MAPS
MULTIDISCIPLINARY ASSOCIATION FOR PSYCHEDELIC STUDIES

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Research Edition
BULLETIN

Volume XXVIII • Number 2 Summer 2018

From the Desk of Rick Doblin, Ph.D.

After 32 (and a half!) years, the Multidisciplinary Association for Psychedelic Studies (MAPS)' vision of U.S. Food and Drug Administration (FDA) approval of the prescription use of MDMA-assisted psychotherapy for a wide range of conditions is changing from a caterpillar into a chrysalis. As you read this edition of the *Bulletin,* our FDA Phase 3 multi-site studies will be in their very earliest stages, with screening for subjects underway and perhaps even the first subject enrolled at one of our 16 sites in the U.S., Canada, and Israel. We currently estimate that the studies will take about three years from the first enrollment until the end of 2021, when we project we'll obtain FDA approval for the prescription use of MDMA-assisted psychotherapy for posttraumatic stress disorder (PTSD). This Phase 3 process is a massive $26.7 million experiment, which we have astonishingly raised all of thanks to donations from the psychedelic, cryptocurrency, and other communities, from individual gifts to foundation grants.

Right now is our opportunity to rigorously and scientifically demonstrate the value of MDMA-assisted psychotherapy.

Fortunately, FDA has a program called Expanded Access, also known as "compassionate use." We anticipate that by the end of Summer 2019, this program will allow some treatment-resistant PTSD patients to obtain MDMA-assisted psychotherapy from therapists MAPS has trained without a placebo control group as in the Phase 3 trials, with patients paying for their own treatments. Patients approved to participate in Expanded Access would need to be unable to enroll in our clinical trials, either because they live in areas without Phase 3 sites or where Phase 3 sites are full, or because they have exclusionary criteria that would prevent them from being enrolled. FDA won't consider data from the Expanded Access program for approval purposes, since the program is intended for compassionate use.

As we start our Phase 3 studies in the U.S., MAPS is laying the groundwork for conducting Phase 3 trials of MDMA-assisted psychotherapy for PTSD in Europe, for eventual approval by the European Medicines Agency (EMA) and individual countries in the European Union. This effort is still a caterpillar. MAPS has completed a six-month Scientific Advice Working Party (SAWP) process with EMA, and has reached agreements with EMA about accepting our FDA data and on the essential elements of the protocol design. These elements include the comparison of our manualized psychotherapy for PTSD with MDMA versus our manualized psychotherapy for PTSD with an inactive placebo; a geographic distribution of sites throughout Europe; and about 70 subjects in just one additional Phase 3 multi-site study, ideally including some migrants and refugees with PTSD.

From September 27–October 3, 2018, MAPS is organizing an MDMA Therapy Training Program near Amsterdam for 60 therapists, mostly from countries where we plan to have European Phase 3 sites (including the Netherlands, Czech Republic, Germany, Portugal, Finland, and England), as well as from other countries (like Australia, Afghanistan, Israel, Palestine, and China). We're also proceeding with the training of European therapists, and with regulatory submissions to EMA, EU countries (and the UK), made possible by the almost $400,000 in

donations we've already received for the European Phase 3 trials. When MAPS can proceed into actual Phase 3 clinical trials for EMA approval depends on how quickly we can raise $8.5 million—ideally by the end of 2018. That's a lot of money, but it's only about one-third the cost of our FDA Phase 3 studies, and could help a PTSD population in Europe even larger than that in the U.S.

MAPS is also reaching a major turning point in our efforts to bring the marijuana plant through the FDA drug development system. For the last 50 years, since 1968, there's been a federal monopoly on the production of federally legal marijuana, currently held by the National Institute on Drug Abuse (NIDA), which grows its marijuana at the University of Mississippi. The limitation of NIDA marijuana is that it can only be used in academic research, and could not be sold as a prescription medicine (even if anybody actually wanted to purchase its product, which is not known for its quality). Since drugs tested in Phase 3 trials must be the exact same drug that is proposed for marketing after FDA approval, FDA will not accept NIDA marijuana for use in Phase 3 trials, making such trials impossible. The NIDA monopoly can be ended either through DEA licensing of private domestic production and/or importation.

MAPS has worked since 2000 to assist Prof. Lyle Craker, Ph.D., of the University of Massachusetts-Amherst, to obtain a license from the U.S. Drug Enforcement Administration (DEA) to produce marijuana for FDA-regulated research. On July 25, 2018, eight U.S. Senators sent a letter to Attorney General Jeff Sessions, setting a deadline of August 11 for DEA to accept or deny for a cause all 26 applications to grow marijuana that DEA has received since August 11, 2016—two years previously—when the DEA under President Obama published a rule in the Federal Register announcing that it would license private producers and end the federal monopoly. MAPS is preparing a lawsuit against DEA, should the August 11 deadline pass without action, an outcome which seems likely at the time I'm writing this. By the time you're reading this, our lawsuit might even have been filed. We're also seeing signs that the federal marijuana monopoly has the potential to become a significant election-year issue.

Right now is our opportunity to rigorously and scientifically demonstrate the value of MDMA-assisted psychotherapy. The moment of truth is arriving soon, thanks to the generous support of MAPS donors, the hard work of MAPS staff, the inspiring courage of the patients who have volunteered for our studies, and the unique therapeutic properties of MDMA. With the continued support of MAPS donors, we can go together through Phase 3—and way beyond!

Psychedelically yours,

Rick Doblin

Rick Doblin, Ph.D.
MAPS Founder and Executive Director

MAPS: Who We Are

Founded in 1986, the Multidisciplinary Association for Psychedelic Studies (MAPS) is a **501(c)(3) non-profit** research and educational organization that develops medical, legal, and cultural contexts for people to benefit from the careful uses of psychedelics and marijuana.

MAPS furthers its mission by:

- Developing psychedelics and marijuana into prescription medicines.
- Training therapists and establishing a network of treatment centers.
- Supporting scientific research into spirituality, creativity, and neuroscience.
- Educating the public honestly about the risks and benefits of psychedelics and marijuana.

MAPS envisions a world where psychedelics and marijuana are safely and legally available for beneficial uses, and where research is governed by rigorous scientific evaluation of their risks and benefits.

MAPS relies on the generosity of individual donors to achieve our mission. Now that research into the beneficial potential of psychedelics is again being conducted under federal guidelines, the challenge has become one of funding. No funding is currently available for this research from federal governments, pharmaceutical companies, or major foundations. That means that the future of psychedelic and marijuana research is in the hands of individual donors. Please consider making a donation today. **maps.org/donate**

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ISSN 1080-8981
Visit **maps.org/store** for information about donations and purchases.
The MAPS Bulletin is printed on recycled paper.

Research News

Treating PTSD with MDMA-Assisted Psychotherapy

Phase 3 Trials Starting Fall 2018

MAPS and the MAPS Public Benefit Corporation (MPBC) are making excellent progress towards the initiation of our upcoming Phase 3 trials of MDMA-assisted psychotherapy for PTSD. Our open-label lead-in study is progressing smoothly, with most of the 15 sites ready for the Phase 3 trials. We expect that by the time you read this, we will have started recruitment and enrollment for our main Phase 3 double-blind, multi-site, randomized controlled trial.

As of July 31, 2018, MPBC clinical research staff have completed 13 out of 14 Study Initiation Visits for our open-label lead-in study of MDMA-assisted psychotherapy for PTSD at planned Phase 3 sites across the United States and Canada. The purpose of this study is to provide the final training for our Phase 3 co-therapy teams, to ensure the scalability of the trials to a multi-site study, and to collect additional safety data about the administration of MDMA-assisted psychotherapy. Each new co-therapy team will work with a single participant at their respective study site with supervision provided by MAPS' therapy training team. The open-label lead-in study includes about 85 therapists and 40 co-therapist teams. Also as of July 31, 20 participants have been enrolled and treated in the open-label lead-in study—approximately half of the planned sample size—and five have completed the study. Eighteen of 20 treated have seen clinical significant decreases in PTSD symptoms.

On July 10, the DEA Schedule 1 license was approved for the Boston, Mass., Phase 3 study site. On July 24, Health Canada approved the Section 56 exemption (for controlled substances) for our Montreal study site. The University of Wisconsin-Madison study site is still awaiting its DEA Schedule 1 license. We are still in discussions with the Israeli Ministry of Health about approvals for our two planned Israeli Phase 3 sites. The remainder of the open-label sites have received all approvals and are ready for Phase 3.

MAPS' Phase 3 trials, starting in the summer of 2018, will assess the efficacy and safety of MDMA-assisted psychotherapy in adult participants with PTSD at sites in the U.S., Canada, and Israel. Over a 12-week treatment period, participants will be randomized to receive 12 90-minute non-drug preparatory and integration sessions, along with three day-long sessions of either MDMA or placebo in conjunction with psychotherapy, about a month apart. The primary endpoint will be the Clinician Administered PTSD Scale (CAPS-5), as assessed by a blinded pool of independent raters.

MAPS' Phase 3 trials will be conducted at the following sites:

- Los Angeles, CA | private practice
- San Francisco, CA | research institution
- San Francisco, CA | private practice
- Boulder, CO | private practice
- Fort Collins, CO | private practice
- Farmington, CT | research institution
- New Orleans, LA | private practice
- New York, NY | research institution
- New York, NY | private practice
- Charleston, SC | private practice
- Madison, WI | research institution
- Boston, MA | research institution
- Montreal, Canada | private practice
- Vancouver, Canada | research institution
- Israel | research institution (2)

These Phase 3 trials build on the promising results of MAPS' completed Phase 2 trials. Phase 3 studies are the final phase of research required by the FDA before deciding whether to approve MDMA as a legal prescription treatment for PTSD, which MAPS projects will happen by 2021. Once approved, MDMA will be required to be used in conjunction with psychotherapy in a clinical setting.

In MAPS' completed Phase 2 trials with 107 participants, 56% no longer qualified for PTSD after treatment with MDMA-assisted psychotherapy, measured two months following treatment. At the 12-month follow-up, 68% no longer had PTSD. Most subjects received just 2–3 sessions of MDMA-assisted psychotherapy. All participants had chronic, treatment-resistant PTSD, and had suffered from PTSD for an average of 17.8 years. Based on these results, the FDA granted Breakthrough Therapy Designation to MDMA-assisted psychotherapy for PTSD in August 2016.

MAPS and MPBC are excited to reach this milestone toward bringing the healing potential of MDMA-assisted psychotherapy to those suffering from PTSD. As of July 31, we have reached our funding goal of $26.7 million for the US Phase 3 studies required to gain approval from the FDA for MDMA-assisted psychotherapy for PTSD. Additional funds will be needed for post-approval commercialization expenses, for Expanded Access, for the production of commercial current Good Manufacturing Practices (cGMP)-certified MDMA, our ongoing MDMA Therapist Training Program, and for approval in the European Union through the European Medicines Agency (EMA), as well as for post-approval Phase 4 studies. After the FDA approves legal prescription sales of MDMA, MPBC will be able to cover some of its further research costs through income from the sales of MDMA and the training of therapists, supplementing funding from donations.

There is now a clear path ahead to make MDMA a legal medicine for millions of people suffering from PTSD. Help heal trauma: **maps.org/donate.**

Discussions Started for European EMA Phase 3 Trials—and New Trials in South America

On June 12, 2018, MAPS and MPBC staff met in London with the Scientific Advice Working Party (SAWP) of the European Medicines Agency (EMA). On June 28, the SAWP sent us their written scientific advice regarding our Phase 3 protocol and overall drug development plans. Our team had the benefit of consulting with Xavier Luria, the former Head of Safety and Efficacy of Medicines at the EMA, who also led our team in several practice meetings prior to the SAWP meeting. Overall, the SAWP is sympathetic to our efforts and are willing to let us proceed toward a Phase 3 protocol design, though with a larger size than we originally proposed.

Our original proposal was to include approximately 20 PTSD subjects in an initial European open-label therapist training protocol, where MAPS' therapist trainers monitor videotapes and provide supervision, with another 50 subjects in the controlled Phase 3 study. The EMA requested an increase in the proposed sample size, so we're now proposing to include 70 subjects in the controlled Phase 3, with 35 subjects receiving our manualized therapy with inactive placebo and 35 receiving our manualized therapy with active MDMA. The SAWP also suggested adding additional countries for geographic diversity throughout the European Union. In addition to sites in the UK (2), Netherlands (2), Germany (2), and Czech Republic, we plan to include Phase 3 sites in Finland and Portugal. There may be additional EU sites trained to support investigator-sponsored MDMA research.

In their June 28 scientific advice letter, SAWP was happy with our proposals for MDMA manufacturing as well as toxicology and pharmacology research, and they will allow us to draw from existing scientific literature for approval for the studies. We will likely apply for PRIME (Priority Medicine Scheme, similar to Breakthrough Therapy Designation in the US but with a much lower acceptance rate), a new EMA program to "enhance support for the development of medicines that target an unmet medical need."

From September 27–October 3, 2018, in Landgraaf, The Netherlands, MPBC staff and researchers will conduct a training for approximately 60 therapists who will be participating in European Phase 3 MDMA-assisted psychotherapy for PTSD trials or related research in Europe and elsewhere. Participants will come from many countries, including Australia, Afghanistan, the UK, Netherlands, Germany, the Czech Republic, Spain, Slovakia, Norway, and Finland. This training will be Part B of MAPS' MDMA Therapy Training Program (**maps.org/training**), in which participants will view video case studies of Phase 2 clinical trial sessions and dialogue about therapist competencies. After the training, those who go on to work on a MAPS-sponsored research protocol will go on to complete the remainder of the training program, including experiential trainings (Part C), role-plays (Part D), and supervised therapy sessions (Part E), with optional participation in our therapist training protocol in which subjects receive MDMA in a therapeutic setting. The next European training will take place in January 2019. In the remainder of 2019, we're planning at least five subsequent trainings in the US to train therapists for Expanded Access and post-approval prescription use.

MAPS and MPBC staff in discussions with the European Medicines Agency (EMA) in London, June 2018. L to R: Michael Mithoefer, M.D.; Berra Yazar-Klosinski, Ph.D., Rick Doblin, Ph.D.; and Amy Emerson.

Overall, we are pleased to report that (1) MAPS' efforts to work with the EMA are moving forward well; (2) we're likely to be able to move to Phase 3 research; (3) we'll need to increase the number of subjects and countries for Phase 3 research in the EU, but if Phase 3 generates proof of safety and efficacy, more countries will be ready to review applications for marketing authorization; (4) EMA research is more complex than FDA research; and (5) we have not yet started negotiations with the national health care systems which will ultimately pay for most of the patients who will be treated in the EU.

Excitingly, we're also making progress with MDMA research in South America. In June 2018, the first MDMA-assisted psychotherapy session took place in our open-label therapist training study in Brazil. We've also learned that if we can conduct an eight-person open-label therapist training study in Colombia, and if we have either FDA or EMA approval, Colombia would also approve prescription use of MDMA-assisted psychotherapy for PTSD. MAPS founder and executive director Rick Doblin, Ph.D., believes that many small countries around the world will approve the prescription use of MDMA-assisted psychotherapy for PTSD once we obtain either FDA or EMA approval, and conduct very small open-label therapist training studies in those countries.

Approval from the EMA will require additional funds. MAPS currently estimates that European Phase 3 trials will cost

about $9 million—about one third of the US Phase 3 costs. This efficiency is due to the fact that all the data we provide to the FDA can also be submitted to the EMA.

MDMA Production and Encapsulation

On March 13, 2018, the MDMA that will be used in the Phase 3 clinical trials, and in our toxicology and clinical pharmacology studies, was successfully imported into the United States from our third-party pharmaceutical vendor in the UK. The compound, manufactured by Onyx Scientific Ltd. using a synthetic precursor, is certified under current Good Manufacturing Processes (cGMP), and was synthesized using the same route that will be used to manufacture MDMA for post-approval sales.

As of August 1, we were in the second round of testing for the clinical trial randomization system, working with a third-party vendor providing an FDA-compliant randomization system.

On August 30, 2018, the MDMA that will be used in MAPS' upcoming Phase 3 clinical trials of MDMA-assisted psychotherapy for PTSD is planned to be shipped by our third-party cGMP drug product manufacturer, Sharp Clinical Services, Inc. (US), to the approved study sites. Sharp has received all the necessary distributor licenses, will be performing the encapsulation, and is now manufacturing the MDMA capsules. They will be provided in blister packs specially marked for the clinical trials after Sharp has completed the manufacture of the placebo capsules and the demonstration batch, examined the blend and content uniformity between capsules, determined the dissolution protocol (how quickly the capsules dissolve), and generated stability data.

Drug product formulation studies are complete for the immediate release solid oral dosage form. Hydroxypropylmethyl cellulose (HPMC) capsules will be prepared by third-party cGMP drug product manufacturer, Sharp Clinical Services, Inc. (US). The final formulation includes only MDMA, mannitol, and magnesium stearate. Based on preliminary studies conducted with our previous MDMA supply for Phase 1 and Phase 2 trials, the drug product achieved greater than 80% dissolution at 15 minutes, indicating that the active compound is immediately and completely released from the capsules within 15 minutes. Based on only small differences in formulation, the Phase 3 and commercial formulations are anticipated to be comparable.

As the MDMA dosing regimen is three single-dose treatments per patient, the planned amount of drug product needed for commercial distribution is far lower than approved medications requiring daily dosing.

Plans for Expanded Access in the US

In the coming year, once Phase 3 trials of MDMA-assisted psychotherapy for PTSD are underway, MAPS plans to apply for a special FDA program called Expanded Access, which allows the use of an investigational medical product (one that has not yet been approved by the FDA) outside of a clinical trial. The program's purpose is to grant access to potentially beneficial investigational treatments for people facing a serious or immediately life-threatening condition for which there is no satisfactory treatment currently available. The FDA's website has more information on the Expanded Access program (**fda.gov**). If Expanded Access for MDMA-assisted psychotherapy for PTSD is approved, new sites may obtain approval to administer MDMA-assisted psychotherapy to eligible patients with treatment-resistant PTSD, under a MAPS protocol. MAPS has had promising preliminary discussions with both the FDA and DEA about the Expanded Access program.

An online application for potential Expanded Access sites and their therapy providers will be posted on the MAPS website once MAPS has applied for Expanded Access, anticipated early 2019. An announcement about the application will also be made through the MDMA Therapy Training Newsletter (**maps.org/training**). Since Expanded Access is a U.S. FDA program, only sites in the U.S. and U.S. territories may participate. International programs may become available in the future. The first opportunity for potential Expanded Access providers to receive trainings is expected in March 2019.

Update on the MDMA Therapy Training Program

From June 24–30, 2018, MAPS-sponsored researchers Dr. Michael Mithoefer and Annie Mithoefer, BSN, led a training in Marshall, Calif., in MDMA-assisted psychotherapy for PTSD for approximately 90 students, the largest group MDMA therapy training ever conducted. The trainees consisted of students in the California Institute of Integral Studies (CIIS)' Certificate in Psychedelic-Assisted Therapies and Research (CPTR) program, plus about 30 guests, including a large proportion of medical doctors and psychotherapists, including visiting clinicians and researchers from Israel, the Czech Republic, and Puerto Rico.

From July 16–19, 2018, MAPS-sponsored researchers Dr. Michael Mithoefer and Annie Mithoefer, BSN, Marcela Ot'alora, and Bruce Poulter, together with MAPS Executive Director Rick Doblin, Ph.D., MPBC Executive Director Amy Emerson and MPBC Associate Director of Training and Supervision Shannon Carlin participated in a four-day meeting in Boulder, Colo., to further develop the training program for MAPS-sponsored MDMA researchers and potential Expanded Access sites. Work included adapting the program for a larger audience, planning refinements to the *Treatment Manual* (**maps.org/treatmentmanual**), conducting a revision of the online training module (Part A), and building a standard format for in-person therapy trainings. The purpose of these adaptations is to prepare for the upcoming FDA Expanded Access program in 2019, which will involve a massive expansion of the number of people participating in these trainings.

As of August 1, 2018, 66 participants have been treated in our therapist training protocol for MAPS-sponsored MDMA therapy researchers, growing our capacity to include more trained researchers in the expanding field of MDMA therapy research. For more information about the MDMA Therapy Training Program, visit **maps.org/training**.

Policy and Advocacy News

Update on MAPS' Efforts to End the NIDA Monopoly on Marijuana for Research

by SGT(R) Jonathan Lubecky, MAPS Veterans & Governmental Affairs Liason

Federal cannabis policy has been stalled for the past six months by U.S. Attorney General Jeff Sessions. MAPS continues to engage in a concerted effort to end the National Institute on Drug Abuse (NIDA) monopoly on marijuana for federally regulated research in the U.S., which Sessions continues to protect. In these efforts, MAPS has engaged in multiple strategies involving the Executive and Legislative branches of government, as well as multiple non-governmental organizations. We have met with staff in the offices of Senators Grassley (R-IA), Harris (D-CA), Hatch (R-UT), Tillis (R-NC) and Schatz (D-HI), as well as numerous staff from other offices who have expressed a specific desire to evolve on the issue and are now, at least in part, turning to MAPS for unbiased fact-based information concerning not just cannabis research, but also MDMA-assisted psychotherapy.

In April 2018, MAPS founder and executive director Rick Doblin, Ph.D., and I attended the House Veterans Affairs Cannabis Round Table, and have since formed relationships with a variety of veterans' organizations, including Iraq and Afghanistan Veterans of America, Veterans of Foreign Wars, American Legion, Paralyzed Veterans of America, and Disabled American Veterans. We have also engaged and strengthened relationships with more conservative and libertarian groups such as Americans for Tax Reform. I also attended Robert Wilkie's confirmation hearing in June where I had a brief discussion with him concerning ending the NIDA monopoly.

Pressure is building on Sessions from all corners for a multitude of reasons; the sense in Washington, D.C., is that everyone wants it to end, but few policymakers will expend much time on it. However, MAPS has worked to educate a few key influential senators, six of whom sent a letter on July 25, 2018, to Sessions to increase the pressure. The letter to Sessions states he has until August 10, 2018 to resolve the issue by granting additional licenses to grow marijuana for research. The letter was signed by Senators Grassley (R-IA), Schatz (D-HI), Gardner (R-CO), Gillibrand (D-NY), Klobucher (D-MN), and Coons (D-DE). During the debate on the CBD provisions of the recently passed Farm Bill, Sen. Grassley introduced an amendment which, among other things, would have ended the NIDA monopoly. One of the best tools we have in this debate is the Attorney General's own words about how we "must obey the law even if we don't like it" and then calmly point out, as the Senators did in their letter, that the Attorney General is in fact in violation of federal law by failing to meet legal deadlines for reviewing and responding to all applications for licenses to end the monopoly. In addition, MAPS is planning to prepare and file a lawsuit against the Drug Enforcement Administration (DEA) and Sessions if no actions are taken by the August 10, 2018, deadline proposed by Senators Hatch, Grassley, Harris, and others.

Jonathan Lubecky and Rick Doblin at the House Veterans Affairs Committee Roundtable, April 2018. (Photo: George Allen)

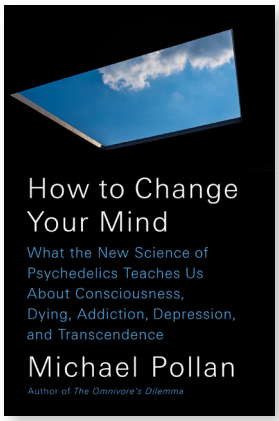
In order to increase pressure on Sessions, we have launched a campaign to convince various allied conservative-leaning and veterans groups to sign on to a letter demanding an end to the NIDA monopoly. We are also reaching out to State Representatives and Senators, some of whom, such as Eric Brakey (R-ME), are also running for Senate or House seats. The goal is to have local elected officials apply pressure to their own states' Congressional delegations.

MAPS in the Media

TIME

Ending America's War on Drugs Would Finally Unleash the Therapeutic Potential of Psychedelics
by Rick Doblin

May 30, 2018 - *Time* publishes a new op-ed by MAPS Founder Rick Doblin, Ph.D., outlining how current drug policies create barriers to psychedelic research that has potential to heal trauma. "U.S. and global drug prohibition has for decades delayed medical research into the healing properties of Schedule 1 drugs. Now that this research is finally being conducted, we're learning that enormous suffering and many suicides could have been prevented over these decades. It's long past time for the mainstreaming of the medical use of psychedelics and marijuana, and for replacing prohibition and criminalization with public health approaches to reducing drug abuse. In a post-prohibition world, we'll finally recognize that," writes Doblin.



San Francisco Chronicle

Michael Pollan Takes a Trip in His Latest Book, *How to Change Your Mind*
by Jessica Zack

May 21, 2018 - The *San Francisco Chronicle* features Michael Pollan's new book, *How to Change Your Mind,* where Pollan explores psychedelic research in the 21st century and his personal experiences with psychedelic therapy.

Buy a copy of a Pollan's new book from the MAPS Store: **maps.org/store**

QUARTZ

Americans Are Excited to Make Psychedelics Mainstream Once Again
by Olivia Goldhill

May 24, 2018 - *Quartz* covers the revival of psychedelic research affirming that, "it's difficult to turn on the radio or open a magazine at the moment without hearing about psychedelics".

PsychiatryAdvisor

MDMA-Assisted Psychotherapy Effective for Treating PTSD in Veterans, First Responders
by Laurel Ranger

May 21, 2018 - *Psychiatry Advisor* covers MAPS' recently published results from the peer-reviewed journal *The Lancet Psychiatry*.

Psych Congress

A Turning Point for Psychedelics?
by Andrew Penn

June 6, 2018 - *Psych Congress* reviews Michael Pollan's new book, *How to Change Your Mind.*

UConn Today

MDMA Opens Door for PTSD Patients to Work Through Trauma
by Kim Krieger, May 15, 2018

HIGH TIMES

The 100 Most Influential People in Cannabis
by High Times, May 21, 2018

PLAYBOY

What a Trip: Celebrating the Past, Present and Future of Psychedelics
by Allie Volpe, May 30, 2018

YAHOO! NEWS

Ecstasy-Assisted Psychotherapy is Bringing Peace to People with PTSD
by Michael Walsh, June 19, 2018

GIVE THE GIFT OF HEALING TRAUMA.

MAPS

Marcela is a MAPS-sponsored researcher who recently completed a Phase 2 trial of MDMA-assisted psychotherapy for posttraumatic stress disorder (PTSD) in Boulder, Colorado. Now, Marcela is leading a Phase 3 trial and hopes to make it a legal treatment by 2021.

You can help make psychedelic medicine a reality for millions of people suffering from PTSD.

MAPS.ORG/DONATE