

Psychedelic Drugs and New Mental Health Treatments

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Researchers are investigating a new generation of drugs for treating mental illness derived from psychedelic substances. A molecule known as psilocybin, for example, found in “magic mushrooms,” appears to be helpful in treating patients with depression. Although these powerful psychoactive substances can be abused for their hallucinogenic/psychedelic properties, several strategies can help assure their therapeutic use in an ethically-sound way for the treatment of mental illness.

One strategy involves an approach known as “microdosing.” A microdose relies on a fraction of the dose that typically causes a hallucinogenic, psychedelic experience. Anti-depressant benefits have been reported with doses a tenth to a twentieth of the psychotropic “tripping dose,” thereby avoiding a full-blown psychedelic experience.

A 2022 study published in the journal *Nature* by researchers from the University of British Columbia confirmed that at one month post treatment, psilocybin microdosers demonstrated greater observed improvements in mood and mental health when compared to non-microdosed controls.

In addition to psilocybin, a faster-acting psychedelic drug known as dimethyltryptamine, or DMT, is also being studied for its

ability to provide durable antidepressant activity for some patients, with benefits reportedly lasting 3-5 months following treatment.

Psychedelic – assisted approaches show particular promise when combined with psychotherapy sessions to treat severe depression or post-traumatic stress disorder (PTSD) or both. Following a microdosing session, an individual may report feeling more emotionally tender, more sensitive to his or her own feelings, and more open to breaking out of neurotic thought loops.

In the hands of a skilled therapist, it may be possible to use that period of reflection to help a patient find his or her way through a past trauma. Integration becomes quite important, as the therapist seeks to “imprint” new insights and create new pathways.

Some clinicians have emphasized that without supportive interventions and appropriate psychotherapy, if a painful experience is unlocked, there is a risk of retraumatization and severe stress. Individuals being treated with psychedelics might be triggered to confront unanticipated and painful memories; alternatively, visceral, uncomfortable or frightening experiences may be

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provoked, potentially making matters worse for an individual who is seeking improved mental health. Accompaniment and therapy in psychedelic treatment is, therefore, particularly important. An already-established, trusted and tested relationship with a psychotherapist is invaluable prior to turning towards approaches that rely on drug-induced alterations of one's mental state.

Although the physiological safety of psychedelics is relatively well established, psychological and psychiatric effects are less predictable, with effects that depend on setting, health, mood, belief systems and cultural environment. A good measure of caution and circumspection are required and these agents should only be used under skilled supervision. People have entered into states of psychosis after experimenting with psychedelic drugs. Experiencing a "bad trip" can leave individuals with flashbacks for years. If someone is already on the brink of psychosis or despair, the wrong experience could be very damaging.

When it comes to psychotherapy, moreover, not all practitioners will necessarily be equally competent. The adage, "Be careful who you allow to walk in the landscape of your mind," implies that care and practical wisdom are called for when pursuing

professional guidance and support. A competent Catholic psychotherapist can assist with treatment from a holistic angle that integrates spiritual, religious and psychological dimensions, all of which may be needed for healing therapies to be most effective.

Young people require special attention and protection from drug-induced effects. Early exposure to mind-altering drugs can turn into disastrous multi-year stretches with various addictions. Mind-altering drugs raise the prospect of pushing youth with fragile, still-developing neural circuits "over the edge" and leading them into a future marked by struggles with substance dependencies.

For more extreme cases of depression, patients receiving larger psychedelic doses than microdoses have also sometimes reported enduring improvements. Advocates for the use of psychedelic substances note that while some may recoil at the prospect of "tripping" or encountering distortions in perception, those facing severe depression already have a highly distorted perception and that such drugs may help derail patterns of neural activity that underlie these distortions.

As clinical work with psychedelic substances advances, we may begin to see the development of

other variants of these molecules that will offer desirable therapeutic outcomes without the "hallucinations" that are often seen as a barrier for these types of drugs.

Recognizing a certain eagerness on the part of the public to become early adopters of psychotropic therapies, e.g. marijuana treatments promoted on limited evidence, it remains important to emphasize how prudence and caution are in order. In the words of one researcher, "public uptake of microdosing has outpaced evidence, mandating further prospective research."

As these drugs begin to appear on the scene for valid therapeutic purposes, it will be important to acknowledge the risks and dangers of non-monitored or self-administered psychedelics, even as we seek to identify and carefully minister to mental health subpopulations that may benefit significantly from these novel and promising approaches.

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