and his exhaustion over being stuck in his work situation.

I am very curious about how the second session on June 27 will turn out, and about the follow up studies that will be done after three months. It is difficult to say how the subject will develop, as two LSD sessions and three months in the treatment phase are short amounts of time for psychological processes to occur. This is due to the methodology of the study. Nevertheless, I am convinced that we can demonstrate positive changes in this period.

Last, but not least, I would like to say that I work mainly as a psychiatrist/psychotherapist in my office, and doing the study is extra work. I have no university or research background I can rely on. The support and help from MAPS is very important in this situation. It is not just the financial side that they help with through their fundraising. They also help with the manpower and the know-how aspects of the study, which make this collaboration indispensable.



By Albert Hofmann, Ph.D.  
Translation from German  
by Elisabeth Riccabona

LSD showed me  
the inseparable  
interaction between  
the material and  
the spiritual world.

## "To Be Read at the Funeral" By **Albert Hofmann**

LOOKING BACK ON MY LIFE, I presume that the constellation of stars—or that whatever could determine one's fate in life—indicated good fortune when I saw the light of day on January 11, 1906 in Baden, Canton of Aargau. My father, Adolf Hofmann, and my mother Elisabeth, born Schenk, met in Münchenstein, near Basel, where my father worked as a locksmith for one of the subsidiaries of the mechanical engineering group Brown-Boveri. Soon afterwards, he was transferred to the company's headquarters in Baden.

Although my father rapidly progressed to the position of foreman, and then master in the tool-making division, our family had to live a rather modest lifestyle as wages, even for such a position, were low at that time. Together, with my younger brother and my two younger sisters, I lived a childhood which was not always free of worries but on the whole quite a happy one.

**MY** FIRST childhood memory is an image of large red strawberries in the garden where my mother used to carry me around in her arms. Another image I remember: It is night time, many people are standing in the street. They are pointing towards the sky in excitement. There is a comet in the sky. It was the Halley's Comet in 1910.

Another striking memory I have is of the day we moved from Schönau Street to Martinsberg Street. I am standing in front of the house, holding my little brother's hand and looking at the new neighborhood, where rowan berry trees glow golden in the autumn sun.

Between the age of five and ten we lived there, beneath the hill upon which the remains of Stein Castle were standing. On the opposite side of the street was a farmhouse, next to it a blacksmith's shop and a wainwright's. I played with the farmer's kids in the barn and was in the stable when the farmer milked the

cows. I was riding along with the farmers on carts, pulled by cows or horses, to the fields where the animals could graze. I rode with them to make hay, and in autumn up to the Allmend which lay high above town. Up there you could often hear the distant roaring of guns sounding from the Alsace; it was at the time of the First World War. I also spent a lot of time at the blacksmith's, watching how the blacksmith shoed the horses and wound the red hot iron hoops onto the wooden cartwheels.

The area surrounding the remains of Stein Castle was a wonderful place for us kids to play. I can still remember hearing my mother calling out from the kitchen window for us kids to come in for lunch or dinner when we had forgotten all about time while playing up in the ruins. The way to school, which led through the old town gate and through alleyways of the old town, always brings forth many fond memories.

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It was like the banishment from a child's paradise when we moved away from Martinsberg Street to Dynamo Street, to a hideous apartment building directly across from the factory entrance. We were forced to move due to my father's illness – he was suffering from pulmonary tuberculosis – which had deteriorated, and even the short way from Martinsberg Street to the factory had become too strenuous for him.

Whenever I could, I left the grim and dreary factory quarters and went back up to Martinsberg, into the forest, to the meadows and fields. During these expeditions I experienced the magic and charm of the Jura landscape, which was in constant change with the seasons.

It was there that, during enchanted moments, the wonder of creation revealed itself to me in the beauty of nature, and already then forged my view of the world in its basic features.

**A**FTER finishing elementary school I had planned to attend high school in order to be granted entry into university. However, considering my father's serious illness, my parents thought I should ensure my own income as quickly as possible, and so it was that they sent me to start a commercial apprenticeship with Brown-Boveri.

After dutifully completing the three year apprenticeship, and obtaining security regarding my future professional life in the form of a diploma, my dream to go to university eventually came true. My dear godfather Hans Kühni, founder of the Kühni machine factory in Allschwil, paid for the tuition fees at the Minerva private school in Zurich. I absorbed the knowledge like a dry sponge and passed the general qualification for university entrance in Latin after only one year.

Fascinated by the mysteries of the subject, I decided to study chemistry at the University of Zurich. As a citizen of Weiningen in the Canton of Zurich I received a scholarship from the university. Living with my parents in Baden with no money for any distractions I immersed myself completely in my studies as my only enjoyment. Professor Paul Karrer, Director for the Department of Chemistry at that time, soon found me a position as an assistant to the professor. At the age of 23 I had already finished my Chemistry studies, after only eight semesters and received my Ph.D.

My father passed away three months before I finished my studies. However, before his death I was still able to show him my employment contract which I had already signed with Sandoz Pharmaceuticals.

In May 1929, I started my professional life, joining the Basel-based Pharmaceutical-Chemical Department of Sandoz Laboratories, whose director was Professor Arthur Stoll. At the laboratories we were studying the properties of medicinal plants, the kind of work that entirely fulfilled my love of plants. I found complete satisfaction in my work when isolating, elucidating the chemical structure, and synthesizing the active substances of medicinal plants. So it was that my whole professional career evolved all around the Sandoz Pharmaceutical Laboratories, starting off as a coworker with Professor Stoll, working my way up to become team leader, and eventually being appointed Director of Research for the Department of Natural Products.

Valuable drugs like Methergin, Dihyergot, and Hydergin derive from substances I produced during my studies. By research and chance I discovered the psychoactive agent, which became known worldwide as LSD. In my book

entitled LSD: My Problem Child I illustrated the history of LSD and its relation to the Mexican magic mushrooms. During lecture tours and conference visits I formed lasting friendships, mainly with colleagues from the United States, Mexico and Sweden.

The shining light that guided me through my professional career also accompanied me in my private life. In Anita Guanella I found the partner who gave me great happiness in marriage and in my family.

**WE** MET in 1934 while on skiing holidays in Arosa. The first five years of our marriage we lived in Basel in Holee Street. Our two sons, Dieter and Andreas were born there. Several times during the war I had to go to Ticino for a few months to serve in the army.

During a holiday in May 1946, we moved to the countryside, to Oberwiler Street in the municipality of Bottmingen. For the next twenty-seven years we lived there, in our own house with its beautiful garden standing amidst a then still entirely rural area. My family soon grew bigger. We were blessed with two daughters, Gaby and Beatrix.

Only some of the many fond memories I have of that wonderful time, the middle of my life, I shall mention here: Our holidays in the Engadin valley, where Anita felt particularly happy as she originally came from the Canton of Graubünden, the home of her parents. While hiking and mountaineering together we experienced the magic, grandeur and sublime beauty of this high mountain valley. One of the highlights was certainly our ascent to the Bernina peak.

I also very fondly remember the great trips to India, Thailand, and particularly the expedition to indigenous Indian areas in Mexico. These trips were part of my work and Anita used to always accompany me.

Shortly before it was time for me to retire, and after the formerly rural and quiet municipality of Bottmingen had developed into a busy suburb, we decided to move further out into the countryside. In the village of Burg, at the very end of the Leimen valley, we found the ideal place to live. According to the plans and ideas of each family member, we build a house up at Rittimatte. There we lived happily for many years, particularly enjoying the many visits from our children, grandchildren and friends. While Anita found her love and joy in caring for flowers in our garden and house, like she already did in Bottmingen, I spent my time in the silence of my "hermitage," writing literary works, publications and dissertations, partly associated with my former occupation, as well as writing down my personal understandings and thoughts on natural philosophy.

It was also up at Rittimatte that my circle of life closed itself as I found the paradise of my childhood again, the same landscape as on Martinsberg, where I used to be blissful as a boy, the same meadows with the same flowers and the same view into the far distance.

Paracelsus described nature and creation as a "book that was written by God's finger". During my life I was given this exhilarating and entirely comforting experience: The one who understands how to read this book, not only with regards to scientific research but with marveling and loving eyes, will find a deeper, wonderful reality revealing itself--a reality in which we are all secure and united for ever and ever.

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again

## An Interview with **Albert Hofmann**

By David Jay Brown, M.A.

THIS IS A BRIEF INTERVIEW that I did with Albert Hofmann, shortly after his 100th birthday.

*David: What originally inspired your interest in chemistry?*

Albert: My interest in chemistry was inspired by a fundamental philosophical question: Is the material world a manifestation of the spiritual world? I hoped to find deep, sound answers from the solid laws of chemistry to answer this question, and to apply these answers to the external problems and open questions of the spiritual dimensions of life.

*David: When you first discovered LSD did you have an intuitive sense that this drug would have the enormous impact on the world that it has?*

Albert: I was convinced from the very beginning of the fundamental impact.

*David: What motivated or inspired you to go back and synthesize LSD a second time in 1943?*

Albert: I synthesized LSD a second time for a deeper pharmacological investigation.

*David: How has your own use of LSD effected your philosophy of life?*

Albert: LSD showed me the inseparable interaction between the material and the spiritual world.

*David: What sort of association do you see between LSD and creativity?*

Albert: Since LSD opens up what Aldous Huxley called “the Doors of Perception”, it enhances the fields of creative activity.

*David: Do you think that LSD has effected human evolution?*

Albert: I do not know if it has effected human evolution, but I hope so.

*David: What are your thoughts on why LSD is almost universally prohibited by governments around the world?*

Albert: LSD belongs to a class of psychoactive substances that provide the user with a new concept of life, and this new way of looking at life is opposite to the officially accepted view.

*David: What role do you see LSD playing in the future?*

Albert: In the future, I hope that LSD provides to the individual a new world view which is in harmony with nature and its laws.

*David: What do you think happens to consciousness after death?*

Albert: I think that each individual's consciousness becomes part of the universal mind.

*David: What is your perspective on the concept of God and spirituality?*

Albert: God is the name of the universal creative spirit.

*David: What sort of relationship do you see between science and mysticism?*

Albert: Science is objective knowledge and mysticism is personal spiritual experience.

*David: What do you attribute your long life to?*

Albert: I don't know.

*David: Are you hopeful about the future, and how do you envision the future evolution of the human species?*

Albert: I am hopeful about the future evolution of the human species. I am hopeful because I have the impression that more and more human individuals are becoming conscious, and that the creative spirit, which we call “God,” speaks to us through his creation—through the endlessness of the starry sky, through the beauty and wonder of the living individuals of the plant, the animal, and the human kingdoms.

We human beings are able to understand this message because we possess the divine gift of consciousness. This connects us to the universal mind and gives us divine creativity. Any means that helps to expand our individual consciousness—by opening up and sharpening our inner and outer eyes, in order to understand the divine universal message—will help humanity to survive. An understanding of the divine message—in its universal language—would bring an end to the war between the religions of the world.



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...the Symposium

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## Psychedelic Research: The French Revolution

MANY SIGNS suggest that there is a worldwide rebirth of psychedelic research; a new era where scientific facts, therapeutic benefits, social maturity and a better understanding of the traditional and sacred uses of psychoactive plants have started dissipating prejudices about what have simplistically and erroneously been called ‘drugs’. Psychedelic research is indeed opening revolutionary venues in many fields, and it is in an equally revolutionary context that the first Paris Spring Symposium on Hallucinations in Philosophy and Cognitive Science took place last March. This is to be taken literally too, for the Symposium took place in the historical Couvent des Cordeliers (in the Latin Quarter, at the heart of Paris), where the French revolutionaries used to hold their secret meetings.

The Couvent is now part of the Université de Paris School of Medicine, and, over four days, it hosted a group of researchers, students, practitioners and freelancers for a series of truly multidisciplinary scientific talks and roundtable discussions around the topic of hallucinations and modified states of consciousness. Within the general framework set up by philosophy and cognitive science, talks and discussions dealt with issues and subjects as diverse as clinical therapy, society, psychology, visionary art, shamanism, phenomenology, neuroscience, cognitive models, psychiatry, anthropology, and pharmacology.

The Symposium took place two days after the World Psychedelic Forum in Basel, which allowed for several international guests to be present. The atmosphere was academic, yet relaxed and very pleasant. It was a delight to hold such an event in France, where psychedelic research is very timid and underrepresented at best.

### Some Background

In spite of early efforts by pioneers such as Roger Heim and Robert Goutarel (who, respectively, studied psilocybin mushrooms and iboga in the 1950s), there is currently no psychedelic research in France. Given this, as a student in Cogni-

tive Science and a MAPS member, I was amazed when, in 2006, I heard about Juan González's Paris research seminars on hallucinations in the context of Philosophy and Cognitive Science. Attending these seminars was a real pleasure; it was the first time that I could use my scientific knowledge to share and discuss with others ideas about altered states of consciousness and how they relate with theories of perception and cognition.

I was all the more surprised when I learned that he was one of Francisco Varela's last Ph.D. students, since the enactive framework set forth by Francisco and his colleagues has been an inspiring theoretical source for me. Juan, who is a professor of Philosophy and Cognitive Science at Morelos State University (Mexico), was a guest professor for two consecutive years at the School of High Studies in Social Sciences (École des Hautes Études en Sciences Sciales) in Paris, and this is what made those seminars and workshops possible. That was the starting point of an ongoing scientific collaboration and friendship, which culminated in the joint organization of the 2008 Spring Symposium.

Theoretical Issues and Scientific Goals

Altered states of consciousness and, more particularly, perceptual hallucinations, have puzzled philosophers and scientists interested in cognition for a long time. These “abnormal” states of consciousness have often been evoked in order to, among other things, support philosophical skepticism, provide foundations for the idea of veridical perception, support indirect theories of perception, study the nature and mechanisms of consciousness, help set criteria for mental-health evaluation, explore therapies in clinical psychology, inspire the work of artists and, last but not least, understand what William James called “the varieties of religious experience.”

Nevertheless, as of today, the precise phenomenology of these states remains widely unknown to the philosophical and scientific communities. Moreover, the cur-

rent theories of hallucinatory experience seem to be unsuited or outdated, starting with the definition given by Esquirol in the 19th century --and still widely used-- according to which a hallucination is “a false perception or a perception with no object.” Furthermore, relevant data about hallucinations are spread out across a rich variety of disciplines, such as literature, history, ethnobotany, psychiatry, anthropology, psychology, cognitive neuroscience, philosophy and art.

The goals of the symposium were the same as those of Juan’s original seminars and workshops in the past years—to approach the hallucinatory experience, within a transdisciplinary framework, in order to:

1. better understand its precise phenomenology,
2. test the validity of epistemological arguments, and of specific stances within Theory of Perception,
3. review existing empirical studies on the topic, and
4. inquire about the nature of knowledge and of consciousness in (post)modern philosophy and cognitive science.

Since we are interested in the nature and mechanisms of perception and cognition, and, specifically, in the distinction between ‘veridical’ and ‘hallucinatory’ experiences --and because of certain methodological advantages-- we especially focus on the accounts of those who have experimented with psychoactive substances, and on the empirical studies concerning the use of those substances.

Psychedelics thus play an important role in our approach since they offer reliable means of inducing temporary (and, to an extent, controlled) altered states of consciousness in healthy subjects. Moreover, they also turn out to be a great tool for current consciousness research in cognitive science.

#### Debriefing the 2008 Symposium

After presenting a summary of previous work and a general overview of the Symposium, we had the pleasure to host an introductory talk by Pierre Etevenon, a French psychedelic research pioneer in neuropsychopharmacology. This retired head of a research laboratory at the French National Institute for Health and Medical Research (INSERM) did part of his training at the University of Princeton, under the supervision of Humphrey Osmond. Then, at the Hospital Sainte-Anne in Paris, he studied the effect of many psychoactives, including psilocybin mushrooms as well as a THC-based jam on a group of psychiatrists.

We also had the pleasure of hosting Rick Doblin and

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Valerie Mojeiko as speakers. Rick gave an overview of current MAPS research projects, and Valerie presented both the results of a study concerning an ibogaine-treatment against drug-addiction and the psychedelic emergency projects at Burning Man and Boom festival. The final talk of the first day was given by Markus Werning, from Düsseldorf University, who introduced, from a philosophical point of view, the theoretical problems raised by the hallucinatory experience and how it challenges the representational approaches to perception. We ended the day with a welcome drink near Notre-Dame de Paris.

For the following day only, we left the Couvent des Cordeliers and held the talks in a very prestigious and symbolic venue--the French Ministry of Research.

Jean Petitot, from the École Polytechnique, presented a model of spontaneous neural activations, using neuro-physiological data about the visual cortex combined with mathematical tools. This model accounts for the geometric visual patterns induced by mescaline that Klüver described in the first-half of the 20th century.

Then Claire Petitmengin, a phenomenologist from CREA (epistemological studies lab in Paris), spoke about the microdynamics of the perceptive experience and presented a neuro-phenomenological method of first-person data collection, stressing the importance of a special training for self-observation in scientists studying consciousness. A longtime practitioner of meditation, she showed that these techniques of inner awareness share many similarities with Tibetan meditation practices. She concluded by evoking the phenomenology of the ayahuasca experience, referring mainly to the works of Benny Shanon, who incidentally was the next speaker. Benny Shanon, psychologist and philosopher from The Hebrew University, was kind enough to come all the way from Israel. He gave an exciting and comprehensive presentation entitled “Ayahuasca Visions: A Program for Cognitive Research.” This second day was closed by a presentation on trance and hallucinations by Dennis Wier, from the Trance Research Foundation.

On the third day, anthropologist Sébastien Baud, from Strasbourg University, discussed the use of four different psychotropic plants among the Awajún Jivaro indians from Peru, namely ayahuasca, tobacco, coca and the San Pedro cactus. He was followed by another anthropologist, Bia Labate --founder of Brazilian interdisciplinary psychoactive research group NEIP-- who gave a special presentation entitled “What Can Native Uses of Ayahuasca Lead Us to Think About Our Concepts of Hallucination and Drugs?”

Then Nicolas Franck, a psychiatrist from the Institute of Cognitive Science in Lyon, presented a neurocognitive approach to verbal hallucinations in schizophrenic patients. The afternoon hosted the colorful presentation of Canadian visionary artist Laurence Caruana: “Entheogens and Visionary Art.” The final talk took place in the form of a discussion between Dutch movie director Jan Kounen (famous for his film on the ayahuasca experience *Other Worlds*) and the attendance, around the nature and uses of ayahuasca and other master plants of traditional Shipibo-Conibo medicine.

The last day was dedicated to roundtable discussions gathering experts from several fields. The first roundtable gathered Pierre Etevenon, Spanish psychologist and psychotherapist Manuel Villaescusa, French neuro-psychopharmacologist Frederick Bois-Mariage and Finnish neuroscientist Levente Moro around the topic “Empirical Sciences and Subjectivity.” The second roundtable discussion focused on “Philosophy & Hallucinations” with Benny Shanon, Markus Werning and Jérôme Dokic, a philosopher from Institut Jean-Nicod in Paris. Finally, Pierre Etevenon (who also wrote about yoga and states of consciousness), Dennis Wier, Laurence Caruana and Alexandre Quanranta (philosopher, lucid-dream and yoga instructor) discussed the various “Practical uses of Altered States of Consciousness.” This intense week ended with a convivial dinner in a Parisian “brasserie,” followed --for the ones still awake-- by an all-night long party, starting with natural trance and finishing with psychedelic trance.

#### Organizational Issues

Since the beginning, our research group has benefited from the precious support of the RISC in France (Cognitive Science Information Network, affiliated to CNRS), who is hosting our Web site, promoting our activities, providing working spaces and supplying video equipment. We are very grateful for its enthusiastic working staff. For a number of reasons, this year’s symposium was self-financed, (we’re looking for and hoping to get financial support for the next Symposium). Registration was free; attendants were selected by the scientific committee after preregistration. Our speakers came at their own expense, in a generous gesture, to participate in the event, and some had financial help from their own institutions. We also benefited from the help of qualified volunteers. Our idea in making this event free was to make it accessible, especially for students. It turned out to be quite successful as it attracted a large number of students from all over France, Belgium, Switzerland, and Germany. Despite

The Couvent... hosted a group of researchers, students, practitioners and freelancers for a series of truly multidisciplinary scientific talks and roundtable discussions around the topic of hallucinations and modified states of consciousness.



the lack of external funding, we had a professional sound engineer as well as a cameraman, and most of the talks in French were simultaneously translated into English, using a wireless headset system (and the services of an amateur but inspired translator).

We are aware of several flaws regarding the organization and are working toward improvement for next year’s symposium. For instance, for 2009 we will have twice the capacity for the venue in order to accept more participants, and we will discourage no-show’s and get some funding by charging an affordable registration fee. We are very open to suggestions and financial support from sponsors for next year’s Symposium (April 8-11, 2009, Paris).

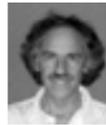
#### Future Actions and Conclusions

One of our current goals is to share the insights and knowledge gained during the past events with students, researchers and the general public in France and internationally. Several steps have been taken to that end. Some selected contributions of this year’s symposium will be published in a forthcoming issue of a journal. The whole symposium 2008 has been videotaped and we are currently working on editing the audio podcasts and video DVDs. Videos from the 2007 workshops are already available and can be ordered through our Web page: <http://hallucinations.risc.cnrs.fr/symposium2008/eng> (sales are solely used to keep our events running).

The French edition of *Scientific American* requested an article from one of our speakers and the scientific magazine *Cerveau et Psycho* (Brain and Psychology) is preparing a special issue for 2009 on hallucinations, with several contributors from our speakers. The editing committee is enthusiastic and will highlight some not-so-well-known scientific facts regarding psychedelics, such as their non-addictive nature and therapeutic potential. Furthermore, we are planning various events in the years to come in order to maintain an interconnected community of researchers and students around this topic. This shall be our humble contribution toward stimulating psychedelic research in France. Moreover, we were pleased to learn from Rick Doblin that MAPS is exploring the possibility to start a French MDMA/PTSD pilot study.

Finally, we are glad to announce that we are finalizing the legal status of a non-profit Research Association, and are already preparing next year’s symposium. Don’t hesitate to contact us regarding any questions, comments, suggestions, financial support, collaboration proposals, etc. through our Web page -- <http://hallucinations.risc.cnrs.fr/symposium2008/eng> -- or at: [parishallucinations@gmail.com](mailto:parishallucinations@gmail.com)

## Ayahuasca: Legalized Works in the Netherlands!



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...we now celebrate  
 in the Netherlands.  
 These ceremonies are  
 permitted there  
 because of  
 the freedom  
 of religion.

AFTER my first experience with MDMA, which was overpowering in every regard, I finished three years of training in psycholytic psychotherapy at the Swiss Society for Psycholyse Therapy during 1989 to 1992. In 1989, by divine providence, as I believe, and after a series of “synchronicities,” I likewise came into contact with ayahuasca. I won friends in the Amazon, and in Brazil I learned about the work of Santo Daime. Santo Daime is a form of spiritual practice that utilizes ayahuasca, the ancient South American psychedelic brew. It counts as a true panacea, as the “teacher of all teachers” or “o professor dos professores,” as we sing in a “hino.” (Hinos are songs which are received by the “astral world.”)

At first, Paulo Roberto, one of the top leaders of the Santo Daime, invited me to join him on a trip through the U.S. In four weeks I experienced eight ceremonies—or “works”—from L.A. to New York. Then, to my great surprise, I received from Paulo three liters of the holy juice to start the first Santo Daime works in Germany.

So, since 1989, I began leading spiritual works with the Santo Daime. However, because it became unlawful to practice in Germany during the last few years, we now celebrate in the Netherlands. These ceremonies are permitted there because of the freedom of religion. These works are led as “marathons,” because the people there come from far away. We are together from Friday evening until Sunday or Monday. We celebrate two spiritual works each time, and in August we are together for six days and celebrate four “trabaljos.”

We prepare the works carefully, while we speak, and we talk about the fears and the wishes of the participants. After the works we spend a lot of time together in order to integrate our experiences.

I will give some examples of the curative effect of ayahuasca.

During the entire time that I was in Brazil, and took part in the works, I did not need to use my asthma medication, which is a kind of cortisone. I also experi-

enced a powerful healing from influenza in the middle of the rain forest. Within about five hours of the work, with a high dose of ayahuasca, I overcame the fever and the sinusitis completely. I vomited strongly, and with this purification came all the pus from my nose, maxillary sinuses and bronchi. I know from my many experiences with the Santo Daime that cortisone, as well as antibiotics, are not necessary at all.

However, the most important curative power of the Santo Daime lies in the following observation: if the work is well-guided, then the juice brings us into contact with an immense “forca” (power). We must surrender ourselves to this power. She leaves us, in the end, no choice. And exactly herein lies the unique remedial potential of this work. During contact with this “heavenly power” our (putative) problems and fears lose their power on us immediately. Our worries become trifling, and we can feel how much they controlled us absolutely needlessly. We (body and soul/mind) relax. This happens in two ways: on the one hand, by the physiological effect of the drink, and on the other hand, by its psychic strength in the well-led ritual. We can feel, in the end, secure and maybe even happy, although in the objective outside world nothing has changed.

Normally, we meet on a Friday evening in our house in Holland. First, everyone has the opportunity to discuss their questions, problems, conflicts or wishes. Then we meet to celebrate the ritual. At this time there are some proven rules that we follow, whose sense is often recognized only bit by bit. Everyone who participates wears white clothes, or at least light beige. Women wear clothes or skirts. Men and women sit facing each other at a table that is also decorated in white. The leader sits in the front and center. To confirm that we mean it seriously, and are ready to accept all of what may come, we pray at first. Even if the prayer sounds Christian, it still has nothing to do with the church-

-as through MDMA and the Santo Daime I have experienced a complete conversion, from Christianity to Jesus and to the real source of all being. -

Then we drink the first dose. Afterwards we sit down, upright in a meditative posture, and focus inwardly. Sometimes we sing “hinos” (sacred songs) in which we ask the higher forces--as well as the sun, moon, stars, the Earth, the wind, and the sea--for help with our work. We do not speak during the ritual at the table. After approximately an hour we drink the second dose. One of the major advantages of the Santo Daime is that we do not develop any tolerance to the ayahuasca, so we can drink as often and as much as is necessary or reasonable. I can adjust the dose as well, so that it seems optimum for everybody. After about two hours we have a “break” of about half an hour. Everyone can then lie down and dedicate themselves to their inward journey. Perhaps, we still drink a third time. The work is supported over and over again by “hinos,” which have the ability to canalize the energy and to steer the thoughts in a positive direction. Without this there would be a risk of the “energy” becoming very heavy, and then some could become entangled in dark thoughts. After the “break” the ritual continues for approximately two more hours. At the end we pray again together. To gradually “come down” a suitable music is played.

On the next day we meet at midday for a detailed integration conversation. At the same time we also prepare for the bigger work of Saturday evening. Then, in the evening, at about 7:00, we meet again in white. We drink the ayahuasca three or four times. In the last “round” we dance together, in a quite special, ritual dance, while we sing “hinos.” This type of dancing offers unprecedented opportunities, and equally important basic lessons to learn for our lives and our happiness. Singing is, of course, one’s free choice. Those who might find it too demanding can simply remain in their concentration. Then, on Sunday, we meet again about midday for the next integration. Afterwards is, again, a free time, which we can use for walks in a nice area. Then, early in the evening, we gather for an “open” meeting. In each case I decide spontaneously what we will do together (our method, etc.). This meeting serves to further strengthen and integrate that which we have learned or recognized.

One of the most important lessons that I learned during the works with the Santo Daime is not to react to the “negative” moods or actions from others. This is how I see the meaning of the phrase “If one gives you a blow on your right cheek, present the other also to him.” I’m still learning to live my life in this direction of love and forgiveness. During the works with ayahuasca we can learn

to steer our thoughts in a positive direction. The power of the plant spirits sometimes brings us completely to the border, and herein lies the special remedial potential of this “magic drink.” In the “Grenzsituation” nothing else is left to us than to completely surrender, no matter how we feel. This is the main goal--to surrender to the divine or the universe.

### My Way

On account of my special education and long-standing experience I carry out the trabalhos in quite a special way. A very important aspect of my work is to show how we can handle situations when we are confronted with people who (at least for ourselves) are behaving “negatively.”

It is very important that we learn not to react to it in the same negative way. So not “an eye for an eye” but forgiveness. This depends substantially on the fact that the forgiving is not only theoretical but really from the heart. In this manner, we are able to master the difficult task of “integrating the shadow” as C.G. Jung called it.

### Integration

To “integrate” the ayahuasca experience is at least as important as the work (ritual) itself. Only he, who practices the truth comes to the light. Another special point of my works is that we all stay together after the trabalhos. By staying

together we have a very special opportunity to integrate into our life that which we might have seen or recognized during the works. We can then immediately test this out together, or discuss other questions, problems or conflicts, and try to solve them with the power of love and forgiveness.

### Dates

Our works take place every three months. The next work will take place from the 7th to the 10th of November, 2008.

Last, but not least, I want to mention that because of my first experience with MDMA there arose the big opportunity to meet Dr. Rick Doblin. As a member of the European College for the Study of Consciousness (Das Europäische Collegium für Bewußtseinsstudien), I helped to make connections between him and the “psychedelic society” in Europe. I am deeply grateful for the indescribably important work and success of Rick and MAPS.

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## Feds Continue to Barricade Marijuana FDA Drug Development Research: **NIDA Rejects Vaporizer Protocol, DEA Continues Strategy of Delay**



By Jag Davies,  
 ACLU Drug Law Reform Project  
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To grasp the historically  
 bizarre and unparalleled  
 nature of state medical  
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OVER THE PAST TWELVE YEARS, a dozen U.S. states have passed laws either through ballot initiatives or state legislation allowing for the use of physician-supervised medical marijuana, and a dozen more states--such as Illinois, Wisconsin, Minnesota, New York, and Michigan--have taken steps to pass similar laws that could pass over the next five years. To grasp the historically bizarre and unparalleled nature of state medical marijuana laws, one must remember that there is no other instance in recent history when states have regulated medicine--for better or worse, that has been the sole responsibility of the U.S. federal government's Food & Drug Administration (FDA) for most of the past century.

Thankfully, one nonprofit pharmaceutical drug development organization--MAPS--has been working diligently for the past two decades to go for the 'whole ball of wax' by attempting to design, fund, obtain government approvals, and conduct the clinical trials that are necessary to bring the marijuana plant itself to market as an FDA-approved prescription medicine in all 50 states. Unfortunately, rather than conducting research, MAPS has been drawn into lengthy legal and political battles with government agencies that have a vested interest in the status quo--the National Institute on Drug Abuse, also known as NIDA (a branch of the National Institutes of Health, or NIH), and the Drug Enforcement Agency, also known as DEA (an agency in the Department of Justice). DEA and NIDA are overseen by the White House's Office of National Drug Control Policy (ONDCP), a Cabinet-level office that coordinates all of the executive branch's "drug control" efforts.

The FDA itself is not officially opposed to medical marijuana research, but DEA and NIDA have the power to obstruct privately-funded clinical research aimed at evaluating whether smoked and/or vaporized marijuana meets the requirements to be developed into an FDA-approved prescription medicine. NIDA has refused

to supply marijuana to two FDA-approved protocols sponsored by MAPS, preventing these studies from taking place.

NIDA has a monopoly on the supply of marijuana, but no other Schedule I drug, that can be legally used in federally-approved research--despite a federal law that requires adequate competition in the production of Schedule I drugs. Human studies on any Schedule I drug must gain approval from the Food and Drug Administration (FDA), yet for studies with marijuana, researchers must submit their protocols for an additional HHS/NIDA review process that also exists for no other drug. Moreover, the HHS/NIDA review has no deadlines and no formal appeals process, in contrast to the FDA's 30-day deadline, resulting in lengthy delays or refusals in providing research material. Furthermore, NIDA provides low-potency material with limited cannabinoid profiles for research, with researchers unable to optimize the strain of marijuana they prefer to use for costly drug development efforts. NIDA cannot even guarantee that the same material will be available for prescription use should FDA determine that safety and efficacy has been proven, rendering any drug development effort using NIDA marijuana impossible.

The end result is that NIDA's monopoly deters privately-funded researchers from proposing or conducting medical marijuana research, since financial sponsors will not invest millions of dollars into research studies until there is reliable access to a supply of high-quality research material that can be used both in research and--if the research should prove successful--as an FDA-approved prescription medicine.

Update: Vaporizer Protocol Rejected by NIDA

For the last five years, NIDA has refused to sell 10 grams of marijuana for a MAPS-funded laboratory study evaluating the effectiveness of a marijuana vaporizer. The goal of this study is to gather further information about the chemical constituents that are contained in the cannabis

vapor stream. A vaporizer is a non-smoking drug delivery device that eliminates the products of combustion that patients would otherwise inhale after burning marijuana. The Institute of Medicine recommended the development of non-smoking delivery devices in its landmark 1999 report on medical marijuana.

MAPS' initial vaporizer protocol was submitted to NIDA in June 2003. Although NIDA claims it will respond to protocols within 3-6 months (a far cry from FDA's 30-day deadline), NIDA failed to respond for over a year, forcing MAPS to sue for "unreasonable delay" under the Administrative Procedures Act. Although the suit was dismissed without prejudice, NIDA finally rejected the protocol in August 2005, more than two years after it was submitted. Less than a month later, MAPS responded to NIDA's rejection with specific objections to each of their critiques. More than 3 years later, NIDA still hasn't replied.

On January 16, 2008, MAPS submitted a redesigned protocol for scientific review by NIDA. The submission included three supportive letters from peer-reviewers urging NIDA's support and confirming the study's scientific merit. Five months later, on June 18th, NIDA responded by not only rejecting the protocol, but also by asking an exorbitant number of questions that appeared to be designed to delay us as long as possible. Chemic Laboratories, which would conduct the proposed study, responded to all of NIDA's questions in August and is once again awaiting a response.

Update: Eighteen Months After Favorable Ruling from DEA Judge, No Response from DEA on MAPS-Sponsored Marijuana Production Facility

DEA, meanwhile, protects NIDA's monopoly by refusing to license alternative production facilities, such as Professor Lyle Craker's proposed MAPS-sponsored facility at the University of Massachusetts-Amherst. Craker, who is director of the medicinal plant program in the Department of Plant, Soil and Insect Sciences at the University of Massachusetts-Amherst, has been attempting for over seven years to obtain a DEA Schedule I license to manufacture marijuana exclusively for

privately funded, federally-approved research.

Thanks to the problems associated with NIDA's monopoly, MAPS' primary focus with marijuana research since 2001 has been sponsoring Craker's applications for regulatory approval and associated legal struggles.

In June 2001, with support from MAPS and UMass-Amherst's approval, Craker applied to the DEA for a license to manufacture marijuana exclusively for use in federally-approved research. One of the DEA's primary tactics for stifling research is delay, and Craker's application has been a case in point. Six months after the application was submitted, the DEA claimed it was lost. After the application was resubmitted in 2002, the DEA failed to respond for two-and-a-half years, forcing Craker to sue the DEA in federal court for unreasonable delay. This prompted the DEA to finally reject Craker's application in December 2004, three-and-a-half years after the original application was submitted. In turn, MAPS and Craker immediately requested an Administrative Law Judge hearing, which took place over the course of 11 months in 2005. (Dr. Craker was represented in those proceedings by ACLU attorney Allen Hopper and Julie Carpenter from the Washington D.C. law firm of Jenner and Block).

On Feb. 12, 2007, following a comprehensive review of the available evidence from the 2005 DEA law hearing, DEA Administrative Law Judge Mary Ellen Bittner issued a decisive--but nonbinding--opinion and recommended ruling that Craker's application be approved. It is up to the DEA to decide whether to accept or reject Bittner's recommendation, but since there is no set deadline for DEA's decision, the agency appears content to continue its strategy of delay.

If the DEA rejects Bittner's recommendation, or if the delay continues so long as to be deemed "unreasonable" under the law, MAPS and Dr. Craker can appeal to the Federal Court of Appeals for the D.C. Circuit.

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marijuana

that there will be a price to pay for the continued political obstruction of medical science.

Organizations that have written to DEA in favor of Craker's application include the Multiple Sclerosis Foundation, the Lymphoma Foundation of America, the National Association for Public Health Policy, the United Methodist Church, Americans for Tax Reform, the American Medical Students Association, several state nurses' associations, the Massachusetts Department of Public Health, and the California and Texas State Medical Associations, the two largest U.S. state medical associations. Also, as a result of MAPS' congressional efforts, last fall 45 members of the U.S. House of Representatives signed a letter to DEA in support of Craker's application. Massachusetts senators John Kerry and Edward M. Kennedy have also written to DEA in support of Craker's application.

DEA and NIDA are clearly scared of the truth about medical marijuana and are taking advantage of their lack of accountability to play politics with science and medicine. With nearly 80% of the

public supporting outright legalization of medical marijuana, it's outrageous to make the case that simply researching medical marijuana is "not in the public interest" (as DEA has claimed).

In its statements on medical marijuana, the federal government justifies its concerted opposition and intervention with state laws (such as military-style raids on medical marijuana pharmacies and hospices in California) on the basis that marijuana has not been approved by the FDA as a medicine. Yet, as MAPS' efforts have demonstrated, DEA and NIDA have created a Catch-22 for researchers--on the one hand, denying that marijuana is a medicine because the FDA has not approved it, while on the other hand obstructing the very research that would be required for FDA to approve marijuana as a medicine.

Let's hope that the next administration in Washington will have the courage and common sense to implement evidence-based policies that value science and the human rights of drug users more than blind allegiance to political orthodoxy.



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## Training the Psychedelic Brain

OUR CAPACITY to intentionally choose our states of consciousness is about to expand dramatically, due to recent advances in biofeedback and neurofeedback technology. This technology has the capacity to rapidly train users to improve focus, reduce anxiety, elevate mood, or enhance meditation. It can also train us to produce some of the experiences commonly associated with psychedelic states, such as an expansive feeling of oneness, synesthesia, or travel outside of the body. Companies like NeuroSky and Emotiv have spent millions of dollars to develop the next generation of EEG devices, which are designed to be inexpensive and user-friendly enough to allow just about anyone to use biofeedback to control video games with their brain-wave activity. While biofeedback has been around for decades, recent advances in computer capacity, combined with advances in the understanding of the relationship between physiology and experience, have made biofeedback a tool that just about anyone can use to achieve a dramatically enhanced state of awareness and an overall improvement in quality of life. It can frequently produce results in just a few months that are as powerful as those achieved through many years of meditation, psychotherapy, or other mind-enhancing practices.

The concept of biofeedback games is very simple. The games are programmed to perform better when the player maintains a desired level of physiological activity, such as brain-waves, heart-rate patterns or muscle tension. For example, the speed of a spaceship might be controlled by reducing muscle activity in the forehead. Success in the game serves as a reward, which trains us to continue to do whatever we were doing when the reward was given, whether it is relaxing muscles, or producing a healthy brainwave pattern. It doesn't matter whether we are consciously aware of what we were doing or not. The biochemical mechanisms of learning function unconsciously. Neu-

rotransmitters are released during reward, which strengthen the connections within whatever neural networks are active at the moment. This type of learning is similar to what most of us experienced while learning to ride a bicycle. After falling off a few times, we suddenly could stay up for a while. Then gradually it got easier, until pretty soon we no longer fell down. We can't describe exactly what or how we were learning. We just learned. The same is true for learning through biofeedback. It doesn't require "knowing how," just interest, motivation and practice.

If this technology was used effectively and responsibly, it may produce a large leap in global consciousness. If biofeedback and psychedelic technologies were to be skillfully integrated into well-designed consciousness training programs, the synergistic effects might be powerful far beyond our current expectations of what is possible. Imagine having access at-will to the intuitive, creative, and expansive experience of psychedelic states and the stillness and peace of deep meditation, while remaining lucid and interacting effectively in the everyday world. Not only is it possible for this ability to be achieved by millions of people within the next decade or two, it may be necessary. It is, in my opinion, unlikely that the emotional, mental and spiritual level of development currently achieved by even the top one percent of humanity is sufficient to produce the physical and social technologies that we will need to create very soon in order to sustain the human race. It is fortunate that the capacity to transform a substantial number of us into Einstein-Buddhas is just around the corner.

While this might sound like a premise for a fantasy Sci-Fi novel, I assure you that the hardware and software capacities for this revolution already exist, and that some of the essential groundbreaking research has already been done. For example, by the late 1970's, C. Maxwell Cade had discovered a signature pattern of electrical activity in the cerebral cortex

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of skilled meditators, which he called the awakened mind pattern. This pattern, which is frequently seen during periods of enhanced awareness, is a laterally symmetrical and focused activation of alpha waves (mid-frequency) and theta waves (low frequency). Some variations of this pattern also include beta (fast) and Delta (very slow) waves. Learning to maintain the awakened mind pattern, through intentional meditative practice, or by other means, helps us to access states of inner peace and gain access to our higher wisdom, as well as increase our capacity for creativity and compassion. In my own biofeedback practice, I have observed many clients producing some variation of this pattern. I have seen this pattern associated with experiences of out of body travel, synesthesia, deep stillness, Shamanic healing trance, communication with Spirit Guides, or self-described “psychedelic states”.

Perhaps the most dramatic finding in the study of EEG activity in psychedelic states was the discovery by Frank Echenhofer and David Stuckey that coherent high frequency brain activity within the gamma spectrum is substantially increased during ayahuasca use. Gamma coherence is thought to be associated with increased cortical processing, attention and information binding. Richard Davidson and his colleagues found that gamma coherence was also elevated in skilled meditators during practice. Meditation leads to improved physical and emotional health, and it improves cognition. In my own practice of enhancing gamma coherence through biofeedback, I have noticed an improvement in attention, sensory awareness and information processing.

This correlation between psychedelic and meditative physiology might be the first physical evidence of what many of us know experientially; that at the heart of the psychedelic experience, there is a still, yet intense awareness, which is not very different in essence from the aware-

ness that we can experience during deep meditation, connection with a loved one or with nature, ecstatic dance, complete immersion in the creative process, or during those moments which sometimes come to nearly all of us, when we spontaneously feel a connection to and appreciation of the fullness of life. This awareness comes in many “flavors,” which might be described as immersion in visions, physical ecstasy, or bathing in profound peace.

My clients and I frequently attain these states intentionally through biofeedback, and sometimes maintain the core awareness for prolonged periods, even during challenging circumstances in the everyday world. The most effective protocols for attaining these states vary among individuals, and the specific flavor of state enhancement is still not very predictable, yet there is a high degree of consistency in the physiology that I see when one of these states, which I refer to as states of “engaged stillness,” is achieved.

The EEG generally shows reasonably high alpha and gamma coherence, and either some variety of the awakened mind pattern or a pattern of intense activity usually peaking within the alpha band, and dropping off toward both higher and lower frequencies. This alternate pattern is usually associated with bliss states. In addition to the EEG patterns, a person who is fully in a state of engaged stillness usually has a high level of heart coherence, which reflects the synchronization of the heart rate with the breath, and low levels of muscle tension in the head, neck and shoulders. Personally, I have learned to fairly consistently create a state which is nearly indistinguishable from an MDMA experience. While everyone’s response is different, I have yet to see anyone with all of these simultaneous physiological patterns who is not experiencing a state of heightened presence.

In addition to creating elements of psychedelic states with biofeedback, it is also possible to use this technology to inten-

tionally guide the direction of a psychedelic or other drug experience. Recently, I trained myself to alter my own response to caffeine, through a simple process of drinking coffee while increasing heart coherence and reducing my galvanic skin response, which is related to sweat production. During graduate school, I developed a strong reactivity to caffeine, due to overuse. The response included shaking, an uncomfortable buzzing feeling in my head, and intestinal cramping. After a single session of biofeedback, I was able to retain the heightened sense of being awake and focused from the caffeine, yet without the negative side effects. Much of the effect has stayed with me now for many months. Although the physiology of psychedelic states is much more variable than that of a drug like caffeine, is likely that we could use this basic strategy to train ourselves to eliminate negative aspects of psychedelic use or enhance positive ones.

We might also be able to dramatically increase the amount of information which we can carry back with us from the vast stores of information available to us from the subconscious and other realms while using psychedelics. One strategy that could be used is similar to the process of learning to retain more from deep trance states by creating what we call an “alpha bridge.” The alpha bridge is simply a strong, steady alpha rhythm, which facilitates the transfer of information between the waking mind, which contains substantial beta activity, and the lucid dream state, which is dominated by theta. Although the research on alpha activity during psychedelic states currently gives us an unclear picture, it is likely that a biofeedback protocol that produces increased sensory awareness and clarity, such as enhancing focused alpha activity around the 10 Hz. frequency, might serve to create a bridge from ordinary to

psychedelic consciousness, as it does with other non-ordinary states.

I believe that in order to create the society that we truly desire and deserve, and that will allow for the survival of our species (as well as many others), it will be necessary for hundreds of millions of us to learn to use these advanced technologies, and live in these states of engaged stillness within the next decade or so. While this seems like an impossibly tall order, we already have much of the knowledge that would allow for this massive shift in consciousness to occur. We could probably learn enough, with a few years of intense research, to understand how to reliably and efficiently help people to achieve and maintain higher states of awareness, with or without the use of psychedelics. It would then be possible to create a viable system for training huge numbers of people, through freely available software over the internet, and sensors that would be affordable for just about everyone.

I have recently taken over management of a nonprofit organization, the Inner Active Health Project, which aims to substantially facilitate this process. Our goal is to gather information from scientific studies, biofeedback practitioners, and experienced consciousness explorers of all varieties about the relationship between easily-measured physiology and non-ordinary states of consciousness. We will then create software that is capable of monitoring and skillfully guiding users of biofeedback video games toward the most highly evolved states of being that are within our realm of understanding. In cooperation with researchers, game developers, psychedelic enthusiasts, and other visionary supporters, it seems likely that we can reach critical mass in consciousness in time to help guide humanity toward a truly sustainable and joyful future.

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## Heffter Research Institute Update



George Greer, M.D.  
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THE HEFFTER psilocybin research programs continue to make exciting progress. All subjects in the Harbor-UCLA cancer-anxiety study, directed by Heffter Board member Charles Grob, M.D., have been treated. The study is now in the follow-up phase for the last subjects. The next step is to analyze the data and publish the results.

One of the subjects, and the husband of another, were recently featured on "The Morning Show With Mike and Juliet" on the Fox television network. The online version of the show is mislabeled, but should still be available online at: [www.mandjshow.com/videos/lsd-the-cure](http://www.mandjshow.com/videos/lsd-the-cure). This favorable treatment on Fox daytime TV is a big step in turning public opinion toward seeing psychedelics as medicine rather than something to fear, which can help turn around public policy.

In our other ongoing project utilizing psilocybin for cancer-related anxiety, the Johns Hopkins team has begun treating their patients, but finding it slow to recruit subjects. MAPS members can help by referring anyone who might benefit from the treatment, plus anyone working in the field of cancer treatment and palliative care. Information can be found at [www.canceranxiety.org](http://www.canceranxiety.org) or [www.cancerdepression.org](http://www.cancerdepression.org), which both link to their study Web site at [www.bpru.org/cancer](http://www.bpru.org/cancer). This study is open to almost anyone with cancer, even if they are not terminally ill.

At the Heffter Research Center in Zürich, Dr. Franz Vollenweider's team has been honored with the funding of an Albert Hofmann Fellowship program by a Swiss philanthropist working with the family of Dr. Hofmann, after his passing at age 102 this past April. We are

thankful to Rick Doblin for his support in obtaining this fellowship.

At the end of the year, the current study of serotonin receptor activation by psilocybin in Zürich should be complete, and then the study of patients with obsessive-compulsive disorder will begin. This is an exciting direction because we hope it not only will help the patients with their symptoms, but show us how psilocybin is working in that healing process, which could lead to many other medical applications.

Ultimately, hundreds of subjects will need to be treated before the FDA actually approves psilocybin for medical use.

The results of our current studies should be sufficient for the FDA to advise us on the additional research required for that approval. These studies are also designed to demonstrate enough efficacy to allow investigators to receive grants from the

National Institutes of Health to fund the additional studies required for approval.

Our approach involves both the development of practical medical treatments and an understanding of the effects of psychedelics on human consciousness, with an eye toward demonstrating their distinctive significance to both the public and the scientific/medical establishment. We believe psychedelic research is essential to discovering a more comprehensive, scientifically based understanding of who we are, which is critical to our creating a sustainable culture on this planet.

MAPS members can consult our web site at [www.heffter.org](http://www.heffter.org) for the extensive list of published research projects supported by the Heffter Research Institute.



Randy Hencken, M.A.  
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The medicinal  
application of Ibogaine  
pulled me out of the  
throes of addiction  
and propelled me  
onto a brighter and  
more fulfilling life path.  
I am a living testament  
to the fact that  
psychedelic therapy  
can be miraculous!

## Introducing Randy Hencken: MAPS' New Director of Communication and Marketing

PLEASE CONSIDER THIS the warmest greeting I could possibly give to everyone in the MAPS community. My name is Randolph Hencken—you are welcome to call me Randolph or Randy—and I am the newest member of the MAPS team. I am privileged to take the role of Director of Communication and Marketing. Serendipitously, I finished my Bachelors of Science in business management and was completing a masters program at San Diego State University's (SDSU) School of Communication, when MAPS began seeking a new Communication Director.

Six years ago I was Program Coordinator at the Ibogaine Association in Mexico. It was not a coincidence that I worked with Ibogaine. In my early twenties I was addicted to heroin and cocaine. That part of my life seems like ancient history to me now, and I don't feel it is necessary to write in detail about my addiction. However, my experience is of great relevance to my connection with the MAPS community. The medicinal application of Ibogaine pulled me out of the throes of addiction and propelled me onto a brighter and more fulfilling life path. I am a living testament to the fact that psychedelic therapy can be miraculous!

I met Rick Doblin during my time at the Ibogaine Association. Rick nurtured a relationship between the Ibogaine Association and MAPS, as well as relationships between numerous active members of the community and myself. Valerie Mojeiko made several visits to our facility and she performed hours of research to establish a methodology for measuring patient outcomes with Ibogaine treatment. Unfortunately, due to the worst of undesirable consequences—the death of one of our patients—the project was stalled. At the same time, I left my position and focused my energies on my education at the university. (The ibogaine research project is currently being reestablished, and the Ibogaine Association now has an entirely new staff and a much improved patient safety standard.)

I was the founder and president of SDSU's chapter of Students for Sensible Drug Policy, and I interned for the Drug Policy Alliance in San Diego. Drug policy reform is my passion! I focused all of my graduate studies on the topic. One of my research papers—entitled "Why Won't Teenagers Just Accept Our Anti-Drug Messages? The Folly of the National Youth Anti-Drug Media Campaign"—was presented at the National Communication Association conference in Chicago last year. Another research project investigated whether various forms of parent-offspring communication were related to non-drug use, responsible drug use, or irresponsible drug use. My thesis investigated how non-drug users perceive the importance of illegality in their choice to abstain from drug use, and how various political attitudes correlate with drug policy beliefs. I also tested several arguments for drug policy reform to find which are most effective at persuading people to adopt a more reform friendly attitude. I would be more than happy to share the results of my thesis with anyone who is interested.

I am very excited about my new position at MAPS! I look forward to communicating with our members and helping to increase our member base. It is, after all, our members who make it possible to fund our efforts to demonstrate the therapeutic values of psychedelic medicines and medical marijuana.

## MAPS: Who We Are

MAPS IS A MEMBERSHIP-BASED ORGANIZATION working to assist researchers worldwide to design, fund, conduct, obtain governmental approval for, and report on psychedelic research in humans. Founded in 1986, MAPS is an IRS approved 501(c)(3) non-profit corporation funded by tax-deductible donations from members.

*“Most of the things worth doing in the world had been declared impossible before they were done.”*  
– Louis D. Brandeis

If you can even faintly imagine a cultural reintegration of the use of psychedelics and the states of mind they engender, please join MAPS in supporting the expansion of scientific knowledge in this area. Progress is possible with the support of those who care enough to take individual and collective action.

### The MAPS Bulletin

Each *MAPS Bulletin* reports on MAPS research in progress. In addition to reporting on research both in the United States and abroad, the Bulletin may include feature articles, reports on conferences, book reviews, Heffter Research Institute updates, and the Hofmann Report. Issues raised in letters, calls, and e-mail from MAPS members may also be addressed, as may political developments that affect psychedelic research and use.



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**Rick Doblin, MAPS founder and President**, earned his Ph.D. in Public Policy from the Kennedy School of Government at Harvard University. Doblin was also in Stan and Christina Grof's first training group to receive certification as a Holotropic Breathwork practitioner.



Rick

**Valerie Mojeiko, Director of Operations and Clinical Research Associate**, coordinates projects at MAPS' Love Creek office and facilitates psychedelic research around the globe. Formally educated at New College of Florida and the California Institute of Integral Studies.



Valerie

**Ilsa Jerome, Research and Information Specialist**

Ilsa earned a PhD in psychology from the University of Maryland. She helps MAPS and researchers design studies, gathers information on study drugs by keeping abreast of the current literature and discussion with other researchers, creates and maintains documents related to some MAPS-supported studies, and helps support the MAPS psychedelic literature bibliography.



Ilsa

**Josh Sonstroem, Technology Specialist and Events Coordinator**, earned his B.A. in Philosophy and Religion from New College of Florida and is a chef, musician, poet and technologist. He immensely enjoys the depths of existential experience.



Josh

**David Jay Brown, Guest Editor**, earned his master's degree in psychobiology from New York University, and has been interviewing accomplished thinkers about their creative process for over 20 years. He is the author of *Mavericks of Medicine*, *Conversations on the Edge of the Apocalypse*, and five other books about the frontiers of science and consciousness. To find out more about David's work see: [www.mavericksofthemind.com](http://www.mavericksofthemind.com)



David

**Jalene Otto, Membership and Sales Coordinator**, studied philosophy and sociology at Cabrillo College and the University of California, Santa Cruz. She is a story weaver and a mother.



Jalene

### YES, I would like to join MAPS and receive the *MAPS Bulletin*!

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Student/Low Income members will receive the tri-annual *MAPS Bulletin*.

**Basic Member \$35 – \$49\***

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Paracelsus described nature and creation as a "book that was written by God's finger". During my life I was given this exhilarating and entirely comforting experience: The one who understands how to read this book, not only with regards to scientific research but with marveling and loving eyes, will find a deeper, wonderful reality revealing itself – a reality in which we are all secure and united for ever and ever.

–Albert Hofmann,  
from his autobiography, see page 13