

New Medicine, New Hope: **MDMA-Assisted Psychotherapy** in the Treatment of Posttraumatic Stress Disorder

(Transcription of speech delivered at Bioneers 2008)

Valerie Mojeiko, B.A.
Director of Operations and
Clinical Research Associate
valerie@maps.org

Editors note: MAPS President Rick Doblin Ph.D. and Director of Operations and Clinical Research Associate Valerie Mojeiko, along with Ralph Metzner Ph.D., presented on a panel to about 250 people at the Annual Bioneers conference. "Founded in 1990, Bioneers promotes practical environmental solutions and innovative social strategies for restoring Earth's imperiled ecosystems and healing our human communities." The conference took place in San Rafael, California from October 17-19. The panel was titled, "Studying the healing power of psychedelics." Information about Bioneers and audio files of the lectures can be found at www.bioneers.org



BIONEERS

Revolution from the Heart of Nature

FOURTEEN YEARS AGO Donna Kilgore, a 25-year-old woman, was at home when a stranger knocked at her door. He asked her if her husband was home. She hesitated. Not for very long, but for long enough. He had a gun. She was raped.

Donna screamed and screamed until the police came through the door. She survived. She tried not to blame herself, but she quit all of her hobbies. Quit playing tennis. Started having nightmares of explosions, tornadoes, and bears eating people.

She later married and had more kids, but she just couldn't shake the feeling that her life was not real. She felt like she had gone overseas and became an exchange student. She felt as if she were living with someone else's family.

The details may be different, but this is a story that is unfortunately all too common in our society. Violent crimes, rape, and assault – leave people with the symptoms of posttraumatic stress disorder (PTSD). In the best cases, people with PTSD are mildly disturbed, and in the worst cases they become completely nonfunctional.

Donna's symptoms progressed. She was often irritable. She felt extreme unexplained anger. She had flashbacks, panic attacks, fainting spells, and migraine headaches. All of which are common for someone diagnosed with PTSD. When she was diagnosed, she was prescribed one antidepressant after another and another and another. She tried dozens of different therapists and almost as many different types of therapy. But the very same symptoms she was seeking relief from—acute anxiety, fear, lack of trust, and inability to think about the trauma—were exactly what were preventing her from getting better.

Raise your hand if you know someone who has ever suffered from PTSD. (Most of the 250-person audience raised their hands). That's most of you.

Now raise your hand if you know someone who has ever fully recovered from PTSD. (Many less people raised their hands).

The statistics say that at least 1/3 of people never fully recover from PTSD. Donna was definitely one of those people. Donna was desperate, ready to either "go sit on top of a mountain or go jump off of a cliff." This was when her therapist recom-

mended she take part in our study. Donna became the first of twenty-one people to be treated by Michael and Annie Mithoefer in our flagship MDMA-assisted therapy study in South Carolina.

This study was for people who were treatment-resistant. That is, they had tried other methods of treatment and failed. It was a randomized, double-blind, placebo-controlled trial. This study was also completely legal, and it was even conducted under the US Food and Drug Administration as part of an application to make MDMA into a prescription medicine. In

this study, MDMA was administered twice (and with an optional third) in the context of several months of normal talk therapy with a male/female co-therapist team.

Now why could a treatment like this be effective where other treatments have failed?

I think this is best explained in a quote by the late Laura Huxley, “Psychedelics are extraordinary tools when used with psychotherapy because in one day you can let go of so much and have insight into so much. Sometimes more than in a year of traditional psychotherapy.”

How can we do this? How can MDMA-assisted therapy offer as much benefit in one day as traditional therapy can offer in one year? It is because MDMA can break through the roadblocks to treatment—the roadblocks that were preventing Donna from getting better. MDMA and other psychedelics are the first types of medicines that have potential to be used in conjunction with therapy to actually ENHANCE the therapy. Conventional medications—anti-depressants and tranquilizers—block out or numb the symptoms, but MDMA actually helps the person confront the trauma and the causes underlying the symptoms.

MDMA works in therapy because it:

- *Decreases defensiveness

- *Enhances emotional closeness and empathy

- *Reduces fear associated with emotionally-upsetting thoughts

- *Often contains a strong spiritual component

But perhaps most importantly of all, unlike conventional medications that are taken daily, you only have to take MDMA once—maybe three times at the most! So you can see that it has very little value for pharmaceutical companies to profit from. This is where MAPS comes in as a non-profit pharmaceutical company.

Let's return to Donna's story. When she called the Mithoefers to apply for the study, they began a dialogue known as “creating a safe space.” This is the essential goal of the introductory therapy sessions. Not only did the therapists create a safe physical space, a private office on a quiet street with comfortable interiors, but they also began creating a safe psychological space. They established that Donna would

1) remain overnight after the experimental session, 2) would have someone else drive her home the next day, 3) give permission before any physical contact, and 4) perhaps most importantly—in the event that the therapists believed that Donna was in danger of harming herself or others, Donna would trust the therapists to intervene.

After two or three introductory talk therapy sessions, the experimental MDMA session took place. The therapists' role was to act as guides and supportive figures, but mostly to just stay out of the way and let the medicine do its work. There was often encouragement for Donna to go inwards with eyeshades and headset and to let her own inner experience guide the session.

Some common experiences of MDMA-assisted psychotherapy might include, 1) a physical release of mental anguish, 2) increased attention to relationships and intimacy, 3) extreme emotions that they may not have felt in a long time, such as joy, exhilaration, resolution, or self-affirmation, 4) increased access to memories, thoughts, or feelings—this is particularly crucial to the therapeutic process—that the subjects were not only able to think about these things but to express them.

I would like to share an example from one of Donna's sessions. She said, “It's not just about the rape. It's not just about any one thing. It's so many different things...All I can remember feeling, as far as I can remember, is fear. Heart-stopping, gut-dropping fear...I've kept all of this inside for so long, and it feels so heavy...these emotions—it's like I've been trained to be this way as long as I can remember—to be seen and not heard. Just from that point on, I've tried to make myself as small and inconspicuous as possible. And then the rape happened, and you're headline news...I was ashamed.”

An integration phase follows an MDMA-therapy session. This is when the therapists establish what we call the “safety net,” where they are available to process the emotions that come up with the subject. They met with Donna the morning after the session, and they had daily phone calls for a week. This is important because with this type of work an opening takes place, and the opening lasts longer than just the day of the session. The opening can last for days, weeks, or even months, as the person shifts paradigms from the old ways

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I didn't know I was ashamed.

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After the study was over, Donna said, “To me, the biggest breakthrough—it meant the world to me to be able to look at the fear, to look at the shame. I didn’t know I was ashamed. It was like I’d been wearing the scarlet letter. It was so heavy. When I got out of that session, I felt a hundred pounds lighter...The drug gave me the ability not to fear fear.”

Donna was symptom-free for a year after treatment. But I want to emphasize that this is not a “magic bullet.” When she got a new job in a bad part of town, she did have some symptoms return. Would she benefit from another MDMA session? Maybe. But she can’t have one right now because this treatment is not yet legal (other than in our study). The results from this study will be published later this year, but what I can tell you now is that these results are not unique. A lot of people benefited in tremendous ways from this study. Despite some of her symptoms returning, Donna has been so pleased that she has actually stepped forward to the press about her experiences.

We have so many global social problems—war, violence, intolerance. We have hatred not just of each other but of the earth itself. They massively affect us on a personal scale with illnesses like PTSD. Anti-depressants are really a band-aid, but they don’t treat the underlying causes. The causes not only of the symptoms themselves, but of the reasons why we allow such problems to exist in our world.

MDMA is a product of our frantic culture, but I think we found it for a reason. Whether it is used for PTSD, or prescribed off-label for spiritual growth, MDMA and other psychedelics may have the potential to help us heal ourselves, our communities, and the world.

Bioneers’ mission is to inspire a shift to live on Earth in ways that honor the web of life, each other, and future generations by promoting practical environmental solutions and innovative social strategies for restoring Earth’s imperiled ecosystems and healing our human communities. This is why we are all here.

When I was a student at the California Institute for Integral Studies, my teacher Fernando said, “Before we can heal the world, we must heal ourselves.” What I take that to mean is that we need to start small, by healing ourselves and the people around us. Only then can we know that we are not part of the problem, and we are really working toward the best kind of change.

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I’ll leave you now with this quote from our ally Andrew Weil, “Drugs don’t have spiritual potential, human beings have spiritual potential. And it may be that we need techniques to move us in that direction, and the use of psychoactive drugs clearly is one path that has helped many people.”

Thank you.