

HED Matters

Theme: Psychedelics

Guest editor: Dimitris Liokaftos



HUMAN
ENHANCEMENT
DRUGS

Editorial

This third edition of HED Matters sheds light on psychedelics. Most people associate these substances with recreational use of psilocybin ("magic mushrooms") and LSD during the 1960's and 70's, but in recent years psychedelic drugs have attracted many researchers' attention due to their potential (and perhaps overlooked) therapeutic effects. Thus, as is the case with most other substances, psychedelics may play an important role both for the ill seeking relief from their suffering as well as for the healthy seeking to get *better than well*. In this issue, we have dedicated space to unfold both perspectives, and to do this we have invited Sociologist Dimitris Liokaftos as guest editor, who will introduce the topic more thoroughly on the next page.

The structure of HED Matters

As you may already have noticed from the previous issues of HED Matters, our contributions follow a predefined structure. The reason for this is that we want to ensure a diverse range of perspectives on human enhancement drugs from both researchers, practitioners, and users, and from persons with different backgrounds, training, gender, age, and ethnicity. Our ambition is to provide a sufficient amount of depth and richness while at the same time keeping the pieces fairly short and accessible.

HED Matters typically contains the following type of contributions:

- Recent Advances in HED research
- Book review
- Q&A
- Early Career Researcher (ECR) Spotlight
- Users' Voice
- Practitioner's Corner

We are continuously seeking to improve HED Matters, so please do not hesitate to let us know if you have any suggestions.

Yours sincerely
The HEDN Board



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Dr April Henning

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Guest editor's foreword

By Dimitris Liokaftos, PhD



Psychedelics and human enhancement drugs

Some of you may be familiar with the term 'psychedelics renaissance', which is used to refer to the current renewed interest in and activity surrounding psychedelic drugs. This psychedelics renaissance is made up of diverse developments and often competing forces. For example, there has been a growing scientific interest and investment in psychedelics research and their therapeutic potential, particularly for mental health and depression. New research in this area has been attracting vivid public interest and re-establishes substances such as LSD and magic mushrooms as a legitimate topic of investigation.

Parallel to this, there has been an ongoing use and advocacy movement that emphasises community use and psychedelics' potential for self-development and expression. Working against decades of cultural stigma, strict legislation and resistance in the medical community, this movement has mobilised much of the ongoing policy debates on psychedelics and their legal status. While the present issue of HED Matters was being put together, city councils at Denver, Colorado and Oakland, California have voted for the decriminalisation of the use and possession of naturally occurring psychedelics, such as mushrooms, ayahuasca, DMT and peyote.

Alongside these developments, recent years have also seen tendencies of increased commodification of psychedelics. Shifting away from a subcultural context and towards a mainstream model of the 'wellness' industry, entrepreneurs of psychedelics are now offering a range of novel products and services. Addressing, and in the process construing, a new demographic of customer-users, such entrepreneurs often capitalize on new ways of using psychedelics that have attracted much public attention, such as microdosing.

Psychedelics have been ranked low in terms of harms compared to other substances. Yet, that does not mean that risks are absent, especially as the most popular psychedelics are legally controlled internationally under UN Conventions, and consequently are often sourced from the black market. For those adopting a public health perspective, the greatest concerns have to do with substance quality and dosage, polypharmacy, and lack of appropriate resources for managing potentially distressing experiences, all of which can have adverse effects on mental, physical and social health and wellbeing.

Similarly to other HEDs, reliable expertise on who should be using psychedelics and how exactly is not a given. In this context, different stakeholders that range from scientists, health professionals and users to legalisation advocates and entrepreneurs put forth different assessments of risks and what constitutes proper and improper uses.

Perhaps the choice of topic for this HED Matters issue may have come as a surprise to some of our readers. What is the relation, one could ask, of this family of substances to human enhancement drugs? Are the categories for classifying and analysing HEDs that have already been established in the scholarship applicable to psychedelics?

The answer lies partly on the many parallels that can be observed between psychedelics and other HEDs with regard to their origins, uses, public debates, cultural struggles and policies that have developed around them. An indicative similarity is the continuum of uses that range from therapy to enhancement, reflected in the subtitle of this edition. As in the case of other HEDs, such as anabolic-androgenic steroids and human growth hormone, scientific research on and therapeutic applications of the drugs have the potential for legitimating them in the eyes of existing or potential users.

Equally interestingly, the profile of the substances themselves as well as the people who use them shifts depending on the larger socio-cultural frame. In the case of psychedelics, for example, certain ways and contexts of using them echo the countercultural stance of the 1960s, while others seem more aligned with a capitalist paradigm that values performance and productivity.

Building on these empirical parallels between psychedelics and other drugs that are more established in the world of HEDs research, we wish to probe the theoretical boundaries of the very category of human enhancement drugs. In their own distinct way, the different contributions that make up this issue invite us to think: ‘what is it that makes a substance a human enhancement drug?’



Recent Advances in HED Research: Microdosing with LSD at Maastricht University and the Beckley Foundation

By Nadia Hutten, PhD Student at Maastricht University, The Netherlands



*LSD and placebo containers used
in the microdosing study*

In the last few years, microdosing with psychedelics, like lysergic acid diethylamide (LSD) and psilocybin, has received increased interest and visibility in the media. Users report consuming one tenth of a recreational dose once every three days (Fadiman, 2011; thethirdwave, 2018), to enhance daily functions and/or for health-related purposes (Glatter, 2015; Solon, 2016; Dean, 2017; Fadiman, 2017; Reddit, 2018; thethirdwave, 2018; Tomaszewski, 2018). However, empirical evidence regarding the efficacy of microdosing to improve daily functions, such as cognition, is currently lacking.

How we conducted the microdosing study

Utilizing multimodal study designs, our research at Maastricht University aims to obtain an overall picture of microdosing with psychedelics. With survey studies, we have been able to reach the psychedelic using community and inquire about their motives, microdosing practices, and perceived effects (Hutten et al., 2019), confirming that users' main motivation to microdose is indeed to enhance performance and to increase creativity and mood. Furthermore, users reported microdosing in order to alleviate psychological and physical symptoms such as anxiety and headache (Hutten et al., 2019; Hutten et al. [submitted]).

However, since microdosing usually entails very low 'sub-perceptual' doses, their acclaimed beneficial effects might be due to expectation and bias. Therefore, the Maastricht University/Beckley Foundation research program started a dose finding study to determine an 'effective microdose of LSD' at which mood, creativity, and cognition significantly increase. We tested 24 healthy participants and each participant had four test days (9.00–17.00h). Each test day, the participant received a different dose of LSD (0mcg, 5mcg, 10mcg and 20mcg); these days were about a week apart from each other, to ensure we did not test any residual effects of the previous microdose.

Subjective effects were assessed at multiple points during the test days. Questionnaires were assessed to determine whether the doses were even noticeable (and how long they were noticeable) among the participants, and we also assessed mood changes. We further asked questions as to whether participants felt more productive, happier, and more creative compared to how they normally feel.

Subjective versus objective assessment of drug effects

Beside subjective effects we examined whether changes could be measured objectively, for example by using a computer task measuring attention, but we also assessed creativity with two different tests. This also allowed us to answer the question whether the potential subjective effects (feeling more focused/creative) were also noticeable on objective measurements. Furthermore, we were not only interested in these acute effects on the test days, but also in the potential effects that occurred after the test day. Therefore, the participants received a diary after each test day to keep track of how they felt four days after each microdose.

"... preliminary data revealed that changes in mood and cognition can be observed after single doses."

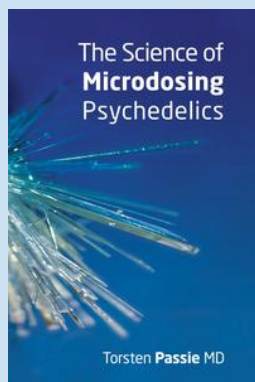
We have recently completed the LSD microdosing study (results are processed and now written for publication); preliminary data revealed that changes in mood and cognition can be observed after single doses. Since microdosers usually take repeated doses over a prolonged period of time (Hutten et al., 2019), Maastricht University and Beckley Foundation are now preparing another LSD microdosing study to examine the cumulative effects of repeated dosing on subjective experience and cognition. For example, if attention improves after prolonged microdosing then, it might also be beneficial in individuals who suffer from attentional disorders. Or creativity, for example, 'thinking outside the box' in having the ability to solve problems which can be beneficial in cases such as depression.

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Book Review: *The Science of Microdosing Psychedelics*

By guest editor Dimitris Liokaftos, PhD



Author: Torsten Passie, MD
Date: February, 2019
Publisher: Psychedelic Press
Price: £19.99 on Amazon

Torsten Passie's work is the first systematic literature review on the topic of low-dose psychedelic usage. Although psychedelics such as mescaline and psilocybin are included in the discussion, the focus of the book is largely on one particular substance, LSD. The literature Passie reviews covers different disciplines and methodologies, including the natural and social sciences. Even though parts of the book seem to be addressed to people with some background in pharmacology, the overall discussion is accessible to a wider audience with an interest in the topic.

Passie's writing is well structured, helping him achieve his main aims: to present, contextualise and interpret data from studies that span across almost 70 years. In doing so, he often provides helpful socio-cultural context for making sense of the scientific research.

Defining microdosing

He also deals head on with one of the most recurring questions on the topic, and one that has created much perplexity: what actually is microdosing? In his attempt to tackle this key question of definition, the author provides context for understanding microdosing both as a concept and practice in pharmacology and beyond (e.g. science and technology). The distinctions offered between micro-dosing and mini-dosing help readers appreciate potential differences in dosages and the effects these may have on users. Even though parts of this discussion may seem technical, they are in fact relevant to the ways the phenomenon has come to the public eye.

In any case, Passie sets the record straight with regard to the history of microdosing. On the one hand, he recognises and nicely summarises the 'trend' that has developed in the last four years, notably with reference to stories around Silicon Valley high-tech professionals and how such stories have mobilised our popular imagination. On the other hand, he demonstrates that interest in the practice can be traced back to several decades. The breadth of the reviewed studies in many ways reflects the interest in low-dose psychedelic use in a variety of fields. It is not only pharmacologists that have experimented with the different effects of microdosing. As Passie shows, such experimentation has taken place since the 1950s in psychotherapy, in spirituality, in recreational contexts, and even in the military.

Risks and placebo

Apart from shedding light on this colourful and largely unknown mosaic of low-dose applied experiments, Passie also highlights a series of issues that seem to come hand-in-hand with microdosing. Here, the significance of proper definitions becomes even clearer not only at the level of concepts but also at the level of practical ramifications for people's well-being.

For example, he discusses risks that any users of strictly controlled substances are facing to the extent that they are sourcing their drugs from the black market. Actual dose, purity and frequency of use are highlighted more than once in the book as areas of concern, and often uncertainty. Significantly, Passie places these risks in their current context. With reference to the recent rise of commercial interests in this area of psychedelic use, he brings our attention to how positive effects of microdosing may be exaggerated by influential players who shape public discourse on the topic.

In fact, as Passie argues, people's perceptions and expectations around any kind of practice may influence to a considerable degree their practices and understandings thereof. This is especially true in the case of microdosing psychedelics, whereby the activity is often defined as one where individuals use 'sub-perceptual' doses of the drugs. Placebo is a key topic that Passie emphasises in the book, and even dedicates a chapter to. Expectation and (auto) suggestion on the part of users may be a key dimension of the microdosing picture, yet one that we know very little about.

An essential piece of work

Torsten Passie's *The Science of Microdosing Psychedelics* makes a significant and timely contribution to both scholarship and the public debate on microdosing psychedelics. In presenting past research on the topic, he fills an important gap in our knowledge. His account of this history of human enquiry allows us to better appreciate the current revival of interest in the topic.

At the same time, he demonstrates that we still know very little about the topic. In light of the lack of solid scientific evidence, most notably randomised double blind placebo controlled experiments, Passie succeeds in problematising the many claims that are circulated with regard to the effects of the practice, whether acute, sub-acute or chronic. His work is a kind reminder that the practice of and interest in microdosing psychedelics is not as new as we may think and that, at the same time, we have much to find out about it.

About the author

"Torsten Passie is Assistant Professor of Psychiatry and Psychotherapy and Director of the Laboratory for Neurocognition and Consciousness at Department of Clinical Psychiatry and Psychotherapy at Hannover Medical School. He is chief physician of a German model project for the heroin-assisted treatment of opiate dependence, and is one of the world's leading experts on LSD. For more than 20 years he has worked in the area of altered states of consciousness."

Source: Bloomberg



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Q&A with Dr Shana Harris on psychedelic-based drug treatment

Q: Could you briefly tell me about your research background and approach?

I am a cultural and medical anthropologist who studies drug use – recreational and problematic – and drug-related interventions such as treatment, harm reduction, and policy. As an ethnographer and qualitative researcher, I have examined these issues in a variety of contexts, particularly in Latin America and the United States. Since 2000, I have researched different topics such as harm reduction in Argentina, medication-assisted treatment in the San Francisco Bay Area, HIV/AIDS risk and injection drug use in Colombia, GHB use in Northern California, and heroin use and recovery in Scotland.



Q: What are you working on currently?

Since 2015, my research has focused on the therapeutic use of psychedelics, particularly the use of a substance called ibogaine for drug treatment (see fact sheet on page 12). Ibogaine is a naturally occurring psychoactive substance derived from various plant species, most notably *Tabernanthe iboga*, and it produces a dream state while awake and visions that can last up to 24 hours. In Gabon and Cameroon, practitioners of the Bwiti religion use preparations containing ibogaine for ritual and healing purposes. Scientists, health professionals, and others have also worked with ibogaine to examine its potential for drug treatment. This work notes ibogaine's capacity as an "addiction interrupter" because of its potential to reduce or eliminate physical cravings and withdrawal symptoms. It is simultaneously used as a tool for introspection that allows for self-reflection about one's drug use and path out of it.

In 1967, however, ibogaine became illegal in the United States. As a result, drug treatment centers offering ibogaine have proliferated in Mexico, where it is unregulated (it is neither legal or illegal). These centers capitalize on their proximity to the United States in order to attract a primarily American clientele that wants to be treated with ibogaine in this legal context. My research examines the use of ibogaine at treatment centers in Baja California, Mexico, in order to understand how this treatment is pursued, provided, and experienced. My goal is to show the multiplicity of experiences associated with using ibogaine to treat addiction and the role of medical travel in seeking and offering this alternative treatment outside of the United States.

Q: How did you identify that research gap and design your project?

I first heard about ibogaine in 2008 at a harm reduction conference in Spain. When I tried to learn more about it a few years later, I found that the majority of information available was either medical or memoir. There was little to no social science (let alone anthropological!) research on the topic. I found this dearth to be almost as interesting as the topic itself, especially since people have been using ibogaine underground for decades to quell drug cravings and withdrawal.

My preliminary research in 2015 and 2016 was really a fact-finding mission: Who was providing this treatment and where was it being provided? Since finding ibogaine centers in Baja California that would allow me to do research with their staff and clients, I have conducted in-depth fieldwork to really explore what it means to use this psychedelic to treat addiction. I have been able to ask more nuanced questions about pre- and post-treatment experiences with ibogaine, the particulars of treating addiction with ibogaine (e.g. cost, treatment protocols), and experiences and perspectives about working with this substance and people traveling internationally for this care.

Q: Doing the kind of research you do, what are the main challenges to being in the field?

This research is unlike any other I have done, and one of main reasons for this is the nature of this type of fieldwork. Ethnography requires that the researcher be involved in the everyday activities at their field site. For me, this means observing and talking to clients and staff members before, during, and after the treatment is administered. I see people at various stages of withdrawal and in the throes of their psychedelic experience – vomiting, crying, laughing, shaking, mumbling – and sometimes that is difficult to watch. It can be emotional and moving, but also distressing. On the other hand, I often interact with people doing the most mundane activities, like cooking food, cleaning, smoking, and making tea. The dynamic and the idle are both part and parcel of ethnographic fieldwork.

Another challenge relates to the ibogaine centers themselves. In Baja California, centers close, centers relocate, and centers take breaks, so the goal of carrying out continuous and consistent fieldwork is not always possible. In fact, my original intention was to conduct research at one specific center, but the sudden shuttering of their doors forced me to rethink my plan. Luckily, other centers have allowed me to continue my work with them, which took some recalibration and rethinking of my research plan.

Lastly, ibogaine treatment, for the most part, is physically and emotionally taxing. Some people are very keen to share their experiences with me, but some are not; they may not feel well or they cannot stop crying or they just do not want to talk. Others take much longer to come out of the psychedelic experience, going in and out of lucidity to the point where they cannot hold a conversation. In this case, this is an ethical issue, since they are in no state to consent to an interview. Not all of the clients who pass through these centers play a direct role in my work as a result.

DrugFacts...

Ibogaine is a naturally occurring psychoactive substance derived from the root of the *Tabernanthe iboga*, a plant known to exhibit psychedelic effects in its users.

The experience of ibogaine occurs in two phases, the visionary phase and the introspection phase. The visionary phase has been described as oneirogenic, referring to the dreamlike nature of its psychedelic effects, and lasts for 4 to 6 hours.

The second phase, the introspection phase, is responsible for the psychotherapeutic effects. It can allow people to conquer their fears and negative emotions."

Source: Wikipedia.

Q: How do potential participants react when you tell them what you're researching and why?

My research has been well received by my research participants as well as the wider psychedelic community. Many people are delighted that I am conducting this research, since they see a need for more work being done in this area. Interestingly, I think most consider my research as an opportunity to promote ibogaine and the therapeutic use of psychedelics in general. Some people I have come across in the field want to see ibogaine legalized in the United States, and perhaps they see my work as a platform for that. The aim of my research is to better understand what people go through to access and provide this unique treatment. So, while the goal is not to explicitly endorse this treatment (as some would hope), neither is it to disavow it.



*Ibogaine shrine in Mexico pictured during Shana Harris' fieldwork.
Source: www.shanaharris.com.*

Q: What do you hope to be able to tell the world about this topic/group/place in the end?

We are in a very interesting moment right now with respect to psychedelics. Over the last two decades, there has been a marked increase in research into the therapeutic possibilities of psychedelics. We are also seeing more and more people, especially in the global north, seeking out these substances for all kinds of reasons, including addiction. In some ways, I think we are witnessing a change around what counts as therapeutic or not, and psychedelics are playing an important and interesting role in this.

Nevertheless, there are individuals and institutions that do not support this shift. What I want people to know about ibogaine is that – like it or not – people are using and providing it. They believe it can help, and perhaps it provides people dealing with addiction something that mainstream treatments do not. I want my work to be a platform for conversation about this complicated phenomenon and the people engaged in it. I believe they deserve consideration, not condemnation.

Shana Harris is an Assistant Professor of Anthropology at the University of Central Florida in the United States. You can read more about Shana and her research at her personal website www.shanaharris.com.



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ECR Spotlight: Psychedelic Microdosing - From Silicon Valley Hype towards Placebo-Controlled Science

By Aleksi Hupli, PhD Student at University of Tampere, Finland

Like many others, I first heard of psychedelic microdosing through the name of James Fadiman. I received his book, *The Psychedelic Explorer's Guide* (2011), from a friend around 2014. The book has a small section describing reports from individuals using "sub-perceptual doses" of psychedelics, and according to Fadiman "as several reports stated, someone taking a dose this low functions [...] a little better than normal". As I had moved to Amsterdam from Finland a couple of years earlier to do a Master's degree in Medical Anthropology and Sociology, and my Master's thesis focused on "smart drugs" or cognitive enhancement drugs used by students in Amsterdam, Fadiman's book sparked my interest into psychedelics as a form of cognitive enhancement.

I have continued to work on the topic of enhancement drug use in my PhD. As one of the reported effects of microdosing psychedelics - such as lysergic acid diethylamide (LSD) - is the ability to concentrate better, in another PhD article I looked at the phenomenon more closely - via Youtube (Hupli et al 2019). But to go back in time a bit, I will briefly sketch out both my own, and international interest into this psychedelic phenomenon.

Participant observation at psychedelic science conferences begins

I had coincidentally participated in a psychedelic science conference shortly after moving to Amsterdam in 2012, which personally was the mind-opening experience regarding psychedelic research.

For instance, discovering about psychedelic research taking place at the Imperial College of London using neuroimaging technology, and at the Johns Hopkins School of Medicine focusing on the study of mystical experiences induced by psilocybin, I became fascinated about the potential of these substances not only to enhance healthy individuals, but also to treat ailments like tobacco addiction and alcoholism.

And this was only the beginning of my interest into psychedelic research (e.g. Hupli 2015). Four years later, in 2016, I was involved as a volunteer at the Interdisciplinary Conference on Psychedelics Research organised by the Dutch OPEN Foundation. The same year people active in the scene founded the Psychedelic Society of Netherlands (PNS).



Aleks Hupli's PhD focus on the use of psychostimulants and cannabis for therapeutic and enhancement purposes in the Netherlands, Finland, and the United States. He joined the Chemical Youth Project in 2015.

I have been involved in PSN from the start, mainly in the role of a video documentarist, but have organized a few events myself; the first focused on ibogaine with Dana Beal, and the second one on “designer drugs” with Dr. Zee, (re-)discoverer of mephedrone (4MMC) or “meow-meow” (among other compounds).

At the end of that year PSN organised a microdosing event with Paul Austin, the founder of the organization Third Wave (referring to the so-called third wave of psychedelic research). What was unique about the event was the availability of pre-weighed microdoses of psychedelics for willing participants, given that Dutch legislation allows psilocybin-containing "magic truffles" sold via smartshops, as well as the presence of cognitive psychology students from Leiden University doing a small field trial related to creative thinking. This open-field experiment eventually became one of the first published studies in this area.

Starting in 2018 the same research group have been guiding volunteers how to measure microdoses with truffles for a longitudinal placebo-controlled field study in collaboration with the PSN and the founders of www.microdosing.nl, a Dutch website and online peer group specialised in psychedelic microdosing. In that same year I was excited to present on the topic at the Beyond Psychedelics conference in Prague where I also discovered the recently published book by Torsten Passie, titled *The Science of Microdosing*. Thus, encouragingly, more publications on psychedelic microdosing are emerging, and are likely to emerge in the near future.

"The most viewed microdosing videos on Youtube were also surrounded by themes like self-monitoring and experimentation which were eventually censored by changed Youtube policies, echoing a restrictive approach to psychedelic research similar to that in the 1970's when Richard Nixon declared his war on drugs."

This is long overdue as Albert Hoffmann, discoverer of LSD-25, already saw psychedelic microdosing as a promising future research area, but for a long time there was no other data than the few reports in Fadiman's book. Those few reports have by now expanded into over 1850 reports from 59 different countries (personal communication with Fadiman in February 2018). And more is coming; on June 10th 2018 www.microdosing.nl hosted a seminar in Amsterdam which included presentations on soon-to-be-launched microdosing research projects.

For example, Beckley Foundation, a UK-based organisation founded by Lady Amanda Feilding to promote research into cannabis and psychedelics, has two microdosing research projects under way.

The first one is a collaboration with the University of Maastricht in which the researchers use a range of microdoses and cognitive instruments to find out what a microdose of LSD really does acutely in healthy volunteers. The second project was introduced at the seminar by Balasz Sigeti via Skype. Sigeti is a researcher who is part of the other Beckley Foundation's microdosing project in which volunteers are researching themselves and preparing their own “blinded” microdosing experiment.

As my co-authors and I discovered, the most viewed microdosing videos on Youtube were also surrounded by themes like self-monitoring and experimentation which were eventually censored by changed Youtube policies, echoing a restrictive approach to psychedelic research similar to that in the 1970's when Richard Nixon declared his war on drugs. As a result, practically all government funding for psychedelic research dried out, and even today research is mainly funded by private donations and non-governmental organisations like Beckley Foundation.

Psychedelic microdosing in the era of the internet

For a long time, the lack of academic publications did not prevent mainstream media outlets, such as Rolling Stone, Forbes, and The Times, from presenting psychedelic microdosing as an increasing practice, especially in the United States Silicon Valley. Although it is difficult to estimate the epidemiology of use among different populations, our recently published article in *Performance Enhancement & Health* gives a glimpse of how knowledge around psychedelic microdosing is developing in social media such as Youtube.

Using the Youtube Data Tool we discovered that similarly to mainstream media reports, the effects of microdosing in Youtube videos are generally described to be mainly positive. However, according to reports analysed by Fadiman and Sophia Korb, red-green colour-blind and anxiety sufferers, for example, have also reported undesirable effects. In addition, as the practice of microdosing is changing the frequency of psychedelic use, from maybe once or twice a year (macrodose) to once or twice a week (microdose), some psychedelic researchers are warning about potential cardiovascular risks regarding frequent use.

In short, expectations of positive effects are not always met with real-life outcomes. However, the era of the internet makes both psychedelic substances and positive reporting about them travel with unprecedented ease, and the phenomenon of microdosing is growing, at least on Youtube.



(Microdosing) psychedelics moving to mainstream

It is significant, in its own right, that mainstream media and academics are increasingly interested in psychedelic phenomena, but as always, there are shadow sides. Not only is the use of psychedelics still illegal in most countries, no matter how small the dose, but its performance-enhancing use is a double-edge sword; in the current “drug war” era the potential benefits of microdosing, such as the ability to concentrate better, is mainly discussed as another tool to demand more out of workers in the workplace. Of course, this is a bit of a dystopic image of the topic, and in many ways far away in the future, as the positive utilization of any psychoactive substances by healthy people (i.e. not in the context of therapy) has had little space in the (inter)national substance (ab)use discourse and debate.

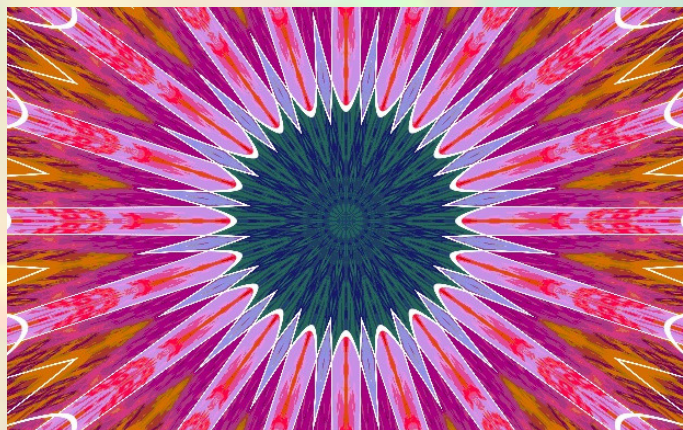
So, while it seems that psychedelic microdosing is opening macro-level discussions on the benefits of psychedelics (both in treating mental disorders and promoting well-being in healthy people), there are many unanswered questions that the aforementioned research projects, and many more, have begun to seek answers to. But even if those studies would undeniably prove the potential benefits of psychedelic microdosing, we have a long way to go to end the war on drugs as even therapeutic research faces heavy restrictions due to historical and cultural stigma around these substances. I am hopeful, however, that it is possible to go beyond (psychedelic) user stigma, exemplified by the post by Becky Wicks in this HED Matters issue. Whether in micro- or macrodoses, and whether for therapy or for enhancement, psychedelics are changing minds to think differently about drugs and our policies around them.

Users' Voice: The Microdose, The Museum and Me

By Becky Wicks, novelist and freelance writer

I watched the people on their bikes, the faces whizzing past. I could feel the microdose flushing my cheeks, the heat of it tingling in waves of new energy, almost prickling my skin. Damn, this felt goooooood. 'Don't drink and drive!', I wanted to shout. 'Take mushrooms and fly!'

But that would have been grossly irresponsible and would likely have gotten me arrested, even here in Amsterdam, where psilocybin is legal. We should never say these things. We should just enjoy the feeling, whatever it is. This new awareness, whatever it is. There was Peace and Serenity, lacing like two snakes around my bicycle. Even an idiot on a skateboard who made me brake too hard didn't phase me. 'Today is a magical day!'



Source: This graphic has been developed for this issue by the artist Val.

I'd taken a homemade microdose after growing my own magic mushrooms and squishing my harvest into teeny chocolates. Admittedly, maybe eating two instead of one was a bit too much. The world was a little squiggly when I returned a skirt to Primark. I stood in the doorway and wondered whether this cavernous soup of consumerism and clothing assembled by teenage laborers would dampen my spirits.

While I queued up, a cute long-haired lady in an I Heart Amsterdam shirt was paying at the register, simultaneously snapping photos of the exchange. Click click click went her phone while the cashier rang up €210 on the register. Both of them were delighted.

On another day I might have rolled my eyes that this 'tourist' was holding up the queue. But today I was floaty light. Primark is not always an emporium of slavery and next month's flea market items. Sometimes, it's a wonderland. I wished the lady well (in my head) as she tottered off, and thought 'what else can I do with this day? Work is so boring. There's no way I'm doing that.'

The Stedelijk museum was packed with everything I didn't understand. Whereas on another day I might have just done a quick lap to say I'd been there, surely today was the day I would gain a real appreciation of modern art?

I laughed for about ten minutes at a woman's gnarling facial expression projected onto the face of a doll. The doll was pinned to the floor by a chair. I laughed for another five minutes on my own at a giant ant covered in fuzzy felt, and then at a line of empty cabinets nailed to a wall in a huuuuuge empty room. Why?!

I don't even know how long I stared at a psychedelic swirl of 1960s street art; it was calling to me.

I'd love to say I left finally understanding modern art, but I did not. And yes I read the little info card things, but it was still all confusing. I definitely think I took too much of the magic. But it was a damn good afternoon.

I could feel the microdose wearing off at around 4.30pm. Peace and Serenity slithered off into a canal as I cycled in the cold to the Foodhallen to meet my friend for dinner. Two women sat at the other end of my bench eating sushi. One of them, who was about 25 and obviously well-travelled had many many many bracelets on. Way too many bracelets, you know when they go right up your forearm? Festivals, concerts, Hindi trinkets, Nepalese love breads, Indian wedding bands...

I imagined them all dipping into pots of leftover pasta, and scraping against public bathroom sinks, and brushing up to water fountains that dogs drink from, too. She kept jiggling the bench when she talked. I had to bite my cheeks. I told myself off for thinking she was doing it on purpose, but how dare she bring all those germs in here on her bangles?

Oh sweet psilocybin why did you leave me? We were conquering the world together. Everything looked better when you were inside me. OK... so the shop and the doll with a chair on its head looked better, but it was a very nice day until the cold and the cycling and miss jiggy hands here pulled me down from my cloud.

I didn't do much work though. Actually, I was feeling quite guilty about all my laziness in general by the end of the day, which might have overridden the joy of Primark and dolls under chair legs, now that I think about it.

I'm excited to start my microdose trial for Amsterdam University soon. This way, I'll at least be getting the same doses as everyone else, and we'll be able to measure how it affects us differently, if at all. How lucky are we, to be living in a place that allows us to experiment this way?

I'm not suffering depression, or anxiety, or any of the other ailments that people say microdosing can help with. I just wanted a mental boost, a kick in the creative department, to see if it might give life a few more silver linings. Who doesn't want some of that, these day?

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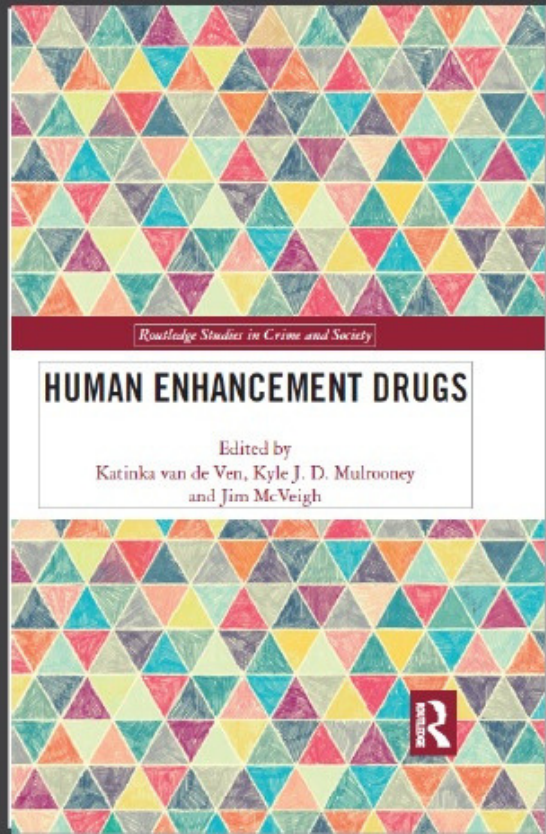


As for my homemade stash? I think next time I only need one microdose chocolate, two was a bit greedy. Definitely only one next time; that might take me to the point of concentration. Two made me dreamy and dizzy and unable to absorb a screen. And there was a bit of visual distortion in Primark, which made the clothing seem woven from unicorn tails, instead of cheap fabrics from China, which was nice.

But before the magic left me, it was remarkably easy to disassociate with any negative feelings. Any time something vaguely irritating or depressing set in, the notion was off on the wind again before I could dwell on it.

Maybe I'll write again when the trial gets underway, and when it's over. I'm already dying to see how other people get on. But for now, I should really do some of the work I didn't manage to do when the world seemed too wondrous to care.

*Parts of this article are extracts from the forthcoming book *The Medicine* by Becky Wicks.*



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Users' Voice: Evolving

By Thomas

The beginning of my journey into psychedelics

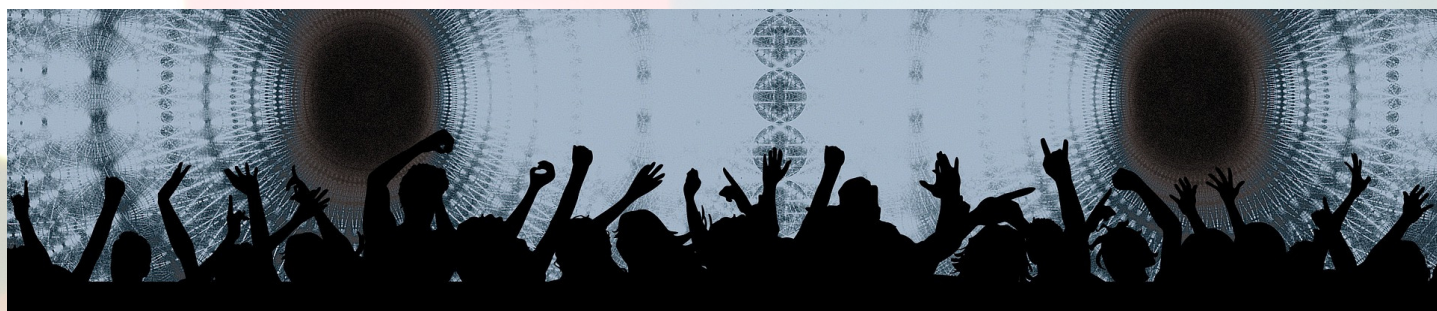
I had my first experience with psychedelics when I was 19 years old in my hometown in a northern Greek province. I had heard from other people interested like myself in all things mushroomy of the 'crazy mushroom' that grew in a nearby mountain.

I was always drawn to the magical dimension of life and had read stories of shamans and how they used such plants. I was therefore curious to experiment and I consumed what I only later found out was a very large dose.

Moving on: LSD and the trance/rave scene

Six years on I had my first experiences with LSD, and soon after I moved to the capital, Athens, where I took LSD many more times. This was a time in my life when I was subconsciously looking for a tribe to belong to and I entered the trance/rave music scene where psychedelics were quite commonly used.

There was a strong underground vibe to that primarily night-time scene, and it was not always safe to be in such an environment, especially when tripping.



My experience was very intense and rather unpleasant as I was not prepared for it and had no guidance. The friends who tried it with me were equally disoriented and we were unable to support each other through this, which left me feeling very vulnerable.

Despite that initial challenging trip, I tried the same variety of mushrooms again on a yearly basis, this time consuming much smaller doses that did not create a state of alarm in me. I was taking walks out in nature and observing my feelings and how my mind reacted, but in a rather controlled way where I didn't feel I was completely losing myself.

I remember this to be a somehow masculine environment in the sense that people using psychedelics didn't really process and communicate their experiences with psychedelics, certainly not verbally.

There was a sense that everyone did their own thing and you were supposed to man up and cope alone with the rough parts that psychedelic experiences can have. And yet I was feeling that LSD was helping me with realising things about myself, becoming aware of issues and blockages I carried since my teenage years. It helped me not only acquire clarity but also see the choices before me and take responsibility about how I wanted to conduct myself and lead my life.

A window into my true self

It was at that time, at the age of 26 or so, that I came across spiritual schools and practices such as meditation, yoga and Osho's teachings. It quickly became apparent to me that people involved in these various fields spoke of and strove for processes and experiences that I had myself tasted through using psychedelics.

The next two years of my life I spent in London where various schools and techniques seemed to be much more integrated and culturally accepted. I found myself in the company of diverse groups of people where I used not only LSD but also psychedelics that were new to me, such as 2C-B and DMT.

I found the drugs helped me deal with deep-seated issues I've had, such as my fears, my sense of identity and my direction in life. Perhaps for the first time I acquired a certain confidence about who I was. I felt better equipped at understanding how my own mind worked and felt much easier in my own skin and in a sense stronger when faced with life's challenges.

For quite a few years I managed to hold onto these insights that psychedelics brought to me and the space they opened in my heart without actually using the drugs or having a desire to do so. Art became a big thing my life and I could see it nurtured and spoke to that same inner space.

Turning to Ayahuasca

It was almost eight years on, in 2014, that I decided to have my first ayahuasca and san pedro (mescaline) experience in a ceremony setting. I had moved back to Greece and was expecting my first child, and I believed the experience would further fortify me as a person and help me become a good and supportive dad.

During that ceremony I had a very powerful physical and emotional experience; yet the large team of shamans visiting from Latin America who facilitated the ritual provided expert guidance and a very safe and supportive environment.

Having taken what the shamans refer to as 'the medicine' (i.e. ayahuasca), I and several others in the same ceremony group went through what are referred to as 'therapeutic' or 'getting well' processes, such as vomiting, diarrhoea or crying intensely, which are seen as ways the body releases itself from toxins and pent-up pressures.

"Much of this experience is beyond verbal description, it cannot be spoken [...] I was in fact feeling that I was engaged in a therapeutic process for all humanity. I felt I could relate to joys and sufferings far vaster than my own self, becoming empathetic with various groups, such as for example people of Europe, of my country, of men."

For a long period following the ceremony I was in a much better position to control my smoking habit and other addictive behaviors, not eat junk food, wake up at the time I wished, speaking my mind more freely, and generally do what I considered to be right without being distracted. That empowered mood lasted almost a year after that first ceremony.

Actually for the very first month I almost felt like a superhuman, like I could change the world. The funny thing is that much of this experience is beyond verbal description, it cannot be spoken. I can be an adult now and try put things in words and concepts but during the psychedelic experience I found that an inner child was navigating the whole process and things were very clear.

It was obvious where the light was and I was intuitively drawn towards it. And where I could sense suffering or pain I could take that light and go investigate it and see what it really was. I was in fact feeling that I was engaged in a therapeutic process for all humanity. I felt I could relate to joys and sufferings far vaster than my own self, becoming empathetic with various groups, such as for example people of Europe, of my country, of men. The choice was clear to either fold unto myself or open up and, by taking responsibility for myself, experience and become an active agent in wider struggles.

Different worlds

I had two more ceremonies since then with psychedelics, including peyote, as well as smoking DMT and magic mushrooms with friends. Especially in the ritual context there was something very respectful about the way these substances were approached. That, in addition to the aftermath of the experience, made me see psychedelics' value for being healthy and true in one's life.

I just cannot fathom how governments have been able to keep this suppressed and convince people that this is almost a para-religious phenomenon or a decadent narcotic. What is interesting is the recent scientific interest in these drugs, and I have heard mixed responses to that from the communities closer to the shamanic paradigm.

Some see a very positive opening up on the part of science, a building of bridges. For others, it is the same old loop, only more sophisticated now, with scientists typically bringing it all down to their own terms. Some go as far as saying that scientists are missing the essential point, partly because they don't have a personal experience of what they are studying.

I think there's something lost in translation between these two worlds, I would say it's about two different types of software. The shamanic one doesn't speak to your cerebral side, it speaks to your core.

Upcoming Events and Conferences

22nd International Council on Alcohol, Drugs and Traffic Safety Conference

Edmonton, Alberta: Canada: 18-21 August, 2019

<https://t2019.org/>

International Network for Doping Research (INDR) Conference

Aarhus, Denmark: 22-23 August, 2019

<http://ph.au.dk/en/research/research-areas/humanistic-sport-research/research-unit-for-sport-and-bodyculture/international-network-of-doping-research/conference-section/>

5th Contemporary Drug Problems Conference

Prato, Italy: 4-6 September, 2019

<http://ndri.curtin.edu.au/news-events/ndri-events/cdp-2019-conference>

Lisbon Addictions 2019

Lisbon, Portugal: 23-25 October, 2019

<http://www.lisbonaddictions.eu/lisbon-addictions-2019>

International Conference on Fitness Doping and Public Health

Copenhagen, Denmark: 24-25 October, 2019

<https://www.conferencemanager.dk/fitnessdoping-publichealth2019/information.html>



WADA's 5th World Conference on Doping in Sport

Katowice, Poland: 5-7 November, 2019

<https://www.wada-ama.org/en/events/2019-11/world-conference-on-doping-in-sport>

Let us know!

... if you are aware of any upcoming conferences and events

Publications by HEDN members



The human enhancement drugs network represents a diverse group of productive scholars from different academic disciplines. Below you can find the most recent work published by the members of the network.

Delargy, I., Crowley, D., & **van Hout, M.C.** (2019). Twenty years of the methadone treatment protocol in Ireland: reflections on the role of general practice. *Harm Reduction Journal*, 16(1).

Gleaves, J. & **Christiansen, A.V.** (2019). Athletes' perspectives on WADA and the code: a review and analysis. *International Journal of Sport Policy and Politics*.

Goldman, A., **Pope, H.G.**, Bhasin, S. (2019). The health threat posed by the hidden epidemic of anabolic steroid use and body image disorders among young men. *J Clin Endocrinol Metab*, 104(4), 1069-1074.

Hauger, L., **Sagoe, D.**, Vaskinn, A. et al. (2019). Anabolic androgenic steroid dependence is associated with impaired emotion recognition. *Psychopharmacology*, 1-10.

Henning, A. & **Dimeo, P.** (2019). Perceptions of legitimacy, attitudes and buy-in among athlete groups: a cross-national qualitative investigation providing practical solutions (report compiled for the World Anti-Doping Agency). University of Stirling.

Heyes, A. & **Boardley, I.** (2019). Psychosocial factors facilitating use of cognitive enhancing drugs in education: a qualitative investigation of moral disengagement and associated processes. *Drugs: Education, Prevention and Policy* (In press).

Hupli, A., Berning, M., Zhuparris, A. & Fadiman, J. (2019). Descriptive assemblage of psychedelic microdosing: Netnographic study of Youtube videos and on-going research projects. *Performance Enhancement & Health* (In press).

Kolind, T. & **Bjønness, J.** (2019). 'The right way to be a woman': Negotiating femininity in a prison-based drug treatment programme. *Punishment & Society*, 21(1), 107-124.

Kiepek, N., **van de Ven, K.**, **Dunn, M.**, & **Forlini, C.** (2019). Seeking legitimacy for broad understandings of substance use. *International Journal of Drug Policy*, 73, 58-63.

Krøll, L. (2019). Students' non-medical use of pharmaceuticals to manage time in everyday life crises. *Drugs: Education, Prevention and Policy*.

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Mulrooney, K.J.D., van de Ven, K., McVeigh, J., & Collins, R. (2019). Steroid Madness - has the dark side of anabolic-androgenic steroids (AAS) been over-stated? *Performance Enhancement & Health*, 6 (3-4), 98-102.

van de Ven, K., Zahnow, R., McVeigh, J. & Winstock, A. (2019). The modes of administration of anabolic androgenic steroid users (AAS): are non-injecting people who use steroids overlooked? *Drugs: Education, Prevention and Policy*

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