

Discovering MDMA-Assisted Psychotherapy: Perspectives From A New Orleans Therapist

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AMY AWOKE FROM AN AFTERNOON nap on the sofa to a stranger's face staring down at her. Before she could utter a sound, he gagged her, raped her, and left her for dead. When Amy found the strength to crawl to her neighbor's apartment, she had to explain who she was, having been beaten beyond recognition. Over the next several years, Amy would attempt to regain control of her life. However, the fear and anguish she experienced on a daily basis would keep her from finishing college, having the family she always dreamed of, or even being able to live on her own. Amy is one of millions of Americans who suffer from Posttraumatic Stress Disorder (PTSD) after experiences such as sexual assault, combat, or responding to violent emergencies.

Individuals with PTSD cannot process their trauma as something that happened in the past; instead, they experience the event over and over again in the present, often with intense emotional and physical reactions. The symptoms can be debilitating, leading to depression, panic attacks, insomnia, substance abuse, and suicide. These patients typically become increasingly detached and isolated, which makes PTSD challenging to treat. Symptoms often lead to impairment in daily functioning, which results in occupational instability, social withdrawal, marital problems, family discord, and too often in suicidal tendencies.

As a psychotherapist, I've seen how psychotherapy and medication can transform people's lives, but I've also experienced frustration and empathy for the often slow and incremental progress people with PTSD tend to make. Currently, Paxil and Zoloft are the only medications approved for the treatment of PTSD. Although these medications can be helpful, they must be taken daily, often with little hope of discontinuing. Many PTSD patients also rely on benzodiazepines (anti-anxiety medications) and hypnotic sleep aids, which have many side effects, contraindications, and can cause physiological dependence. We desperately need a new approach to helping these patients. Rick Doblin, Ph.D., founder of the Multidisciplinary Association for Psychedelic Studies (MAPS), has been working for over 25 years toward the approval of a medication which, when used just 2–3 times in the context of supportive, open-ended psychotherapy, can result in drastic reduction or elimination of PTSD symptoms.

I had been following MAPS' work for several years before I received an email inviting me to a Global Psychedelic Dinner (psychedelicdinners.org) hosted in New Orleans in 2016. It was there that I met Alli Feduccia, Ph.D., and Ray Worthy, M.D., Ph.D. They were there to present the research thus far on MDMA-assisted psychotherapy for PTSD. My interest was piqued, but as I watched the video of Nick, one of the veterans treated in the Phase 2 trials, I knew I wanted to be a part of this work. Fortunately, New Orleans was already on MAPS' radar to become a site for a Phase 3 study of the same therapy. Over the next year, Ray and I developed a friendship based on our common interest in what MAPS was accomplishing. The following year, we learned that New Orleans had been chosen as a Phase 3 study site, and we would be fortunate enough to become part of the team.

Over the next 18 months, I had the privilege of attending the MAPS MDMA

Therapy Training Program (maps.org/training), in preparation for the Phase 3 clinical trial investigating MDMA-assisted psychotherapy for PTSD. In October 2016, at a retreat center in Stony Point, New York, I met other therapists-in-training from around the globe. Michael Mithoefer, M.D., and Annie Mithoefer, B.S.N., the co-therapist couple who with MAPS pioneered MDMA-assisted psychotherapy in FDA-approved studies were there to lead the training. They conducted Phase 2 trials of MDMA-assisted psychotherapy for PTSD in Charleston, South Carolina, and became not only my mentors, but also my confidants and friends.

I will be forever grateful to Michael and Annie Mithoefer for what they taught me both explicitly and implicitly. The framework they teach is a non-directive approach, pulling from a variety of modalities such as Internal Family Systems (D. Schwartz) and Holotropic Breathwork (S. Grof), and the use of music and bodywork where appropriate. They are masters at identifying what each participant needs at any given time, whether it be body work, energy release, or even simply holding a hand. The participants clearly felt supported and I sensed that a deep trust was garnered by Michael and Annie. The love and compassion they have for the study participants was certainly apparent to all of us.

Study participants agreed to have their sessions videotaped in order to be used in our training. We witnessed patients with debilitating symptoms experience increased subjective feelings of connection with self and others; increased insight; the ability to reframe cognitive structures; a newfound acceptance/love/forgiveness/compassion for themselves (and sometimes for the perpetrator of their trauma); personal empowerment; and hopefulness. As I joined my new colleagues, approximately 50 other researchers and psychotherapists chosen to do this work, we had no idea how much we would come to think of each other as much more than just colleagues. Many of the sessions were intensely emotional to witness, and while watching these together with the other therapists I could clearly observe everyone's intense compassion and connection to the material. There were many times when, after watching a session video, there was nothing we could do but sing an inspired song together to express our communal emotional experience. MAPS had chosen well. We were fully ready to learn from these brave participants, from our teachers, and from each other.

Over the past 18 months, I have watched many more hours of these session videos, witnessing many different types of patients, all who have suffered a horribly tragic event in their life that left them broken on the inside. To watch the healing that takes place with MDMA-assisted psychotherapy has been humbling and profound. What strengthened my conviction to

do this work even more, I realized, was that the healing came not from the therapists or the drug, but from deep within the participants themselves. There is a belief, rooted deep in psychedelic therapy, that patients have within them the natural resources to heal and grow. In MDMA-assisted psychotherapy, the therapists facilitate healing by supporting the patient as they explore their trauma in a safe and non-threatening way, but at the same time allowing the participant to guide the process. In essence, the therapists, along with the neurochemical effects of the MDMA provide the conditions for the participant to let their inner-healer do the work. I have always believed that everyone has the ability to move toward wholeness if given the opportunity to do so, and MDMA-assisted psychotherapy seems to facilitate this process in ways I have never seen in any other treatment modality.

New Orleans, in particular, is a city that has experienced trauma on a community-wide level due to hurricane Katrina. Nearly 2,000 people were killed and thousands more were injured or displaced from their homes. With over \$108 billion in damages, Katrina is the costliest disaster in US history. One study showed¹ that rates of mental illness doubled after the storm. For these individuals, and for patients like Amy, the

potential for MDMA-assisted psychotherapy looks promising. I have such deep gratitude and respect for Rick Doblin and everyone who supports MAPS for their dedication, fortitude, and wisdom. My hope is that the Phase 3 studies will pave the way for a new wave of psychedelic-assisted therapies to treat many difficulties including PTSD, addiction, and depression. 🌀

Dr. Shari Taylor is a somatic therapist practicing in New Orleans, LA. She specializes in treating trauma, eating disorders, anxiety, and compulsive behaviors. Using meditation, mindfulness exercises, yoga inspired movement, and talk therapy, she helps her clients bridge the mind-body dichotomy. Dr. Taylor is currently working with the Multidisciplinary Association of Psychedelic Studies (MAPS), alongside Ray Worthy, Ph.D., M.D., in the phase III study using MDMA-assisted psychotherapy for PTSD.

Dr. Taylor holds a Ph.D. in Psychology from Northcentral University, a Master's of Science in Nursing from the University of South Alabama, and a Post-Master's Certificate from the University of Wisconsin-Madison specializing in the field of child/adolescent psychology. She is a Registered Yoga Therapist and teaches yoga both privately and in a class setting. She can be reached at shari@sharitaylor.com.

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¹ <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3276074/>