Working With Patients Who Use Psychedelics Outside the Clinical Setting

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Disclosures

Saundra Jain, MA, PsyD, LPC – has served as a consultant, member of advisory boards, and/or speaker bureaus for Eli Lilly, Otsuka, Pamlab and Sunovion.

Learning Objectives

- Explore the current intersection between mental health and psychedelics as it pertains to clinician/patient interactions
- Review 5 options we can utilize to help us best serve our patients
- Review resources for each of the 5 options

Patients Often Do Whatever It Takes To Find Relief

JELLO BIAFRA FOR EVERY PROHIBITION YOU CREATE, YOU ALSO CREATE AN UNDERGROUND.



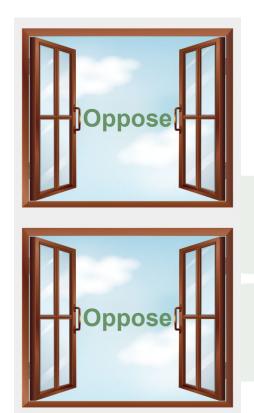
Prohibition
Jan 17, 1920 – Dec 5, 1933

3 Windows Into Psychedelics

Clinicians









Patients

What We Can Expect From Our Patients?





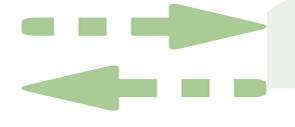
Questions...Questions

The Dilemma We As Clinicians Face

Q: I'm interested in taking a psychedelic substance and I've read the studies. Can you give me a psychedelic substance or help me find some?

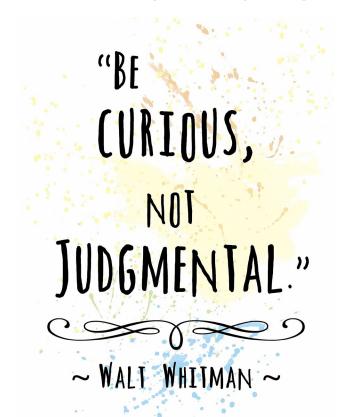
A: "No, I can't help you with this. What you're asking for is illegal and as a therapist my number one concern is being mindful of any risks for us both."







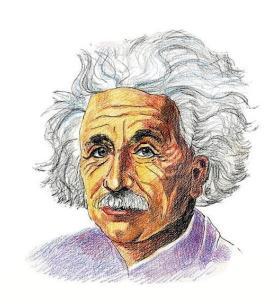
How Might We Approach This Dilemma To Best Serve Our Patients?





Curiosity is Medicine?

"I have no Special CHANTENOTOR



Caution Is The Rule



- Consider how you want to handle these conversations before they happen and be prepared.
- Other than Ketamine, these substances are illegal.

The Need is Great! Personal Stories of Tragedy

...multiple IED blasts, best friend shot in the head standing next to me...many years no treatment at all...

...depression, anxiety, and PTSD...different meds for ~ 10 years...yet to find something that works... ...suffer with anxiety, depression, PMDD, and ADHD...tried all medications... desperately need help...

What Can We As Clinicians Offer?

How Can We Help Our Patients: Legal Psychedelic Experiences

OPTION 1: Join a Clinical Trial

Clinical Trials: Who Paved the Way?













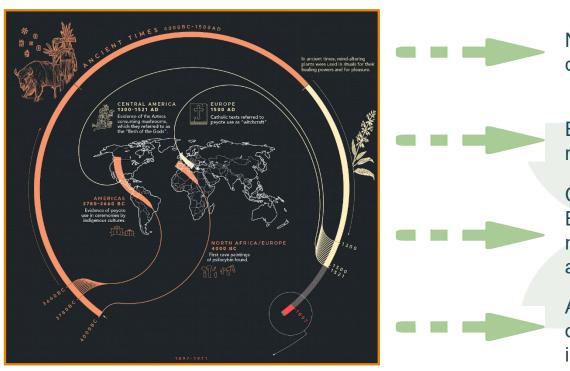






The History is Far-Reaching!

In ancient times (4000 BC - 1500 AD, mind-altering plants used in rituals for their healing powers & for pleasure.



North Africa/Europe 4000 AD: First cave paintings of psilocybin found.

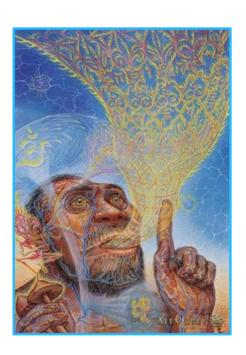
Europe 1500 AD: Catholic texts referred to peyote use as "witchcraft".

Central America 1300 - 1521 AD: Evidence of the Aztecs consuming mushrooms, which they referred to as the "flesh of the Gods".

Americas 3780 – 3660 BC: Evidence of peyote use in ceremonies by indigenous cultures.

https://www.visualcapitalist.com/the-history-of-psychedelics-part-1-of-2/

The Stoned Ape Theory: Interesting – You Decide





The Stoned Ape Theory, presented by Terence McKenna, a renowned mystic and psychonaut, proposes that the evolutionary leap between *Homo erectus* and *Homo sapiens* was a result of a surprising addition to the human diet - Psilocybe cubensis or magic mushrooms.

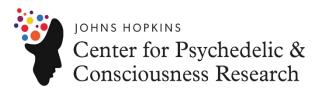
Know What's Happening



MAPS: Clinical Trials



Clinical Trials.gov





European Research Hubs:

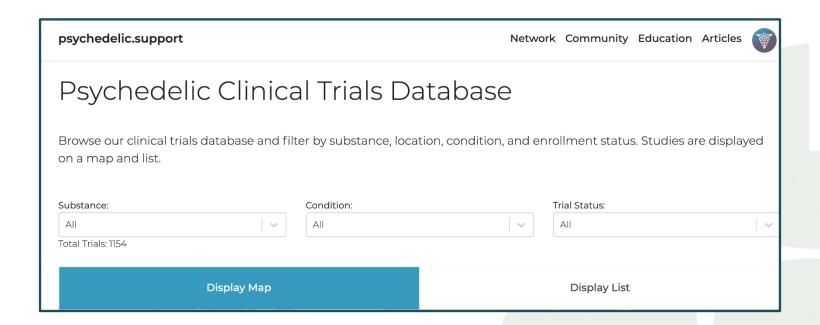
- Imperial College London
- University of Basel
- University of Zurich
- University of Bristol
- MAPS 6 study sites in Europe
- Compass Pathways 11 of 21 study sites in Europe



Center for Psychedelic Medicine



Survey the Landscape



Look At What's Happening Around the World



How Can We Help Our Patients: Legal Psychedelic Experiences

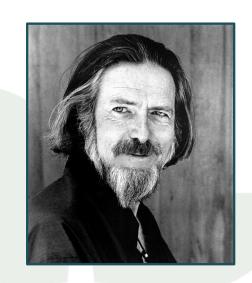
OPTION 2: Psychedelic Integration

Understanding Psychedelic Integration

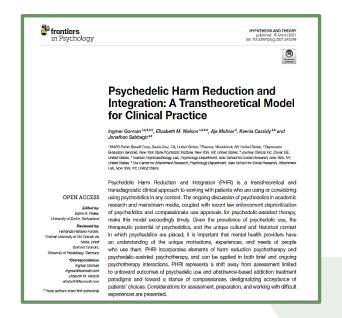
Integration: an act or instance of combining into an integral whole.



Strictly speaking, these drugs do not impart wisdom at all, any more than the microscope alone gives knowledge. They provide the raw materials of wisdom and are useful to the extent that the individual can integrate what they reveal into the whole pattern of his behaviour and the whole system of his knowledge.

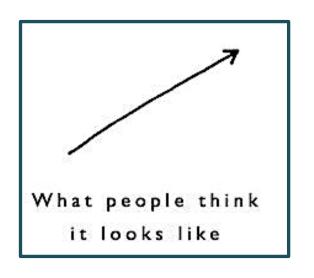


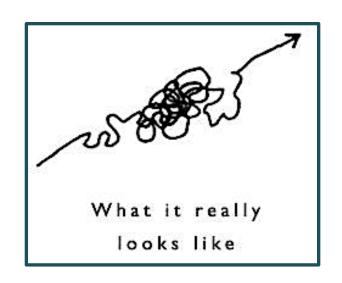
~ Alan Watts



The goal of integration is to merge the psychedelic experience with the patient's daily life in a way that helps the patient have a fuller life with less distress.

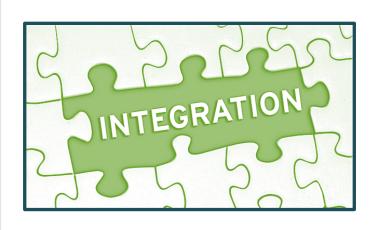
What Does The Process Look Like?





It can be a bit messy!

Why Psychedelic Integration Matters



- Meaning-making
- Preserve the experiences as they tend to fade with time
- Always something to learn as new things surface;
 it's an ongoing process
- Continue to access the experience and the insights after the journey
- Tap into those insights to help stabilize the system when triggered
- Process with another rather than alone a safe place to land

Pearls of Wisdom



Constructing meaning is not isolated to the therapy setting. It is the therapist's responsibility to encourage the patient to pursue activities which help sustain focus on the psychedelic experience...

Such activities could include journaling, meditation...and any other activity that aids in moving the awareness gained through psychedelic experience from an intellectual framework to a holistic framework that incorporates the body.

This method of extending psychedelic integration ensures that experiences are not a momentary, fleeting state, but are embodied to facilitate long-term change.

Gorman I, et al. (2021) Psychedelic Harm Reduction and Integration: A Transtheoretical Model for Clinical Practice. *Front. Psychol.* 12:645246. doi: 10.3389/fpsyq.2021.645246

Become Familiar With Psychedelic Integration Resources



Explore the world of Psychedelic Therapy through our leading directory of providers, groups, and accredited education.



Psychedelic Integration List:
a resource of individuals
(300+) and organizations in the
mental health field who help
people integrate
past psychedelic experiences.



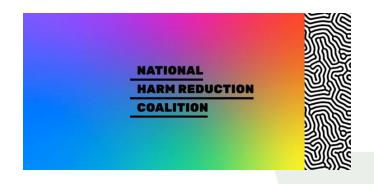
KRIYA Institute is devoted to understanding the therapeutic properties of ketamine and related medicines and offers:

Find a Provider.

How Can We Help Our Patients: Legal Psychedelic Experiences

OPTION 3: Harm Reduction

Understanding Harm Reduction



Harm Reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use. Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.

History of Harm Reduction

- Term coined in 1980s in Amsterdam and UK by drug users and providers who wanted to address rising HIV rates
- Semblances of Harm Reduction can be found in medical writings in the UK as early as 1926 in reference to treating OUD
- Generally contrasted with "zero tolerance", "war on drugs", and abstinence only approaches

One Person's Opinion Maybe Others Agree?

"The U.S. government must stand down and loosen these legal barriers to research and treatment with psychedelics or else it indirectly harms thousands of patients both in the U.S. and across the world each year."

—Wesley Shirola, columnist

"KNOW WHERE YOU STAND, KNOWINGLY." -Yohnnilee OpelKiy Entrikin

Become Familiar With Harm Reduction Resources



DanceSafe is a 501(c)(3) public health organization promoting health and safety within the nightlife and electronic music community. Founded in the San Francisco Bay Area in 1998 by Emanuel Sferios, DanceSafe quickly grew into a national organization with chapters in cities across North America.



The Zendo Project provides professional comprehensive harm reduction education and support for communities to help inform and transform difficult psychedelic experiences into opportunities for learning and growth.





We provide free & confidential emotional peer support! Whether you or a friend are tripping right now, or need help processing a past trip, we're here to help.

Erowid is a member-supported organization providing access to reliable, non-judgmental information about psychoactive plants, chemicals, and related issues. We work with academic, medical, and experiential experts to develop and publish new resources, as well as to improve and increase access to already existing resources. We also strive to ensure that these resources are maintained and preserved as a historical record for the future.

www.dancesafe.org; www.zendoproject.org; www.firesideproject.org; www.erowid.org.

Tips for Clinicians

- Know the law: assist patients in identifying potential risks/benefits to make their own informed choices.
- Consult an attorney: what's happening in your state?
- Know your licensing board: what is their position about this work?
- Know your context: do you live or practice in a conservative or liberal setting?
- Make your best decision: how much risk are you willing to take?
- Be educated and prepared: seek out consultation, education, stay current, and find a mentor(s).

Psychedelic Harm Reduction & Integration (PHRI)

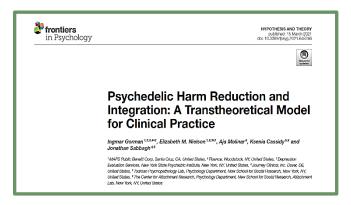
Psychedelic Harm Reduction and Integration (PHRI): a transdiagnostic and transtheoretical clinical model that incorporates principles of harm reduction psychotherapy, psychedelic-assisted therapy, mindfulness-based modalities, and psychodynamic therapy, and provides a framework for examining and working with psychedelic experiences in clinical care without providing the actual psychedelic experience as part of treatment.



The Unfolding Process: "...continuous unraveling of insights about oneself and one's relationships after a psychedelic experience, which can take place over the span of weeks to months."

Gorman I, et al. (2021) Psychedelic Harm Reduction and Integration: A Transtheoretical Model for Clinical Practice. *Front. Psychol.* 12:645246. doi: 10.3389/fpsyg.2021.645246

Psychedelic Harm Reduction & Integration (PHRI)



Psychedelic Integration: the process where the patient integrates the insights of their psychedelic experience(s) into their life

Psychedelic Harm Reduction and Integration: a method of supporting psychedelic integration in the clinical consultation room

Gorman I, et al. (2021) Psychedelic Harm Reduction and Integration: A Transtheoretical Model for Clinical Practice. *Front. Psychol.* 12:645246. doi: 10.3389/fpsyg.2021.645246

Psychedelic Integration: Individual or Group?



Individual





Group



How Can We Help Our Patients: Legal Psychedelic Experiences

OPTION 4: Legal Psychedelics

Ketamine – Psychedelic Tourism - Churches

Ketamine: A Legal Psychedelic



- Ketamine is *not* a classic psychedelic (5HT-2A agonist) like psilocybin and LSD
- MNDA receptor agonist
- Can produce mystical experiences
- FDA approved for Treatment-Resistant Depression
- Off-label use for several mental health conditions
- Routes of Administration (IV, Nasal, SL, IM)

Know the Landscape:

Ketamine Trainings, Ketamine Assisted Psychotherapy (KAP) Programs – Sign Up!



















Psychedelic Tourism





We want to help our patients but...

Informational only and NOT an endorsement of psychedelic tourism or any specific retreat.

Patients Will Ask About Psychedelic Retreats: Know What's Out There & Be Aware of The Risks



- Potency and purity of the medicine not certain
- Threat of sexual assault
- Accessibility issues due to high costs
- Reciprocity with indigenous communities
- Sustainability issues
- Clinician liability regarding illegal substances
- Cost
- Protocol/Credentials/Training

Psychedelic Tourism: Be Informed



Who is Retreat Guru?

We're a team of 20 people who've been on countless retreats. Our experiences have been so profound that we built this site to help people like you find authentic, safe retreats worldwide.

Top Retreat Destinations









Browse Retreats



















Informational only and NOT an endorsement of psychedelic tourism or any specific retreat.

Legal Path As A Church Member



Exempted the Native American
Church from the Controlled
Substances Act in 8-11-1978.
The NAC uses Peyote as a
religious sacrament and their
church is a bona fide religious
institution. You do not have to be
Native American to be a member
of and participate in the NAC.



The UDV is a Christian
Spiritist religion that
originated in Brazil. It is now
practiced in 11 countries.
They use Ayahuasca as a
religious sacrament.
The US Supreme Court in
2009 ruled that the UDV is a
bona fide church.



In 2009, the US District
Court of Oregon found
that a different Ayahuasca
church, Santo Daime, is a
bona fide religious
institution that uses
Ayahuasca as a religious
sacrament.

Informational only and NOT an endorsement of any specific church.

How Can We Help Our Patients: Legal Psychedelic Experiences

OPTION 5: Other Paths to NOSC

All Roads Lead to Rome





Projects: Current and Future

Psychedelics and Wellness Study (PAWS)

An Online Anonymous Survey Investigating the Intersect Between Psychedelics and Wellness (N-3070)



www.PsychedelicsandWellness.com

Psychedelics and Wellness Study (PAWS)





ORIGINAL RESEARCH published: 15 March 2022 doi: 10.3389/lpsyt.2022.831092



Effects of Naturalistic Psychedelic Use on Depression, Anxiety, and Well-Being: Associations With Patterns of Use, Reported Harms, and Transformative Mental States

Charles L. Raison 14, Rakesh Jain 2, Andrew D. Penn 3, Steven P. Cole 4 and Saundra Jain

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University of Cagéari, Italy Giovanni Martinotti

ty of Studies G. d'Asouraio Chief and Pescara, Ital André Luiz Monszi Andrede. ontifical Catholic University of

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Raison CL, Jain R, Penn AD, Cole SP and Jain S (2022) Effects of Haturalistic Psychodolic Use on Depression, Anxiety, and Wet-Being: colations With Patterns of Use laported Harms, and Transformative

Mental States Front. Psychiatry 13:831092 dol: 10.3389/lbsyt.2022.831092

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Survey-based studies suggest naturalistic psychedelic use provides mental health benefits similar to those observed in clinical trials. The current study sought to confirm these findings in a large group of psychedelic users and to conduct a novel examination of associations between amount of psychedelic use and behavioral outcomes, as well as frequency of harms ascribed to psychedelic use. A cross-sectional, online survey was completed by 2.510 adults reporting at least one lifetime psychedelic experience. Participants retrospectively completed a battery of instruments assessing depression, anxiety, and emotional well-being prior to and following psychedelic exposure. Participants also reported preferred psychedelic agent, number of uses, and harms attributed to psychedelic use. Psychedelic use was associated with significant improvements in depressive and anxious symptoms and with increased emotional well-being. These improvements increased in magnitude with increasing psychedelic exposure, with a ceiling effect. However, improvements were noted following a single lifetime use. Strong evidence for benefit of one preferred psychedelic agent over another was not observed, but enduring increases in factors related to mystical-experience and prosocial perspective taking associated with enhanced mental health. Thirteen percent of the survey sample (n = 330) endorsed at least one harm from psychedelic use, and these participants reported less mental health benefit. Results from the current study add to a growing database indicating that psychedelic use-even outside the context of clinical trials-may provide a wide range of mental health benefits, while also posing some risk for harm in a minority of individuals.

Keywords: psychedelics, depression, anxiety, well-being, psilocybin, ayahuasca, harms, patterns of us

Frontiers in Psychiatry I www.frontiersin.org

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Psychedelics and Wellness Study (PAWS)
Two New Scales Available Free

Psychedelic Change Questionnaire (PCQ-26)

Please answer the following questions by rating the CHANGE in your experiences, feelings, and behaviors as a result your MOST RECENT psychodelic experience.

		Very much improved	Much Improved	Minimally Improved	4 No change	Minimally werse	Much Worse	7 Very much worse
As a r	esult of your psychedelic experience, how would	you rate	the char	nge in you	r			
1.	SENSE OF AWE?							
2.	FEELINGS OF EMPATHY?							
3.	FEELINGS OF SOCIAL CONNECTEDNESS?							
4.	SENSE OF MINDFULNESS?							
5.	RELATIONSHIP WITH YOUR LIFE PARTNER?							
6.	FEELINGS OF SEXUAL INTIMACY?							
7.	QUALITY OF SLEEP?							
8.	FEELINGS OF INNER PEACE?							
9.	SENSE OF CALM?							
10.	CONNECTION TO THE UNIVERSE?							
11.	CONNECTION TO NATURE?							
12.	FEELINGS OF LOVE?							
13.	FEELINGS OF JOY?							
14.	FEELINGS OF OPENESS?							
15.	FEELINGS OF CONTENTMENT?							
16.	FEELINGS OF GRATITUDE?							
17.	SENSE OF PURPOSE?							
18.	FEELINGS OF COMPASSION?							
19.	DESIRE FOR WORLD PEACE?							
20.	ENJOYMENT OF LIFE?							
21.	ALTRUISTIC DESIRE? (the belief in or practice of solfiess concern for the well-being of others)							
22.	PHILANTHROPIC DESIRE? (defined as donation of maney or service to serve the needs of others)							
23.	RUMINATIVE THINKING? (computive focus of attention on thoughts that cause feelings of sadness, anxiety, distress, etc.)							
24.	FEAR OF DEATH?							
25.	EATING HABITS?							
26.	FEELINGS OF IRRITABILITY?							

Negative Consequence Inventory (NCI-8)

Please answer the following questions by rating the CHANGE in your experiences, feelings, and behaviors as a result of your MOST RECENT psychodelic experience.

	1 Very much Improved	2 Much Improved	3 Minimally Improved	4 No change	5 Minimally worse	6 Much Worse	7 Very much worse	Does no apply
As a result of your psychedelic experience, h	ow would	you rate	the chan	ge in yo	ur			
1 DESIRE TO DIE BY SUICIDE?								
2 CRIMINAL IMPULSES/BEHAVIORS?								
3 AGGRESSIVE IMPULSES/BEHAVIORS?								
4 ALCOHOL MISUSE?								
5 CIGARETTE SMOKING?								
6 CANNABIS/MARUUANA MISUSE?								
7 BENZODIAZEPINE MISUSE?								
8 OPIATE/OPIOID MISUSE?								



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Psychedelics and Wellness Synergy (PAWS-30)

Psychedelics and Wellness Synergy: A 30-Day Feasibility, Acceptability, and Exploratory Efficacy Study (PAWS-30)



Purpose: To explore the efficacy of an integrative, prescriptive, and trackable participant-managed wellness intervention program performed by individuals who have personally utilized a psychedelic substance within two weeks prior to study enrollment.

Who's Eligible: 1. Age of 18 years old or older, 2. Proficiency in written English, 3. Interested in overall wellness improvement after a self-reported psychedelic experience, 4. Psychedelic experience within two weeks prior to study enrollment, 5. Abstinence from psychedelics for the duration of the study, 6. Not suicidal, homicidal, or psychotic, 7. Not pregnant, and no plans to get pregnant during the study, 8. Access to a smartphone (iOS or Android) with an internet connection, and 9. Agree to read the WILD 5 Wellness Program content prior to beginning the study (available via a link in the Quantified Citizen app).



